

African Migrant Women's Understanding and Construction of Sexuality in Australia

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Abstract

This paper presents findings from an exploratory study that explored how Shona-Zimbabwean women living permanently in Australia understand and construct sexuality in following migration. Main concepts within sexuality under scrutiny in this paper therefore include: gender, embodiment and intimacy. A core finding of the study presented in this paper is how the Shona-Zimbabwean women primarily constructed sexuality in the framework of gender (womanhood) and thus understood both concepts synonymously. The women perceived that the body and intercourse were culturally constructed as means for procreation only. Intimacy and intercourse for relationship-building were perceived to be Western concepts but became a welcome addition to the migrant women's constructions of sexuality post-migration. This project was informed by feminist methodology and collected data using in-depth, semi-structured focus groups in Adelaide, South Australia from fourteen women aged 29 to 53 years, across four focus groups. A significant contribution of this research is that a better understanding of how sexuality is understood across cultures highlights the relevance, or lack thereof, of Western concepts of sexuality for ageing (African) women. It also brings to question the appropriateness of current policy, service delivery and health promotion in regards to sexual wellbeing in a contemporary and multi-cultural Australia.

Keywords: Africa, Zimbabwe, sexuality, intimacy, cross-cultural, Australia.

INTRODUCTION

According to Benjamin Franklin, the only things certain in life are 'death and taxes'. Perhaps sexuality should also be added to the list of universal certainties (Dune, Mapedzahama & Rahman, 2014). However, unlike death and taxes the parameters and inclusions and therefore constructions and understandings vary from one sociocultural group to another. Further,

cultures are ever-evolving and intermingling especially in the context of migration. As such, the constructions of sexuality from one's mother culture may absorb or influence the culture of the nation to which they migrate. Although this assertion may be generally understood it is rare to find literature which clearly articulates how people from various sociocultural groups construct and understand sexuality. Yet, such an understanding is imperative in the context of health. Without an understanding of how migrant groups in multicultural settings, like Australia, construct sexuality programs aimed at improving and supporting sexual/reproductive health and wellbeing may not be pitched in such a way which invites participants or addresses their key concerns.

Aims and Origins of the Research

Considering that sexuality is such a broad term and therefore encompasses many factors this exploratory study specifically sought to understand how migrant Shona-Zimbabwean women living in Australia constructed gender (e.g., how gender influenced understandings of sexuality), embodiment (e.g., the relevance of the body to sexuality) and intimacy (e.g., the role of intimacy in sexuality). Its inception resulted from an Australian Research Council (ARC) funded Discovery Project (DP110101199) held by the last three authors. The ARC project aimed to explore the impact of ageism and sexism on the first post-liberation generation of women to reach old age. In the course of recruiting participants for the ARC project it was noted that the majority of the women who elected to participate were overwhelmingly Caucasian Australians. The research team felt that the resultant sample was due to an assumption about sexuality which may not apply to all ageing women in Australia – namely that Australian women understood and constructed sexuality in a similar fashion and could thus interpret the foci of the ARC project in similar ways. However, before an exploration of ageism and sexism within experiences and understandings of sexuality in varying ethnic groups could take place it was important to first investigate how sexuality is constructed amongst non-Caucasian Australian women. As such, the research team developed daughter-projects using principles and methods similar to the ARC project which explore the sexual subjectivities amongst ageing African migrants living in Australia (the focus of this paper) as well as Aboriginal and Torres Strait Islanders thereby drawing on diverse samples of women.

The concentration on gender, embodiment and intimacy were chosen as the focus of discussions about contemporary sexuality as they have been cited as the factors which may influence how women relate to sexuality and sexual wellbeing (Fileborn et al., 2014). This understanding came after research from the late twentieth century. During this time sexuality and sexual wellbeing were defined using a functional model that prevailed in sexual studies about men and was also adopted for women under the rubric of 'female sexual dysfunction' (FSD) (Marshall 2006). Further, social psychological and sexological researchers identify key ways in which female sexuality differs conceptually and practically from men (Hartley & Tiefer, 2003; Nusbaum, 2004; Basson et al., 2005). For instance, Loe (2004) purports that "[w]omen's perspectives and opinions are largely absent when it comes to the Viagra phenomenon. Sex is still seen as male terrain, with women being silent partners at best" (2004, p. 303). Loe's participants demonstrated the existence of a sexually subjective realm that existed beyond that identified by the physical performance framework applied to men. In doing so, this research showed that a woman's sexual understanding included how the woman relates to her gender, her body and the link between intimacy and sexual wellbeing. However, non-Western variations must also be recognised because how women from one cultural group understand and construct sexuality can be quite different from another.

As such, this investigation is necessary as it addresses an aspect of migrant well-being largely ignored in the social sciences to date; namely, the role of (cross)cultural understandings of sexuality for migrant women in general and for African women specifically. Doing so can

inform the relevance of these concepts for African women ageing in Australia and highlights the appropriateness of current policy and service delivery in a contemporary and multi-cultural Australia. Further, this project chose to explore the experiences of these women as they are a significant source of cross-cultural and diasporic data on sexuality as many have experienced how constructions of sexuality have shifted overtime. This is highlighted by the evolution of the term sexuality and its relevance in the Shona-Zimbabwean context.

Historical versus Contemporary Context of Sexuality

In the history of written and spoken languages the term 'sexuality' is extremely recent. For instance, in 1789 sexuality was defined as the "action or fact of being sexual" (Etymology Dictionary, 2014). In 1879 it meant the "capability of sexual feelings" and by the 1980's sexuality meant "sexual identity" (Etymology Dictionary, 2014). Considering that the term sexuality is quite recent, and that its meaning has changed over time; it follows that it has different meanings in different cultures. For example, as this paper will highlight, for Shona-Zimbabwean women, traditionally and primarily, their 'sexuality' is understood as linked to their experience(s) of womanhood, wifehood and motherhood. This reorientation in perspective (from the experience of being sexual to the experience of being a woman) highlights two issues: 1) there is little research which has explored how African women understand and construct sexuality and more importantly, 2) there is no one, clear or universal definition of the word sexuality and/or how it relates to women and their sexual wellbeing. As such, an understanding of the role of culture in the construction of sexuality can be informed by theories which focus on the role of sociocultural scripting.

Constructions of Sexuality using Script Theory

In order to understand how understandings of sexuality may influence sexual wellbeing it is important to note the pathways by which sexuality is constructed. This paper draws on research by Simon and Gagnon (1986, 1987, 2003) who found that human sexuality is constructed via public, interactional and private sexual scripts – much in the same way that cultural scripts are the product of public, interactional and private social scripts (Goddard & Wierzbicka, 2004).

Public sexual scripts are historical and contemporary constructions created, influenced and reinforced by attitudes and interpretations presented in popular culture and media (Simon & Gagnon, 1986, 1987, 2003). As such, people may be encouraged to engage in sexual activity only with those who are publically prescribed as appropriate (Simon & Gagnon, 1986) - thus, fulfilling interactional schemas of sexuality. Constructions of sexuality can be created through private mental processes which involve inner dialogue (Emerson, 1983). These private mental processes can influence the way individuals internalize sexual scripts and consolidate perceptions and constructions of sexuality. Simon and Gagnon (1986) noted that private sexual scripts are "the symbolic reorganization of reality in ways that makes it complicit in realizing more fully the actor's many-layered and sometimes multicoated wishes" (p. 99).

Privatizations of sexual expectations, behaviour and constructions are bound to public and interactional social scripts (Kant, 1958). In this regard, the ways in which people think about women's sexuality is linked to how it is publically represented (i.e., cultural norms) and how women experience in interactional encounters (i.e., intimate relationships). Considering the many factors which influence how people understand and construct their sexuality, this paper provides new insight into the role of public, interactional and private sexual scripts for Shona-Zimbabwean women in the diaspora.

METHODS

In order to get at the core concepts of sexuality, as understood by the Shona-Zimbabwean migrant women, two of the researchers, Dune and Mapedzahama, both Shona-Zimbabwean migrant women themselves, deconstructed and adapted concepts of sexuality (in relation to embodiment, intimacy and gender). In doing so, the researchers translated as many words and terms as possible into Shona terminology. On occasion many words denoting whole concepts like sexuality, embodiment or intimacy did not have an equivalent and/or succinct Shona translation. As such the focus groups were conducted in both Shona and English. This strategy was highly relevant as Shona people switch between English and Shona within their day-to-day dialogue (Mapedzahama, 2007). In this respect, Shona highlights the manner in which Shona-Zimbabwean women speak about their experiences, feelings and understandings while broader and less personal Western concepts and ideologies - which the Shona women themselves understand through Western ideologies (i.e., a product of colonialism and a colonial, westernised education system) - were discussed in English.

Research Design

This project engaged qualitative design informed by feminist methodology (reference). Such methodology has proved successful in garnering phenomenological experiences from women of various backgrounds and was therefore the methodology of choice for this exploratory study. Data collection was conducted in August 2012 in Adelaide, South Australia and consisted of fourteen women across four focus groups. The focus groups took from two and a half hours to just over four hours each to complete – more time than initially predicted.

Focus group discussions explored a broad range of concepts including: 1) what it is like being a Shona-Zimbabwean woman in Australia versus Zimbabwe (cross-cultural understandings of gender), 2) how the women felt about how their bodies looked, were perceived and worked over time (embodiment), and 3) how the women experienced sexually intimate relationships (intimacy, embodiment, sexual function/performance, gender) including their role in sexually intimate relationships and how has their role changed (if at all) since being in Australia. The current paper will specifically address and present data pertaining to the third topic discussed in the focus groups.

Data Analysis

The data were analysed for content by identifying topics and substantive categories within participants' accounts in relation to the study's objectives. In addition, Nvivo 10 was used to ascertain topical responses and emergent substantive categories, coding particularly for word repetition, direct and emotional statements and discourse markers including intensifiers, connectives and evaluative clauses.

Recruitment

Participants were recruited via free plain-English advertisements through newsletters, mailing list updates and websites of Mapedzahama's existing networks which include: 1) African Studies Association of Australasia and the Pacific, 2) African Women in Australia Inc., and 3) African Professional Australia. We also employed convenience sampling to draw women from our personal contacts.

Ethics approval for the study was granted by the University of New England's Human Research Ethics Committee.

Sample

Recruitment resulted in a sample of fourteen women, between the ages of 28 and 53 (see table 1). Notably, all but one woman had completed a tertiary qualification and all were employed professionals. All the women had children and the majority had three children. All but one

participant had been married, three of whom had divorced or separated from their partners and another woman was widowed. Ten of the women were 40 years of age or older and all had migrated to Australia within the last 15 years (between 1999 and 2008). Reasons for migration were varied with the majority being linked to the perception of better opportunities available in Australia.

RESULTS

The data from the focus groups produced rich and interesting insights into how Shona-Zimbabwean migrant women understand and construct sexuality. The following section provides examples of how the women defined sexuality, the role their bodies played within a sexual context and how intimacy was viewed or experienced within Shona-Zimbabwean culture.

Constructs and Understanding of Sexuality

In order to explore how the women first understood the concept sexuality they were asked how they would describe the concept using the Shona language and within the Shona-Zimbabwean context. Initially the women's responses seemed very decisive and clear.

I would say, hukadzi (womanhood)

We think the Zimbabwean women. Sexuality might mean something to do with women in general.

When asked what the word sexuality meant in Shona-Zimbabwean culture many women seemed very sure about gender as a prime feature.

V3: Or as a gender.

V1: Gender, sex, maybe health wise.

Virginia & Tinashe : Umm umm umm.

V1: Yet in Zimbabwe probably we had something similar, but maybe we didn't understand what it really means when we say sexuality.

Virginia: What is it similar in Zimbabwe.

Tinashe: Yes, Yes.

V3: They were doing gender, gender, gender.

V1: (talking in the background) Gender.

When asked to further explain what they meant by gender with respect to sexuality the women described the context which has influenced the way they construct and understand sexuality as a concept. Interestingly, these descriptions demonstrated the cultural nature of constructions of sexuality.

Talking about sexuality in African women and Shona, I was like is that word up? Do we have a vocabulary like that in our culture?

Do we even acknowledge sexuality as that way? Sexuality the way the Westerners call it? I didn't find that we describe the word the same.

Even with the Western culture it's something that is new. Before I think it's all to do with you know, women being liberated, before we never used to have this word sexuality.

Only after independence...It's a new thing sexuality, you know. It's developing now.

Although the women had identified what sexuality meant to them in Shona-Zimbabwean culture, the evolution of sexuality as a concept in Western culture and its recent debut, there

was still confusion about what the concept actually meant. In one focus group the discussion went as follows:

- V1: We didn't understand what it really means when we say sexuality.
 V3: So I get confused between gender and sexuality. Those two.
 Tinashe: What do you think might be the difference?
 V3: Gender is more of you know; are you a girl or a woman
 V1: (Interrupting correcting her) Boy
 V3: Boy, your sex and what have you, but sexuality then...
 V2: Doesn't it encompass, sexuality encompass gender as well?
 Tinashe: Does it?
 V1: I think so
 V2: (Agreeing) I don't know. That's my understanding my thinking
 V1: Or maybe with your project which way do you want us to take it?
 Virginia: We want you to take it as you understand it. There is no right or wrong answer
 V1: Myself I'm still thinking gender describes whether you are boy or a girl but sexuality explores your feelings in your personhood.
 V2: Whether you are man or a woman, your feelings and emotions and yeah.
 Tinashe: But feeling and emotions about?
 V2: Your feelings and emotions about who you are...
 V3: (In the background) sex (laughing)
 V2: And about sex, and about
 V5: (talking in the background) Family
 V2: Family health in your person
 V4: It's more holistic

From this section of the focus groups it is clear that the women do understand that sexuality, as defined in Western cultures, is multifaceted and includes tangible and relatively intangible elements.

Embodiment: The role of the woman's body

The women were also asked about how they perceived their bodies with respect to sexuality. Participants unanimously indicated that the female body was socially constructed, in Shona-Zimbabwean culture, as an object for one's husband and primarily for procreation.

It is about the husbands...

Your role and duties as a woman in the Shona culture is to bear children, look after and please your man, look after the household and the welfare of your children.

When it comes to sex, it's sex to have children that's all.

Following a discussion where one of the women described a situation where her relatives had insisted she stop taking a shower with her husband as it was perceived by the community to be undignified the group responded:

Tinashe: It's not just that you have to please the husband you have to please the relatives.

V4: Yes

Tinashe: And other people's families. So your sexuality and your body isn't just your husband's.

V1: No no no no the community.

V5: The community.

V1: At large.

V5: The people around you.

Tinashe: So who does your husband's body belong to?

[Silence]

V6: To me.

V1: To no one according to African culture.

[All laughing]

V1: He can do whatever he wants like for example, for me, if I sleep around [act like a prostitute] I would be an embarrassment. Everyone would just reduce me to that and that would be it. So men can sleep around and people would say 'Aha, that's what men do'.

Tinashe: Ohh so he is allowed to do it.

V1: Yes they are allowed to do it. So then his body is his but mine now belongs to him

Tinashe : And [sexual] satisfaction is his as well. So he has his enjoyment and he has his own body, but your body belongs to him and the community and your enjoyment belongs to him, is for him.

V1: Yes, it's for him.

Tinashe: Ummm.

Upon reflecting on the male and female body some women put the idea of a woman's body as belonging to her husband in a biblical, and more equal, context. The following focus group discussion highlights the advantages and realities to understanding the woman's body in biblical and cultural terms.

V1: Also going back to that of the church as well. You find that; sorry this is one part I wanted to talk about, that the bible says that a woman, your body is for your husband and your husband his body is for his wife.

V3: (Agreeing in the background) is for you as well.

V1: Which means; that means if we are intimate I am his and he is mine.

Virginia: But, in reality what we were talking about, that a woman is the one who is (interrupted)

V1: (Interrupting) in reality yes

Virginia: The husband then goes to do his things like an elephant

V1: I know. That is outside the bible.

Virginia: Therefore, culture and religion clash.

V1: Exactly

V4: It depends with whether he follows religion or the African way.

Virginia: Ahh, ok.

The 'African way' is further scrutinized by one participant who recounts a story of how the importance of having children was demonstrated and accomplished by any means necessary.

Always ready to have sex if he wants it or demands it; even if you are not interested or in the mood. He would rape you, and there is nothing you can do about it. Nowadays the man would be arrested if the woman reported him to the police. Some men depending on how much addicted to sex they were; they would demand to have sex even if you were having your period. Ha! If he is incapable of having children (impotent) (of-course him and his family/relative would blame the woman and if they know that he falls short in that area); the elders - his aunts etc. would collaborate with the woman's aunts, that is if they want them to stay together; they would arrange that at night one of the man's cousin and/or, brother come and have sex with the woman in order to produce children (top family secret). So you Guys you see, a woman was totally regarded as nothing and/or slave.

Such an account was one of the more intense examples of how women's bodies were valued for their physiological abilities. Such a process however begs the question of how women felt about such traditional norms.

Intimacy...or the lack thereof

Understanding sexuality also encompasses how an individual experiences their sexuality. In line with the research aims the women were asked about the role of intimacy in their construction of sexuality. The women's comments indicate that admissions and publicising of one's intimacy with their partners was culturally frowned upon.

V1: And back home there is no intimacy, you cannot hold your hand and people will be like "ahh" unlike here they can sit there and yeah. Even in the kitchen they are together; even when you are at home when you greet him and you hug him people will be like why is she hugging him.

Virginia: So, how do you show intimacy then in Zimbabwe?

V1: There isn't?

V3: Because it is like [traditional clapping hands greeting gesture], Good Morning in a traditional manner. Even to your husband.

[All agreeing]

V2: It is a social greeting that shows respect. Yes.

V3: No hugging and kissing.

V3: Yes, or you kneel on the ground

Virginia: To your father. Is it?

V1: My husband, I was told by my mother-in-law when I called him by [his first] name. "Who are you calling; who are you calling? Say father or someone's father".

V3: So, you do not call by [first] name, it is not dignified; calling him saying 'John'

V3 Yes, definitely he is father. People actually say father.

V2 He is father to your kids. And he will call you mama/mother as well he won't call you by your first name.

V3 "Mai Rufaro (Rufaro's mother)" "Baba (Father)"! or [women would call their husbands] "Shewe (my Lord)".

In another focus group the women's discussion revealed similar sentiments about the context within which intimacy could exist.

Tinashe: How would intimacy, so kissing, touching, holding hands, those things.

V1: When you're in your bedroom then you can kiss.

V1: But when you're in there (interrupted)

V2: (interrupting) my children say 'Mama you never kiss daddy'. But it's not like you don't kiss, but where do you kiss?

Virginia: So they don't see, the child doesn't see.

V2: So they don't see and when it comes out anywhere you're holding each other in the street, you're holding each other where, at our house I (interrupted)

V1: (Interrupting) When I came here I would feel really embarrassed seeing people walking and holding each other in the street. So much so that even knowing that people were kissing, my God! I would look down because they embarrassed me.

Tinashe: Really

V1: Eh-hey.

Tinashe: Why?

V1: I'm getting used to it. They would say you're a prostitute. You want to show everyone that you lust after each other. You show that in the bedroom. So I'm thinking I'm right there in the daylight and they're starting.

Tinashe: So in public you are being sexual...

[All agreeing]: Yes!

Tinashe: So no one is supposed to see. Your children are not supposed to see, other people are not supposed to see it.

V1: No, you do that in your bedroom.

V6: Me ahh! Myself from the family that I grew up, because they were Christians the only thing they would kiss for is when they greet and then...

Virginia: You'd be told

[Laughing]

V6: You would never see them again, holding hands, or kissing.

V4: Or only when they get married.

V5: Yaa wedding day.

[All laughing]

Virginia: First and last.

V7: I saw it so fascinating people kissing during weddings.

V4: That's the only time you ever see.

V6: (Agreeing) That's the only time you ever see.

Virginia: And socially sanctioned to...

[All agreeing]: umm umm!

Another group of women indicated that intimacy was a normal part of their sexual lives. However, displays of intimacy were mediated depending on the location and culture the women inhabited.

V6: So I think this culture will keep on going and our children will never see mum and dad kissing when they see you kissing it's when you have a function.

[All agreeing and laughing]

V3: As for me, me and my husband used to kiss in the house when my daughter was around, but not outside where there are many people, but in the house we used to kiss each other because she has to know that we are, mum and dad they kiss. If she sees it outside she has to know that even my mum and dad they kiss.

V6: It's normal.

V5: That's normal.

Tinashe: The intimacy is normal.

V3: But not in front of people it's not.

Tinashe: So would you and your husband hold hands in public?

V3: Yes, at the shops, we used to.

Virginia: In Zimbabwe?

V3: Not in Zimbabwe, only here.

Tinashe: Why not in Zimbabwe?

V4: You'd be [scared] from doing so.

V2: People would say she's fed that man a love potion [poison].

Virginia: (Laughing hard in excitement)

Tinashe: (Surprised) Really?

V2: They would say the man was being given a potent love potion [poison]!

Tinashe: Why?

V2: You don't walk holding hands with a woman.

In this excerpt the women indicate that having migrated into another culture allows the women to construct and engage with intimacy differently in Australia than they would in Zimbabwe. Sanctions on intimacy in favour of what seemed liked dignified public behaviour,

and avoiding embarrassment or the presumption that one was promiscuous, was also relayed in the following story referred to in the earlier section on embodiment:

V4: (Interrupting) and another thing is that this thing is just deep for our culture. I remember one, because myself I lived in the village for a long time with my husband, because that time that we started living in the village and we, during the evening when myself and my husband go in the bathroom and have shower together, after a few days my mother-in-law called me and said its embarrassing you can't shower.

[Others laughing]

V2: And yet we sleep together so what about showing

Tinashe: Yes

V4: They don't want to see us going in the shower and shower together

Tinashe: Why?

[All answer – with same answer]: it's embarrassing!

V5: It's really embarrassing

Tinashe: Then your sexuality, because then you have a sexuality – It's clear.

[Laughing in the background and talking in chaos]

Tinashe: That you are both naked, enjoying the shower together.

V4: For sure we stopped.

Tinashe: Really?

V4: We had to stop

Tinashe: So you were enjoying it, you and your husband

V4: We were enjoying it but we had to stop. My husband would go shower himself and I would go and shower myself [laughing].

These focus group extracts demonstrate that intimacy, as the women understood it, was not constructed as a relevant part of their sexual relationships. Instead demonstrations of respect through traditional practices were of particular salience to the maintenance of traditional values and roles.

DISCUSSION

This exploratory study explored how Shona-Zimbabwean women living permanently in Australia understand and construct sexuality in the context of migrancy. This investigation sought to better understand the role of cross-cultural understandings of sexuality in sexual wellbeing for African migrant women. Key concepts within sexuality under scrutiny included: gender, embodiment and intimacy. The data suggests that sexuality cannot be divorced from what it essentially means to be a woman. The indistinct nature of how these women constructed and understood sexuality is akin to that in other cultural groups in Australia – primarily Aboriginal and Torres Strait Islanders – who have historically embraced the sanctity of women's and men's business (Campbell & Brown, 2004). Within women's business aspects of sexuality are defined in relation to one's biological, sociological and community roles - which cannot and should not be pulled apart (Bell, 1998). Whilst moving to Australia may have revealed another culturally specific (or Western) construction of sexuality (and thus womanhood) these women did not seem to have integrated these constructions into their everyday experiences, understandings and expectations of sexuality, their bodies and all aspects of intimacy. The expanse of data which resulted from the up to four hour long focus groups provides rich insights into the extent to which the women took on a cross-cultural approach to womanhood and sexual wellbeing and will be presented in forthcoming publications.

As mentioned, the development of Western sexual health and wellbeing frameworks are relatively recent. Within such frameworks sexuality is dissected and deconstructed in order for

the individual to better identify each area and those which may require care and attention. Sexuality is partially understood as the ways in which people use their bodies to enact their sexual desires – sexual behaviour (Moore & Rosenthal, 2006). In this sense, sexual behaviour seems to imply an element of agency which these women indicate is not how they perceive sexuality to be constructed or experienced. This was exemplified, for instance, by their perception that women's bodies are used for procreation and for the sexual satisfaction of their husbands. As such, the only area in which issues may be legitimised is reproductive health. Shona-Zimbabwean culture may thus stigmatise seeking help for intimacy or sexual satisfaction concerns as an admission of sociocultural sexual deviancy.

Although distinguishing the many and imbued areas of sexuality have proven beneficial in the development of programs to improve sexual health and wellbeing outcomes amongst Western women of all ages (Sheerin, 2000), women from non-Euro(self)-centered cultures may be confused about the role or benefit of sexual health and wellbeing programs. Although these educated and skilled women clearly have the propensity for being able to understand and intellectually navigate concepts outlined by Western frameworks sexuality remained unclear and somewhat intangible to them.

The findings from this exploratory study also corroborate the validity of sexual script theory which purports that sexuality is constructed from public, interpersonal and private scripts (Simon & Gagnon, 1986, 1987, 2003). This is noted from the fact that culture, a product of public, interpersonal and private social scripts (Goddard & Wierzbicka, 2004) had such a great influence on these women's understanding of sexuality; from how they would (and were expected to) behave in public especially with regard to their sexual partners to how they defined gender and sexuality. As such, future research would benefit from the maintenance of sexual script theory at its foundation and/or analysis to better understand the role and influence of (cross)culture on sexuality for African migrant women.

Conceptually this research offers support for diverse and various understandings of sexuality as influenced by culture. As such, the recent construction of sexuality in Western contexts or the term sexuality cannot be used without scrutiny. Doing so would assume a generic and global interpretation of the term which may in fact exclude or demean other ways of engaging with the concept. Much like global feminisms, sexuality, which is influenced by social and cultural contexts, should be explored as varying and dynamic especially within multicultural countries like Australia. From this however a key issue arises. Considering the recent nature of the term sexuality it is perhaps likely that ageing women from various backgrounds living in Australia may not define or understand sexuality in the way that it has been constructed in the last 30 to 40 years. This may mean then that due to the influence of religion and socio-political factors which promoted clear sex roles and relegated women to domestic duties women over 45 in Australia may be more likely to construct sexuality in terms of womanhood than not. As such, constructions of sexuality may be more likely a result of one's generation over one's culture. More research on what influences constructions of sexuality are these required to clarify the origins of women's understanding irrespective of culture.

LIMITATIONS

This exploratory study unearthed several interesting and previously undocumented understandings with regards to cross-cultural constructions and understandings of sexuality. The study has also highlighted key areas which require further consideration and investigation. Most pertinently the participants were all well-educated and many were nurses indicating an extensive and contemporary understanding of sexuality from many perspectives due to exposure to how others navigate relationships and sexual health/wellbeing via

patient/client interaction. While these aspects of the sample helped the researchers to identify key concepts in relation to sexual wellbeing across cultures it is not representative of the many non-White migrants who may not have high levels of education, who do not speak English with enough fluency to attain mainstream employment, who do not prescribe to Christianity (which is the most popular religion in Australia and is the Eurocentric foundation upon which many Australian systems were historically founded) and are viewed as social outsiders/others by the general Australian public. People in these migrant groups may have a different configuration of views on sexuality and may have difficulty navigating health and wellbeing systems which are Eurocentric and contrary their spectrum of knowledge.

CONCLUSION

A better understanding of how sexuality is understood across (and within) cultures highlights the potentially limited relevance of Western concepts of sexuality for ageing African migrant women. Whilst there is still much to investigate and disseminate (publications forthcoming) in regards to this research it is clear that there are stories which have yet to be heard. This is highlighted by the fact that while the focus groups were predicted to take an hour and a half to two hours they in fact ranged from two and a half hours to just over four hours. This indicates that these women had much to say on their understandings and constructions of sexuality. As with many exploratory topics about women, their health and their wellbeing, silence and lack of opportunity to give voice to integral parts of womanhood remain hidden or under-represented. This is often the case with non-White migrant women (De Souza, 2004). If African migrant women's voices and understandings are not being included in the development of services the appropriateness and implications of policy, service delivery and health promotion in regards to sexual health and wellbeing must be questioned.

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Table 1: Sample Demographics

Pseudonym	Age	Year of migration	Reason for migration	Number & age of children	Marital Status	Highest level of education	Occupation	Stage of Menopause
Anodiwa	53	2004	Better life	3 (30, 27, 24)	Married	Master's Degree	Midwife	Post
Kundai	47	2001	Greener pastures	3 (22, 19, 13)	Married	Graduate Diploma	Registered Nurse	Post
Makanaka	46	1999	Spouse's Education	3 (22, 18, 12)	Married	Undergrad Degree	Registered Nurse	Peri
G.Mum	46	2004	Work opportunities/ Better life for kids	3 (25, 13, 11) + 1 grandson	Married	Graduate Diploma	Registered Nurse	Peri
Mhamba	46	2004	Work opportunities/ Better life for kids	3 (27, 24, 13)	Married	Graduate Diploma	Registered Nurse	Peri
Greta	45	2000	Greener pastures	2 (19, 15)	Divorced	Graduate Diploma	Registered Nurse	N/A
Fadzai	43	2004	Spouse's Job	3 (21, 15, 11)	Married	High school Diploma	Banker	N/A
Rakari	42	2001	Better life	3 (19, 13, 5)	Married	Undergrad Degree	Registered Nurse	N/A
Sandra	40	2003	Work opportunities/ Better life for kids	2 (17, 12)	Divorced	Undergrad Degree	Registered Nurse	N/A
Marianne	40	2005	Work opportunities	3 (16, 11, 2)	Separated	Undergrad Degree	Registered Nurse	N/A
Anesu	39	2007	Work opportunities	3 (18, 18, 8)	Married	Diploma in Nursing	Care Worker	N/A
Batsirai	29	2002	Visiting	1 (7)	Single	College Diploma	Fair Trade Officer	N/A
Dova	29	2008	Work opportunities	2 (5, 2m)	Married	Graduate Diploma	Registered Nurse	N/A
Itai	28	2007	Spouse's Job	1 (5)	Widowed	Diploma in Nursing	Registered Nurse	N/A