



Straight TALK

Keeping Adolescents Safe



Volume 8 Issue 1 2021

#MaskUpZimbabwe

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PEER EDUCATION CHANGED MY LIFE STORY

'a peer educator's narration of her life experiences'

'Is the rest of my life going to be like this?' This question troubled my mind as I was growing up and I was not impressed.

My name is Tinotenda Chiunye, I am a young woman aged 23 who grew up in Murenga village in Mt Darwin and currently studying for my Bachelor's degree with the University of Zimbabwe. I struggled to pass my ordinary level exams the first time I sat for them such that my father was disappointed and I had to raise funds for my own education going to Mukaradze mining community selling goats and different wares.

Going to Mukaradze was a painful experience for me as I had to walk for about 10 kilometres to get there and I also had to ward off sexual advances from some of the miners who would offer me the funds that I needed in exchange for sexual favours.

Is the rest of my life going to be like this? This question troubled my mind as I was growing up and I was not impressed. I noticed that I grew up in the village, some girls my age were getting married in the village but I did not want to stay in the village for the rest of my life. I decided, I needed to change my life story, I NEEDED TO CHANGE! I needed to work hard, educate myself and become an independent woman; this sense of purpose also delayed my debut into relationships as I told myself that I would only get married after graduating with my degree.

After passing my Advanced level exams with 12 points, I tried getting employed but it was in vain. That is when I joined peer education under

Zimbabwe National Family Planning Council's Mt Darwin Youth Centre. Peer education helped me to attain self-empowerment through life skills such as decision making, self-esteem and assertiveness. These skills are very important for to succeed in life. Even though I had no funds for my university education, the peer education programme also helped me to connect with other partners and people of diverse backgrounds.



I was encouraged to apply for university by the VMMC/ASRH linkages Project Coordinator who we worked with at the time.

Sister Talent Moyo assisted me with fees and accommodation before I almost dropped out of university due to lack of resources. I started doing part-time jobs such as babysitting and doing

laundry for people, selling sweets and socks. With the funds I raised, I managed to start a chicken raising project with 25 chickens during that vacation holiday. Fortunately, my landlady also understood my predicament and allowed me to stay at her place and pay my rentals when I would have raised them eventually.

I then met Auntie Rosey at Roman Catholic Church where I attend and told her my life story in a bid to get more part-time jobs. Auntie Rosey was touched by my story and facilitated for me to get a Jesuit scholarship. In order to get through college life, I also told myself that 'NO TO BLESSERS, MY BLESSER IS GOD.' There was a time when I had to get a haircut, applied hair food instead of lotion or body cream for a week and went through the whole semester with only 5 outfits; I was just trying to live within my means and I believed that it was just a phase that will pass. Now I'm on a scholarship that can cater even for my postgraduate studies and that is my wish.

Peer education opened doors for me, it boosted my confidence and fostered interpersonal communication skills in engaging and working with young people and the community at large. I was able to study and access WIFI services at Mt Darwin Youth Centre and received more information on sexual and reproductive health. Peer education should not be taken for granted, it has power to transform communities from the peer educator to the young person he or she is able to reach.

Continued on page 2

How Peer Education Has Transformed young Males in My Community

My name is Thankyou Maphosa from Murowa ward, Zvishavane District under Chief Mazvihwa. I am a young man aged 19 years.

It was in 2018 when the Youth Facilitator at Murowa Youth Centre came at my former school requesting for 4 young people who could join the peer education program. A meeting was held by our teachers and I was picked to be one of them. As it was towards schools closing, we would undergo a 5 day training on ASRH during the first week of schools holiday. The in house training was conducted by the Youth Health Advisor and Youth Facilitator. I was a bit nervous about the task

upon me since I was of a shy character and had never addressed a crowd in my life.

However, I saw this as an opportunity to transform young males in my village who were in the habit of drugs and alcohol and some were school dropouts. As I had acquired knowledge on the impact of such choices in life which include addiction, crime and engaging in risky sexual behavior. My first target was my neighbor Tatenda (not his real name) who had dropped out of school in 2017 when he was in form 3.

Engaging him was not easy since he was resistant at first boasting about being an adult who could make his

own decisions. Going one step at a time, I remember very well during our third session bringing two other friends. In a short space of time the number grew to ten. Since I was still in school we would meet every Saturday.

Tatenda was inspired to return to school fulltime through the encouragement of other group members. My knowledge on life skills also inspired other group members to start income generating projects such as vegetable gardening. Enabling those still in school to supplement parents' income through buying school stationery. As for those out of school it meant less idle time as gardening would occupy them with a

significant amount of their time.

The group also promoted a zero tolerance to drugs and alcohol amongst youths in my community. Also as they say knowledge is power young people can make informed choices. Other young people regardless of gender were also challenged on implementing life skills. Direct interaction with peers of different groups within the community has increased my self-esteem, confidence and ability to manage a conversation and to build relationships. As a role model in my community I have to be responsible of how I conduct myself in public.

EDITORIAL

Welcome dear adolescents and youth to The Year of our Lord 2021 and first edition of the Straight Talk newsletter of Zimbabwe National Family Planning Council. It is our hope that the New Year will bring with it better fortunes for all of us.

Many thanks to you all who read our 2020 publications and engaged us, let us keep the spirit and advance the interests of adolescents and youth. The year 2020 come and has gone with few activities as these were curtailed by Covid 19 pandemic which threw our way of life in disarray. Schools and business were closed for a good part of the year and still examination classes were asked to sit for their examinations into 2021.

Late 2020 into 2021, the world was hit hard with a surge of Covid 19 with a variant strain. As deaths and new infections spiked, most countries took precautions and Zimbabwe too had to announce a national Covid 19 Prevention, Containment and Treatment lockdown.

Level 4 lock down entails operation of essential services, dusk to dawn curfew, intercity travel restrictions, closure of borders to non-essential travel, compulsory wearing of face masks and intra city travel restriction to a 5km radius for the purpose of procurement foodstuff and medication. Consequently, schools had to remain closed for the first months of the 2021 school calendar.

What does this mean to adolescents and youths? School going adolescents find themselves with plenty idle time on their hands, confined at homes with older ages and learning online at times. As was witnessed in 2020, adolescents and youths again find themselves facing a number of reproductive health challenges. These range from access to sanitary wear, clinical services, unplanned intercourse, sexual gender based violence, child marriages and shortage of water and food in some instances.

However, your life is yours and yours to live. Regardless of the situation today, know that decision/s you make today have a great bearing on your future and you will live with them. As such be responsible in whatever you do as a youth.

In these trying times, we at Zimbabwe National Family Planning Council, endeavour to equip adolescents and youth with requisite information and services to help them as they grow up in this unfriendly and not so usual environment. Of note, our services are available during these lockdown but in strict adherence to national laws and laid down protocols to protect you and your service providers.

We are calling all in sundry to utilise resources available to us to engage and help one another especially adolescents through this trying time of our lives. The Straight Talk is one such platform we can engage once you get a copy share widely and this way we spread the information and love.

In light of Covid 19, we at Straight Talk remind you that: A MASK is way cheaper than a ventilator. Staying at HOME is better than staying in an Intensive Care Unit. Prevention is better than treatment. It is not curfew, it is CARE FOR YOU.

WASH your hands FREQUENTLY, practice good respiratory etiquette, SOCIAL DISTANCING and get VACCINATED.

Dial 2019 or 2023 or any health facility for information and assistance around Covid 19.
#MaskupZimbabwe

Mazowe River, a ticking RH time bomb

By Prudence Rwatirera

Mazowe river which meanders through Tsokodeka area under chief Chikono in Uzumba Maramba Pfungwe (UMP) is being damaged by gold panners. Long before the coming of artisanal miners who are mining illegally, the river used to be a source of pride and animals like buffalos and fish used to share in that river for survival. In as much as the gold panners (Makorokoza) are causing harm to the nature, they argue that if they stop mining they will not be able to survive since it is their only way of aching a living during this period of economic meltdown and Covid 19 pandemic containment lockdown.

They work very hard without any protective clothing or face masks either from the harsh weather conditions or from Covid-19. They cannot afford to have breaks and proper meals.

When mining, they work in mixed sex syndicates sometimes of six or 10 people. The groups sometimes have a fair number of children and young people. These gold panners believe so much in mhondoro and svikiro (spirits mediums and ancestors). They believe that spirit mediums and ancestors are the ones which guide them when mining.

So respected are rules given by the mediums, for instance miners do not wear or bring anything red in the area. It is believed that red is associated with or brings bad luck. Miners believe in abstaining from sexual intercourse before embarking on a mining expedition in the banks of Mazowe river.

Besides artisanal miners, the area is a hive of activity as fortune seekers as buyers and sellers of gold, food,

Knowing what is right versus doing what is right in fighting ASRH challenges

By Ansetus Dongo

Generally many young people in Zimbabwe and the world over are faced with a myriad of Sexual and Reproductive Health challenges whose roots are steeped in the dilemma of not being able to stand up and be responsible for certain of their choices which could have negative consequences on them and society at large.

Many of our young people, through various channels feel, know and are able to distinguish what is right from what is wrong in terms of behaviour and attitudes. Almost all of them learn this from an early age from parents, teachers, religious leaders and other mentors and may manifest as a specific behaviour, or as something general like the 'Golden Rule'.

The situation on the ground in the form of school drop outs, rampant early sexual indulgence, premarital sex, teen and unintended pregnancies, drug and substance abuse and many others seem to suggest that there is a massive disconnect between knowing what is right and doing what is right as well taking responsibility for wrong or bad decisions or actions when it comes to SRH and other social/public health issues.

Mr Theodore Roosevelt says "knowing what is right does not mean much unless you do what is right." Good intentions need to be translated into good actions. For instance many a times young women and girls are aware of negative consequences of early sexual indulgence but this does not seem to "scare" them.

Agreed, no one is perfect and none has the answer to what is wrong and what is right to all and every situation.

Young people aged between 10 and 24 years constitute 30% of the total population in Zimbabwe and 70% of them are in rural areas.

Mashonaland West Province has a population of approximately 1,5 million of which some rural district like Hurungwe have up to 60% being below 24 years and a teenage pregnancy rate of 20% which is

Continued from page 1

What happened in my life molded me into a strong woman and I am not afraid to face the future. I would like to encourage other young girls out there to desist from thinking that marriage is the only option or solution to the problems they may be facing. They need to strive to educate themselves, not let go of their dreams and be independent. My passion is to start an organisation that caters for young women, inspired by Irene Chifamba's Shamwari Yemwanasikana.

To my fellow young girls I say, "Empower yourselves, be focused, have a plan for your life and be principled in order to tackle the obstacles that may come your way."

Call for news articles, fiction short stories, pictures and poems
The Editor of Straight Talk newsletter is calling for all Zimbabweans to forward news articles on ASRH activities in their areas, letters to the editor, individual and original poems as well as pictures with detailed captions for publishing in our coming editions of the newsletter. The editor reserves the right to edit or shorten the articles or not to publish them at all.

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FEED BACK
The Straight Talk team welcomes your feedback, views and comments on the newsletter. Feel free to interact with the team through post and electronic mail at production@znfpc.org.zw

too high by international trends.

Zimbabwe National Family Planning Council has been implementing sexual and reproductive health strategies and action plans wherein the focus was and still is on reducing morbidity and mortality associated with sexual and reproductive activity among adolescents and young people through information dissemination, services provision together with entrenching and adoption of responsible behaviours.

Zimbabwe has witnessed substantial progress in key ASRH indicators including among others, a decline in the teenage pregnancy from 24% in 2010/11 to 22% in 2015 according to the Zimbabwe Demographic Health Survey (ZDHSs) whilst in Mashonaland West stands at 20%.

The national HIV prevalence among young women aged 15-24 years decreased from 11% (ZDHS 2005/6) to 7% (ZDHS 2010/11), and currently is at 6% (ZDHS 2015). However in Mashonaland West it is still high at 13%.

Despite the aforesaid progress by Zimbabwe on average it has emerged that in Mashonaland West the rates are still very high compared to national standards.

It was established (ZDHS 2015) that for instance knowledge of modern contraception in Mashonaland West is nearly universal (99%-100%) but we still have a high teenage pregnancy rate of 20%. The above scenario shows that there is indeed a gap in the practice of the acquired information say for family planning which is universal. One is persuaded to think that the youths are not effectively putting to practice what they know in terms of family planning and HIV

Going by what Mr Theodore Roosevelt put forward and what is on the ground, social and behaviour change interventions need to be strengthened and up scaled in Mashonaland West if Zimbabwe is to impact positively on the adolescent and youth reproductive health indicators.



Artisanal miners mining in Mazowe river

clothes and electrical gadgets flock the river to make a living out of the illegal miners. So lucrative is vending business that people drive from as far as Harare to sell their wares usually at exorbitant prices.

The influx of people of different background has led to the area being a breeding ground for sexually transmitted infections as sex is traded as a commodity among miners, buyers and vendors.

Zimbabwe National Family Planning Council Mash East Community Based Distributors in UMP occasionally take their services to the mining area, providing contraceptives, health talks and condom demonstrations so as to ensure that the artisanal miners have access to reproductive health services.

School going and under aged children are very much involved in illegal mining along Mazowe river. Resultantly they drop out of school while some end up being married spiralling rates of school dropout, child marriages and unsafe abortions in the district.

Mr Chitsiko, a primary school teacher in the area said, 'Gold panning here in UMP is the now order of the day to an extent that it is difficult to convince children that going to school is the best thing to do since the children have become part and parcel of the syndicates. And nothing good is coming out of this to the benefit of youth t as most end up getting pregnant as they pan for gold'

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Taking SRH services to young people's doorsteps during lockdown in Masvingo

By Michael Gwarisa

WHEN President Emmerson Mnangagwa announced that the country would go into a 21 days long lockdown period in order to curb the spread of the coronavirus to other parts of the country, majority of health services were disrupted as focus was shifted towards eliminating the new scourge.

Due to the tight restrictions on movement which made it difficult for people to access health services as they would be required to produce travel documents or letters to justify their movement, numerous health challenges emerged. The nation was forced to adapt a new way of doing things which included staying at home and minimizing movement. However, in the midst of all these changes, young people never stopped indulging sexual activities and sexual desires never went on lockdown.

In Masvingo, just like any other part of the country, most primary health institutions closed briefly including the Zimbabwe National Family Planning Council (ZNFPC) clinics and Youth Centres which closed for at least two weeks only to reopen after they had secured enough Personal Protective Equipment (PPE). Masvingo province has also been witnessing a rise in new Sexually Transmitted Infections (STIs) and majority of the cases started coming out around July when restrictions had been relaxed a bit. In order to navigate the hurdles brought about by the lockdown, the ZNFPC had to devise innovative community-based strategies of delivering services to young people throughout Masvingo province.

Amongst some of these include activating Community Based Distributors (CBDs) to deliver services right at the doorstep of young people, activating mobile clinics to reach out to even the hardest to reach areas in the province as well as fully equipping Youth Friendly Centers in order to address Sexual and Reproductive Health (SRH) demands which came with the Covid 19 containment regulations.

Mrs Vongai Chimhini, a Community Based Distributor (CBD) in Masvingo Urban said during the lockdown period, much of her work revolved around following up young people who are on antiretroviral Therapy (ART), delivering the essential drugs to avoid defaults, delivering condoms and other contraceptives to young people in her jurisdiction, referring young people for treatment especially those who developed STI infection during the lockdown amongst a host of other services.

“My job involves talking to people about Sexual and Reproductive Health issues and also ensuring that they access modern family planning methods and also giving people the right information about family planning. I also offer counseling services and we talk with young people. Some talk to us on mobile phones to discuss SRH issues.

“During the lockdown period, most young people struggled to get services such as condoms, contraceptives, HIV treatment amongst other services. Before the lockdown, most would access condoms from public toilets, bars and night clubs. However, under the lockdown, it was difficult to even get into town. I would at times wake up early in the morning to deliver condoms in public toilets at Croco-Motors, Civic Centre and down town,” said Mrs Chimhini.

She said most of her work in Masvingo urban stretches from Masvingo Teachers college going up to Wimpy, Rhodene, 4.1 Infantry Battalion and other places in town. It also stretches into peri urban Masvingo such as Mushandike, Ngomahuru, Muchakata and others places even though she is based in the city.

“Because movement was highly restricted, I would at times liaise with our ward councilor here in Masvingo urban who would give updates on the status of stocks for condoms and other services. I would deliver at his house so that young people from the ward would collect from his house. As someone who works in the city, most people have my number. People would be given my number and we would at times talk over the phone or at times go to the clients to offer services. In some cases, I would refer to other institutions. Most people would go to the clinic and they would be referred back here’.

She added that most girls would come seeking either condoms or birth control pills and, in most cases, girls would walk from as far as Nemamwa to Masvingo just to get these services. The lockdown also saw young people living with HIV struggling to access their medications due to movement restrictions. According to Linda Mugwenhi, a Community Adolescent Treatment Supporter (CATS) who works in Masvingo urban at Masvingo General Hospital, the lockdown presented various challenges to young people which included accidental disclosure of one's HIV status at road blocks and failure to access services to restricted

movement.

“Because police would ask young people to reveal their statuses to them at the roadblocks, most young people shunned collecting their medications and other services due to fear of stigma and discrimination. To curb this challenge, we referred most young people to the ZNFPC where they would either get assistance from CBDs or health workers at the clinic.

“At times they would talk to the health workers on the phone and the health workers would facilitate delivery of these medications to the young people. This happened when the lockdown was still very strict. When collecting their medications, we at times would use referrals where they would go and get their medications and contraceptives,” said Linda.

She added that at the peak of the lockdown they resorted mainly to using SMSs, WhatsApp or phone calls to reach out to young people living with HIV in Masvingo.

In Chiredzi, most young people struggled to access services at the beginning of lockdown. According to Tsovan Youth Centre Youth Facilitator, Mrs Lindiwe Ndoda, they had to make use mobile clinics in a bid to deliver SRH services into the communities.

“During the lockdown, young people could not access services from the centre because of the restrictions of movement. However, there were young people who came to my inbox who were infected with STIs and I managed to refer them to the hospital where they managed to get assistance from the local clinics and well as the health center.

“In this lockdown era it shows that young people were actually engaging in sex. They have remained active and from the mobile clinics that we conducted, we managed to treat six clients who reported that they had STI and the 20 to 24-year-old were the most affected. We had four 20 to 24 years and two 15 to 19-year olds who came for STI treatment here,” said Ndoda.

ZNFPC Provincial Manager for Masvingo, Mr Peter Vhoko commended Plan International and the International Planned Parenthood Federation (IPPF) for assisting the organization in managing SRH particularly focusing on adolescents and young people during the times of Covid 19 lockdown.

“Through Plan International, we were able to do mobile clinics where we reached 11 people who were inserted Jadelle and I am just talking about young people and three removals during the lockdown period. We also injected Depo provera to 18 young people, Combined Oral Contraceptives (COC) 43, we provided 43 and progesterone only pill, we provided 12, Implanon four, Intrauterine device (IUCD) we managed one removal “Through these mobile clinics we tested 212 young people and out of the 121, 116 were negative and five were positive and of those who were positive, we managed to refer them for further services.” said Mr Vhoko.

International Planned Parenthood Federation African Region supported ZNFPC with critical PPEs which allowed the Council to open its clinics and youth centre doors to the youths during the lockdown period when most health care facilities were closed.

The ZNFPC Masvingo also managed to distribute 648 sanitary wear and through the mobile clinics they also shared SHR information to people most young people. The also used various media outlets and platforms do disseminate SRH and COVID-19 related information.



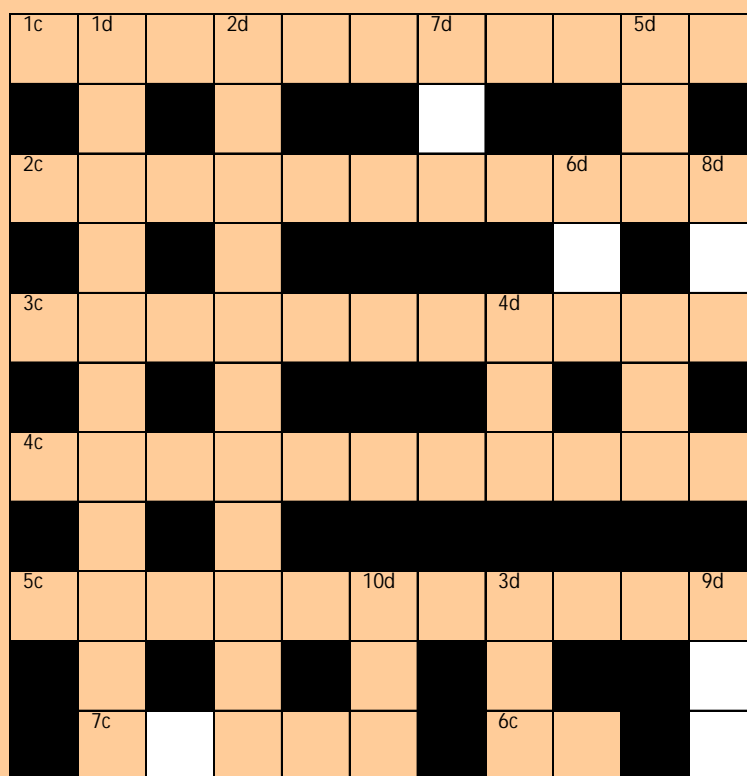
CROSSWORD PUZZLE

ACROSS

- Poor Menstrual Hygiene Management (MHM) in young girls may cause from school.
- People Living with HIV and AIDS (PLWHIV), People Living with Disabilities (PLWDs), sex workers are key in integrated HIV and AIDS and FP service provision
- Learning more courses, getting more skills can help with career.....
- Person born with male or female sexual organs but feels they were born into wrong body is
- meningitis is an OI of HIV and AIDS.
- Not Applicable
- Fabric material

DOWN

- A, B, O+, O- are
- Education and entertainment
- Male and female
- Maximum
- Source of energy
- Number
- Consume
- Place, including scenery and props where a film scene is shot
- Small plastic card with chip slotted into phone
- Container



POSTER REVIEW

Discuss with your friends, the messages you understand from the poster...



The poster is highlighting the dangers associated with alcohol and drug abuse. The abuse of alcohol and drug abuse predisposes young people to poverty, STIs, HIV/AIDS, and unwanted pregnancy.

The picture of a young boy with torn shabby clothes, uncombed hair truly depicts the outcomes of alcohol and drug abuse. The intention is to encourage youths out of excessive use of drugs and alcohol.

Self-awareness and resisting peer pressure are among the important things that young people should do to avoid drug and alcohol abuse which may lead to consequences such as poverty because a young person will not concentrate with his or education and end up performing poorly in school. Drug abuse can inhibit one's faculty thereby exposing oneself to protected sexual intercourse which may lead to STIs or unwanted pregnancies.

Sources of information on adolescent and growing up

Young people can get more information on alcohol and drug abuse or any other sexual reproductive health issue from health service providers such as peer educators in the community, health care centre and at youth centres, parents, guardians and teachers among other sources.



Straight Talk Doctor.

"Hello Straight Talk Doctor, I am 16 years old female, is it normal to go on your menses every 14 days? This has happened ever since I started having my menses when I was 14 years. What are the possible causes?"

Response

What you are experiencing is called abnormal uterine bleeding – AUB (previously known as dysfunctional uterine bleeding). Normally, the average menstrual cycle is 28-29 days (range, 21 – 35 days). Initially, some teenagers can have cycles that are abnormal.

Over time, the menstrual cycle becomes fairly consistent from month to month in any given woman. Normal menstrual flow lasts for 7 days or less (range, 3 – 7 days) and produces an average total blood loss of 25-69 mL.

Your more frequent bleeding (metrorrhagia) may be mainly due to the

fact that you are not producing an egg (ovum) during your cycles (anovulatory cycles). This is very common in the first 3 to 5 years after your first period (menarche).

The following conditions can also predispose you; having eating disorders (eg, anorexia nervosa or bulimia), having a body mass index (BMI) higher than 30 (>95% for age in the obesity range), if you are experiencing significant psychological stress, or if you are an athlete with significant exercise stress.

Overall, adolescents with AUB have an excellent prognosis, with most outgrowing the problem within 3-5 years of menarche.

If you are having severe bleeding with clots, or if you develop headaches, lightheadedness, weakness, early fatigue after minor exercise etc you should visit your nearest health facility for treatment.

Culture Is Dynamic

By Prudence T Rwarirera

Long back grandparents, uncles and aunts were the ones responsible for doing guide and counselling, to teenagers and young adults concerning their sexual reproductive health.

Comparing what used to happen in the past and what is happening today one can safely conclude that there is great change hence culture is dynamic, it is evolving from one stage to another with the intention of catching up with what is trending around us.

"Culture is the full range of learned human behaviour patterns, culture is a powerful human tool for survival, but it is a fragile phenomenon. It is constantly changing and easily lost because it exists only in our minds," Edward B. Tylor in his 1871 book, Primitive Culture. Thus the need for educating the youth because all the battles are in human minds. National Adolescent and Youth Sexual and Reproductive Health (ASRH) Strategy II: 2016-2020, its main goal is to reduce teenage pregnancy and their complications as well as the reduction in new HIV & STIs infections.

11 (documented) are already sex workers in order to sustain themselves unknowingly that they are other better ways to make a living. The sex work is being conducted in areas such as Tutan.

"The extended family no longer have great impact in this modern day, since almost everybody is now occupied with their personal business and some are even migrating to other countries in search of greener pastures.

"The economic hardships are driving people to other countries and it is more like abandoning families when things fail to work out in foreign lands.

"When things fail to work out, those left behind will be stranded and the hardest hit will be the girl child. Most times, prostitution will be seen as the easiest way out of the situation but it comes with its challenges," said Sharon Ngorima a young lady aged 22 from Rujeko High Density suburb also known as 'Cherima'.

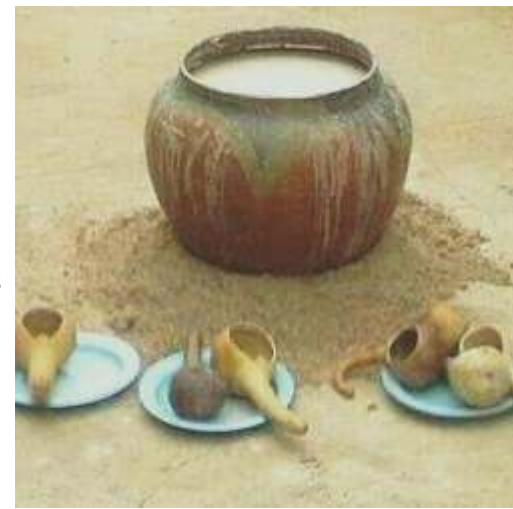
The young whose minds are still impressionable are being left vulnerable and without the elderly guidance. It then calls upon the nation as a whole, be it at organisational level, school and community or at individual level to guide and equip the youths with relevant information they need at any given stage of their lives.

Knowledge about sexual reproductive health is lacking while it is important especially on the onset of puberty up to adolescence. This lack of knowledge and socio-economic environment

are attributable to early marriages, unintended pregnancies, school dropout, health problems related to sexually transmitted diseases (STIs) and drug abuse among other ills.

In Zimbabwean, it is taboo for parents or any random individuals to discuss with children sexual reproductive health issues, yet it is now an era whereby it is important for parents and guardians to close ranks with their children and play a part in their spheres of their lives to build a better health generation to come at a low cost.

Statistics have shown that 25% of girls in Zimbabwe are being married or in a union between the ages of 15 to 19 years, thus one in four girls are married before they are 18 years according to the National Adolescent Fertility Study of 2016. The statistics points to the fact that adolescent and youths reproductive health issues and needs are changing hence strategies of handling them needs also to be updated.



Teenagers and young adults of nowadays as well as the children below the age of 10 years are perishing due to lack of knowledge and poverty since most individuals are no longer responsible for their roles.

Mostly in high density areas "Ghetto" like Dombotombo in Marondera young girls aged

SHORT STORY/FICTION: Ruva, the Great Singer

By Pamela Farawadya

Growing up, Ruvarashe dreamt of owning a company, a big house and driving the latest cars. Being the last born in a family of five siblings much attention was drawn towards her as she was seen as the sweet young angel. Academically, she was an above average student. Her parents, who were elders at church, were proud of her as she was outstanding especially in singing in the church.

Completing her seventh grade with 10 units meant going to the next level, secondary education. The local secondary school had a high failure rate, so her parents decided Ruvarashe attend first form at one High School some 8km away from home. This meant walking 16 kilometers daily to and from school. The new environment proved exciting meeting new faces and learning new things.

The first two years of secondary school went well, pursuing her singing talent Ruvarashe was picked to lead the school choir. This made Ruva to be admired by many. During the first term of her third year, Ruva befriended a new comer Belinda.

Belinda had been expelled from one school in Bulawayo for taking alcohol. Both her parents worked in South Africa the family maid took care of her. Belinda earned the nickname 'Queen Yellow' because of her light complexion. She was an attraction both within the school premises and outside. Ruva, Belinda and her two other female friends were popularly known as the, 'Golden Girls' at school. The four became the main centre of attraction and they loved it.

Ruvarashe's parents quizzed her after the class teacher wrote, "...stop associating with bad friends", in her school report with her academic performance having declined. However the little angel denied the allegations arguing the class teacher was new and it was a question of mistaken identity. The parents cautioned her about the unbecoming behavior but it fell on deaf ears.

The second school term came, Queen Yellow introduced her crew to some school levers, and she was dating one of the guys nicknamed 'Gunman'. One fine weekend the guys invited the young girls to attend a birthday party in their neighbourhood. Ruva had to lie at home that she was going for a prayer organised by the school's Scripture Union that Saturday and her unsuspecting parents gave her the green light.

Saturday afternoon finally came, the 21st party celebrations were on with only teenagers present. Lots alcohol braai and smoking of hard drugs was taking place. This was the very first day Ruva tasted alcohol and smoking. Ruva tried to resist at first, everyone present was doing it so she felt left out. The loud music and lively gyrating most people were doing, she could tell her colleagues were having the time of their life and she

jumped in headlong.

That day, Ruva passed out only to wake up Sunday morning with a terrible headache and in the arms of half necked snoring Jasper. He was one of Gunman's friends who had been drooling Ruva all along. They encouraged her to take a bit of alcohol to do away with the headache.

Life was never the same again from that 21st birthday party, the Golden Girls began absconding school spending much time with their so called boyfriends. Drinking, smoking and unprotected sex was the order of the day. The girls would leave their parents homes in full school uniforms, then meet up at 'the base'.

The second term lapsed, it was school holidays now meaning more time with these special friends. It was towards the end of the school holiday that Ruva started having some abdominal discomfort, vomiting after almost every meal. She had missed her monthly cycle twice, her mother started having suspicions.

Ruva informed her friends and Queen Yellow suspected a possibility of food poisoning or pregnancy and this sent Ruva panicking. Ruva decided to inform Jasper her sweetheart about it and that was the last day she ever heard from him. Within a few days, she had that Jasper had skipped the boarder.

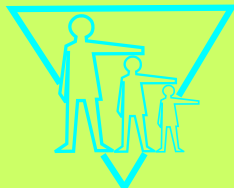
Ruva's mother took her to the local clinic, a pregnancy test was done and it came out positive. Ruva cried and Jasper was not anywhere near, no more school, the other golden girls considered to be friends started mocking her for being irresponsible and the thought of being a young mother raising a child with the help of parents swept though her mind. It was not going to be easy from being a hero as she was admired both at school and church to being a zero now considered a social outcast.

Despite all the challenges she encountered, her mother stood by her. She managed to raise her son and when he turned two. Ruva's parents took her back to school.

Looking back, made Ruva realize that Life is what you make it. It depends mainly on the choices that one makes. Despite mistakes along the journey of life, one has the power to reshape his or her destiny. No one can leave in isolation thus the need for Friends.

However, they play a pivotal role influencing choices hence the need to take heed of what parents say. Ruva considered her parents to be primitive and was of the opinion that they had developed hatred towards her, ignoring the warnings on choices of friends. Now in form three she appreciates being given a second chance by parents to pursue school.

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