

WORLD CONTRACEPTION DAY COMMEMORATION

Straight TALK
Keeping Adolescents Safe

YOUTH FRIENDLY

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By Donald Dube

World Contraception Day (WCD) was commemorated in Mashonaland West Province in Makonde District, in Mhangura Town at the Recreational Club. The Honourable Minister of Health and Child Care Dr Douglas T. Mombeshora was the guest of honour at the event. Dignitaries from various line ministries, civil society organizations, traditional and religious leaders and community members gathered to celebrate the event under the umbrella theme, 'Contraception: it's your life; it's your responsibility.' Zimbabwe National Family Planning Council (ZNFPC), with guidance from the Ministry of Health and Child Care (MOHCC) in collaboration with United Nations Population Fund (UNFPA), development partners and civil society organizations successfully hosted the WCD commemoration through a community event of national magnitude.

The Guest of Honour, Minister of Health and Child Care, who is also the Honourable Member of Parliament for Mhangura Constituency delivered a key note address highlighting the advantages of Family Planning to the national economic development. “Under the visionary leadership of His Excellency, the President of the Republic of Zimbabwe, Cde Emmerson Mnangagwa,the country has benefited from a healthy workforce in which women are given equal opportunities to contribute to national development.”



Use of contraception is critical in averting high incidences of unintended pregnancies, unsafe abortions and deaths among adolescent girls and young women. Teenage mothers are more likely to face adverse pregnancy outcomes and are more constrained in terms of their ability to pursue educational opportunities than young women who delay child bearing. Additionally, children who are born to adolescent mothers are at increased risk of morbidity and mortality.

The ZNFPC Chief Executive Officer emphasized the essence of collaboration and strategic partnerships. “Through synergies and networking engagements, the Family Planning program is growing from strength to strength ensuring that *every pregnancy is wanted. ZNFPC aims to improve awareness of contraception with more emphasis on enabling young people to make informed decisions on contraception, Family Planning (FP) and Sexual and Reproductive Health (SRH).”*

All the provinces participated and offered free services ranging from short-acting methods, Long-Acting Reversible Contraceptives (LARCs), cancer screening services, HIV Testing Services among other services. Youth-led organizations exhibited and provided information on youth-friendly health services, life skills development, economic empowerment and sustainability.

Community mobilization was spearheaded by Population Services Zimbabwe (PSZ) through their roadshow van with dance and quiz competitions hyping the event distributing promotional materials. Music and dance was the order of the day headlined by a classic performance by Sulumani Chimbetu and his team. Local Zim-dancehall artist Ampleman lured the residence of Mhangura appreciating the local talent. National Air Ambulances supported the commemoration with thousands of t-shirts and caps to augment ZNFPC promotional giveaways such as branded t-shirts, caps and bandannas handed to community members.

The ZNFPC Board Member Colonel Dr. Lioba Gunduza delivered the vote of thanks while presenting a token of appreciation to the guest of honour. Lunch was served to all community members, thereafter music and dance highlighted the joy and fanfare with young and old interacting and sharing moments celebrating the World Contraception Day commemoration.

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AN ADOLESCENT GIRL'S STRUGGLE

By Primrose T. Moyo

(Created from a story shared by a Junior Member of Parliament)

Living in a hell, in Nyakutamba Village in Bikita, Chipo, a 17 year old girl has to struggle to make ends meet. Enjoying her youthful days, became a blurry shadow and a nightmare to her. What was once a promising schoolgirl's dream of becoming a nurse has turned into a daily battle for food, safety, and dignity.

During high school days, Chipo's life took a tragic turn when she entered into a secret relationship with her high school teacher before she finished Form 3.

“He told me he loved me and would take care of me,” she recalls softly, her voice cracking. When she fell pregnant, the teacher, already a married man with a family, denied responsibility. “He said the child was not his, and that I should go back to the boys I was dating,” she says, wiping away tears in pain and feeling hopeless.

Rejected by her parents, ashamed of the scandal, Chipo had no choice but to live on the streets and drop-out of school. Months later, she gave birth without medical help. “I wrapped my baby in rags because I had nothing,” she recounts. Now, with no income, Chipo has turned to sex work to feed herself and her child. “Sometimes I leave the baby alone when I go to hustle. I know it's dangerous, but what else can I do?” she asks.

Community members are divided on Chipo's fate. Some sympathize, others judge. “These young girls are losing their way. Teachers should know better,” said Mrs. Murefu, a local elder. Many girls are falling prey to older men and end up on the streets. We need to create safe spaces, guidance, and support for them.”

Chipo`s story is one of many that demand that there is an urgent need for stronger community responses. Schools must strengthen guidance and counseling services, while strict laws should be enforced to protect students from teacher exploitation. Families, too, are encouraged to support their daughters instead of rejecting them, as abandonment often pushes girls into even more dangerous situations.

For Chipo, every day remains a struggle, but her final words carry a plea: “I just want my child to have a better life than me.” Hence, her story is a wake-up call to Zimbabwean societies, a reminder that behind every adolescent pregnancy is a child whose future still matters. The national adolescent pregnancy prevalence is currently at 23%.

The Zimbabwe National Family Planning Council has youth centres that are spread across the country to ensure that young people get age appropriate comprehensive sexuality education that empowers them to reach their full potential.

THE INVOLVEMENT OF PERSONS WITH DISABILITIES IN SEXUAL REPRODUCTIVE HEALTH AND HEALTH

By Paul Kuzanga

The Zimbabwe National Family Planning Council, Mashonaland East Province, conducted an Adolescent Sexual Reproductive Health (ASRH) program with persons with disabilities at the ZNFPC Static Clinic. This initiative supports the national mantra of "leaving no one and no place behind." Including persons with disabilities in ASRH programming is a key focus area for organizations working in this field.

Officers from the Marketing and Communications Department and the Service Delivery Department facilitated a dialogue with persons with disabilities. The discussion focused on human rights, with presenters emphasizing that guardians should not hide persons with disabilities but should allow them to exercise their rights, such as the right to education and the right to health. Topics such as mental health management were also discussed, highlighting that persons with disabilities can experience stress if they are hidden and deprived of their rights. They need opportunities to share their concerns with peers, which can help reduce stress.

Nurses addressed issues related to Menstrual Health Management (MHM) with persons with disabilities and distributed sanitary pads. They also emphasized hygiene practices, including bathing, washing underwear, ironing clothes, and exposing them to sunlight to prevent bacteria and infections.

Supporting persons with disabilities, especially adolescents and youth, with sanitary pads is a key outcome area for the Zimbabwe National Family Planning Council under the ASRH program. Persons with disabilities have the right to access family planning methods of their choice. Those who are sexually active should be able to access these methods without discrimination or exclusion.

During the dialogue, Gender-Based Violence (GBV) was also discussed. Presenters emphasized that sexual violence by close relatives is increasingly common, and parents were encouraged to ensure the safety of their children. Accessing health centers when adolescents and young women with disabilities experience issues can help prevent HIV/AIDS and teenage pregnancy. Reporting cases of violence and health concerns will help protect the well-being of our children.

Persons with disabilities are a special group within ASRH programming. Therefore, they must have access to tailored services so they feel valued and supported. It was agreed that such activities will be conducted every quarter to provide adolescents with disabilities with information and sanitary pads.

CELEBRATING THE AFRICA IN EACH ONE OF US

By Fadzayi Maposah

I have seen people use a fork and knife to have their sadza and whatever relish. I look and actually admire them as they do that. At times I get carried away and enter a `stare mood` and turn away in embarrassment! It is not that I have not tried having my sadza using the cutlery, I have and I have concluded that it is not for me. Where ever I am and sadza is served and on that particular day, I would like sadza, I will ask for a generous portion of sadza and the relish that appeals to me. Then if not already provided make an additional request for a water jug and a dish/bowl so that I wash my hands.

Now when I talk about sadza I am talking about it in a broader sense. Broad sense speaks to the different types of sadzas (please forgive me for a wrong plural, but I am sure that most of you can relate!) What about masadza? So I am referring to the different meal that can be used to prepare the thick porridge that we love so much. One can have millet sadza, wheat sadza, maize meal sadza or even ground rice sadza.

Some people consider not to have eaten until they have had sadza. You can serve them generous and delicious meals that have no sadza and they will confidently said that they are yet to eat. I know of some people men and women included who say that they will not be able to sleep or if they sleep they are so sure that they will faint in their sleep! Like me the one who believes that there is only one proper way to have sadza, using my hand, they too believe that in normal circumstances, sadza should be eaten before a day ends. There are also different ways to eat the sadza. Others like me will simply break the sadza and attach some of the relish to the sadza before putting it in the mouth. Others will break the sadza, convert the piece to a ball and then attach the relish. Now the size of piece that is broken varies from individual to the other.

When we were small, communal eating was encouraged. There would be one plate of sadza and another with the relish. Those who ate together were be peers. The challenge was that despite being peers, some were faster than others and so others would be outpaced. The adults then saw the communal eating as a way to create a bond, they were so sure that hands that had eaten from the same plates could hold each other through the journey of life. One had to be resilient too. That has changed for many reasons while others do this when they go out for braais, sadza in one plate and the braai meat in another.

Zimbabwe National Family Planning Council celebrated National Culture Week under the theme `Celebrating indigenous voices` .The celebrations were diverse but what was key on the last Friday of May was all staff nationally reported for work in African material attire. As Africans we are united by the nature of our food that speak volumes of our cultures, it is important that we make use of the indigenous voices to speak to issues that relate to our health. Our culture as Africans is never too explicit, it is rooted in deep idioms that if one does not pay attention, they may lose track of what is said. Our indigenous voices can make many inroads regarding research. Just as I began that there is something about eating sadza with the hands, so too is there meaning in explaining even reproductive health issues in the mother tongue without being vulgar. Celebrate being African!



ZIMBABWE AGRICULTURAL SHOW (2025): A MEMORABLE NETWORKING EXPERIENCE!!!

By Donald Dube *(ZNFPC Marketing and Communications Manager)*

Zimbabwe National Family Planning Council (ZNFPC) participated at this year's 115th edition of the Zimbabwe Agricultural Society (ZAS) exhibition from the 25th - 30th August 2025. ZAS theme was, **'Building Bridges: Connecting Agriculture, Industry and Community'** while ZNFPC theme is 'Quality integrated Family Planning services for sustainable socioeconomic development'. The exhibition was officially opened by the President of South Africa Cyril Ramaphosa and His Excellency, the President of the Republic of Zimbabwe, Cde Dr Emmerson Dambudzo Mnangagwa on 29th August.

ZAS is Zimbabwe's leading annual business expo that brings together local, regional and international exhibitors for opportunities in trade, market development and networking which in turn enhances socio-economic growth. The exhibition was undertaken on the backbone of government's blue print, National Strategic Development (NDS1) (2021 – 2025). In essence, government's thrust is to transform the country into a knowledge driven and industrialized economy towards a, 'Prosperous and Empowered Upper Middle Income Nation by 2030'. ZNFPC's participation at ZAS exhibition was premised on identified strategic priorities espoused in the Zimbabwe National Family Planning Strategy (2022 - 2026) targeting the two goals that is, reduce unintended pregnancies among women of reproductive age and reduce adolescent pregnancies.

The ZNFP Board Member, Colonel Dr. Lioba Gunduza attended the official opening ceremony utilizing the opportunity to network with top government and corporate officials. High profile business engagements were undertaken with ZNFPC Human Resources Manager, Mr Michael Gahadzikwa attending the Annual National Agri-Business Conference (ANAC). These occasions were attended by top government officials and captains of industry for Public Private Partnership engagements.

Government officials, development partners, civil society and community members visited the ZNFPC stand at the ZAS exhibition.

In total 4130 passed through the ZNFPC stand to access information and clinical services as compared to the 3790 that visited the previous year. Categorizing the numbers, a total of 1080 youth females and 700 youth males from the age 10 - 24 years visited the stand while 1610 adult females and 740 adult males above the age of 25 years passed through the stand. Topical issues raised by clients included drugs and substance abuse, teenage pregnancies, child marriages, school drop outs and mental health amongst young people. Adult females highlighted the benefits of family planning. The main concerns from most



clients were side effects of contraception.

In line with the ZNFPC broad mandate, the organization offered free clinical services including Family Planning contraceptives, HIV testing services (HTS), STI screening and management, cervical cancer screening fertility management and information dissemination on all FP/SRH issues. The organization engaged young people through a stand-alone information booth manned by youthful Peer Educators. Resource mobilization through engagements with corporates and stakeholders formed the basis of the Zimbabwe Agricultural Show exhibition. The organization co-exhibited with Reddot Brands under their Carex and Fantasy reproductive products and services. Mass media publicity was witnessed through radio publicity engagements with social media cross-overs increasing audience interaction.

The stand-alone Adolescent and Youth Sexual Reproductive Health (ASRH) Youth-friendly exhibition booth was the highlight of the exhibition as people of varying ages visited the stand to discuss and interact with the Peer Educators and youth-friendly trained staff. The information displayed was on Comprehensive Sexuality Education (CSE), Parent-Child Communication (PCC), Menstrual Hygiene Management (MHM), Mental Health, Drug and Substance Abuse as well as Young people and social media. Parents, guardians and youth visited the stand to learn more on youth issues.

Male Engagement in Sexual Reproductive Health

Male engagement in sexual reproductive health (SRH) is a crucial aspect of promoting gender equality and improving health outcomes for all. Traditionally, SRH programs have focused primarily on women, often overlooking the significant role men play in reproductive health decisions and practices. Engaging men in these conversations not only empowers them but also enhances the overall effectiveness of health interventions. By fostering a more inclusive approach, we can address issues such as family planning, sexually transmitted infections, and maternal health more comprehensively. Zimbabwe National Family Planning Council (Mat North province) is running a series of radio sessions on male engagement with the aim of reaching out to men and boys and positive masculinity and SRH messages.

Importance of Male Engagement

The importance of male engagement in SRH cannot be overstated. Men often influence decisions regarding contraceptive use, pregnancy, and healthcare access. When men are included in discussions about reproductive health, it leads to better communication between partners and

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more informed decision-making. Additionally, involving men helps to challenge harmful stereotypes and societal norms that perpetuate gender inequality. By encouraging men to take responsibility for their sexual health and that of their partners, we can create a healthier society where both genders thrive.

The Role of Media

Media plays a powerful role in shaping public perceptions and behaviours regarding sexual reproductive health. It serves as a critical platform for disseminating information and raising awareness about the importance of male engagement. Through various channels, including television, radio, social media, and print, media can challenge stereotypes, promote positive masculinity, and provide education on SRH issues. Campaigns that feature male role models discussing their experiences and responsibilities can significantly influence attitudes and encourage other men to engage actively in reproductive health matters. In view of the power of media, ZNFPC has partnered with Khulumani FM (A ZBC radio station) to offer powerful male engagement sessions every Sunday as a way of reaching out to men..

Strategies for Effective Engagement

To effectively engage men in SRH, targeted strategies must be employed. Educational programs that focus on the benefits of male involvement in reproductive health should be developed and disseminated through media channels. Workshops and community events can also provide safe spaces for men to discuss their concerns and learn about SRH. Collaborations with influencers and community leaders can amplify messages and reach a broader audience. By utilizing culturally relevant and relatable content, we can foster a sense of ownership among men regarding their reproductive health responsibilities.

Conclusion

In conclusion, male engagement in sexual reproductive health is essential for promoting gender equality and improving health outcomes. The media plays a pivotal role in this engagement by shaping perceptions and providing vital information. By implementing targeted strategies and fostering open discussions, we can encourage men to take an active role in SRH, ultimately benefiting individuals, families, and communities. As we move forward, it is crucial to recognize and harness the power of men as allies in the pursuit of comprehensive sexual and reproductive health for all

COMMUNITY OUTREACH EXPERIENCE AT HOPELY

By Ruvarashe Charakupa (

In my capacity as a social work intern within the Marketing and Communications and Adolescent Sexual Reproductive Health (ASRH) at the Zimbabwe National Family Planning Council (ZNFPC), I recently had the privilege of participating in a profoundly impact outreach at Hopely community held on the 20th September 2025. The event, generously hosted by the HOPE for Adolescents, an organization working with young people, was a testament to the power of multi-stakeholder collaboration in addressing critical community health issues. Representatives from HOPE, ZNFPC, Population Services Zimbabwe (PSZ) and Empowerment Globe worked alongside local stakeholders and community members, creating a comprehensive and well-rounded approach to health promotion.



The outreach served as a dynamic platform for health awareness, featuring interactive sessions and discussions on vital topics such as Family Planning and Adolescent Sexual and Reproductive Health (ASRH). Community members of Hopely engaged actively, their participation highlighting a strong desire for health empowerment. PSZ provided invaluable expertise in population services, directly supporting strategic health planning, while Empowerment Globe shared essential empowerment strategies designed to foster self-sufficiency and resilience within the community.

My role as a social work intern extended beyond the formal sessions. I took the opportunity to conduct door-to-door services, engaging with residents in their immediate surroundings, including at community boreholes. This direct, personal interaction allowed me to distribute informative pamphlets and engage in meaningful conversations. My efforts focused particularly on adolescents aged 10 - 24 years and their mothers, addressing sensitive but crucial topics like coping with drug abuse, stress management, and the prevention of early child marriages. This direct approach ensured that the health information reached individuals who might not have attended the main event.

The outreach demonstrated a strategic commitment of accommodating community members who might be occupied during regular weekday schedules. This thoughtful timing, combined with the comprehensive partnership, underscored the event's importance. It was an exercise in community empowerment, providing residents with vital information that aligns directly with ZNFPC's core objectives. The seamless partnerships among organizations amplified the event's reach and impact, demonstrating that collective action can lead to more effective and sustainable results.

Ultimately, the Hopely outreach event was a successful model for community engagement and health promotion. It not only encouraged open dialogues around ASRH but also showcased the synergistic effect of diverse organizations working towards a common goal. The direct, door-to-door interactions and the strategic choice of engaging at community focal points like boreholes were particularly effective in fostering a sense of trust and direct access to information. My experience reaffirmed the value of community-based social work and its critical role for supporting behaviour change efforts for positive social change.

HORTICULTURE FARMING

By Joyce Karidza (Youth Health Facilitator) Chitekwe Youth Centre

Harnessing young people's energy for farming activities is another way to keep youth away from drugs and substance abuse.



In Gwaze Village, Ward 12, under Chief Mutoko, 24-year-old Edwin Charakupa is moving from his role as a peer educator at the Chitekwe Youth Centre to a hands-on farmer who earns extra money. What began as a community project has grown into a business. Edwin now spends his days growing green beans, pawpaw, and leafy vegetables to earn a living. His story shows how young people can use farming skills to build a stable income in their own community.

Edwin's daily routine mixes farming with outreach. He aims his products at Mutoko Business Centre clients and other nearby people. Early in the year, he planted different crops to lower risk and ensure a steady supply of fresh vegetables. He focuses on reliability, quality, and affordability to build trust with customers who want fresh, locally grown food. With careful planning, Edwin is turning small-scale farming into a real source of income.

Edwin's project matters beyond his own work. Youth-led ideas like this can improve local food security, provide steady income, and inspire other young people to try entrepreneurship. Edwin's journey shows that with hard work, a focus on the community, and good market sense, rural youth can create real economic opportunities while helping their communities. As his business grows, he hopes to reach more customers and grow more crops, keeping his family and peers' livelihoods strong.

COPING WITH STRESS AND DEPRESSION: A YOUNG MAN'S JOURNEY

By Gladys Chiguvare

Tinashe (not his real name) lives in Kuwadzana high density suburb of Harare and at 23 years, he faces overwhelming stress. Rising unemployment and high prices make it hard for him to provide for his family. As a cashier at a local grocery store, his salary barely covers their basic needs, and he constantly worries about losing his job.

At home, Tinashe has another challenge. His 21 year old wife, Nyasha, (not her real name) does not want to use contraception, even though they have talked about it. They already have two children, and Tinashe feels the pressure of supporting a growing family. Each time he comes home, they have the same tense conversation about family planning. Nyasha believes that having more children will bring them closer, but Tinashe feels trapped by their financial problems. This conflict makes him feel helpless and adds to his depression.

Tinashe also struggles with the expectations of his community. Men are seen as providers and protectors, and showing weakness is frowned upon. This makes him hide his feelings and pretend to be strong, even when he struggles inside. He withdraws from friends and family, thinking no one can understand what he is going through.

Realizing that he needs help, Tinashe visited the youth desk that Zimbabwe National Family Planning Council conducts at its Southerton Head Office where he found a safe and supportive space to openly discuss his feelings and learn coping mechanisms. Tinashe learnt that asking for help is okay and that sharing his problems can make them easier to handle.

Tinashe through the youth desk run by youth friendly service providers learnt that discussing contraception is not just about money; it is also about their relationship and the well-being of their children. He was encouraged to make use of I statements when expressing himself and to communicate effectively and respectfully.

Tinashe's decision to seek help for his struggles takes immense courage. Many men face similar challenges but societal pressures often prevent them from opening up. Unfortunately, this can lead to devastating consequences, including suicide. By visiting the youth desk Tinashe showed that seeking support is a sign of strength, not weakness.

The Zimbabwe National Family Planning Council plays a vital role in supporting the health and well-being of young people. Through its youth friendly services, ZNFPC provides access to critical sexual reproductive health information and services

EMPOWERED TO MAKE A DIFFERENCE: MY JOURNEY AS A PEER EDUCATOR

As I reflect on my journey as a Peer Educator, I am deeply moved by the transformative power of support and empowerment. My name is Mitchell Chikuvadze, a Peer Educator at the Mabasa Youth Centre. I embarked on this path in Form Three in 2023, and I am grateful to be part of this exceptional and life changing program that touches the lives of countless young people, including my own.

The Peer Education program has equipped me with invaluable skills to navigate life's challenges, particularly pertinent to young people in these challenging times. Beyond aiding my peers, this education has impacted me by shaping my behavior and personality. Hailing from Shurugwi, a place linked with mining activities and frequented by risky behaviors like substance abuse and unsafe sex practices among young people, I have witnessed firsthand the dangers that many of my peers face.

In an environment where most of my peers dropped out of school prematurely, falling prey to various unhealthy habits, the program has acted as a guiding light, steering me away from detrimental choices. Financial constraints burden many families in my community, worsening the plight of dependents like myself. Growing up under the care of my uncle and aunt in Mabasa, Zvishavane, away from Shurugwi, presented its own set of challenges, especially concerning financial support and educational opportunities.

Living in proximity to the Youth Centre has been a blessing, enabling me to capitalize its resources to the fullest. Access to a variety of reading materials, both old and new curriculum, has enriched my learning experience, while the communal spaces equipped with entertainment options like television and sports activities have provided much-needed relief.

During times of financial uncertainty, the allowances provided by the program proved to be a blessing, ensuring my educational expenses were met timely and allowing me to support my family in small but meaningful ways. Despite facing setbacks in the November 2024 exams, where I fell short in Mathematics and Science, the program's guidance encouraged me to pursue extra lessons as an external candidate, preparing diligently for the November 2025 examinations with the aid of the quarterly allowances.

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After hitting rock bottom, Sarah found herself facing legal troubles that forced her to confront her addiction. Though it was painful, humbling experience, it became the turning point in her life. Enrolled in a comprehensive rehabilitation program, she began the arduous journey towards recovery, getting support from counselors, fellow recovering addicts. Her renewed commitment to her children ignited a flicker of hope within her.

In the months that followed, she worked diligently to rebuild her life attending group therapy sessions, participated in family counselling, and dedicated herself to repairing fractured relationships with her children and families. Her small victories without cravings, a heartfelt conversation with her children or successfully returning to her became milestones on her recovery path. The road to recovery is rarely a straight line; paved with setbacks and challenges .However, her resilience and unwavering support of her community allowed her to navigate these obstacles .Today ,she is an advocate for drug abuse recovery, sharing her story to raise awareness and diminish the stigma surrounding addiction. Her experience not only highlights the struggle of drug abuse but also emphasizes the power of compassion, understanding and community support in the healing process.

While drug addiction poses a threat to individuals and their loved ones, Sarah's story reveals that recovery is possible. By fostering an environment of empathy and support, can create pathways for healing and hope for those battling addiction –a reminder that every struggle can lead to a better tomorrow. Zimbabwe National Family Planning Council runs the Comprehensive Sexuality Education (CSE) and the Parent to Child Communication programmes. Both have sessions on drug and substance abuse. While CSE targets adolescents, PCC encourages parents to participate and initiate discussions with their children and dependents.

MENSTRUAL HEALTH DAY: RESTORING DIGNITY FOR GIRLS IN EPWORTH

By Tendai Mwedzi

Menstrual Health Day is observed every year on **May 28th. The** aim is to break the silence around menstruation and promote awareness of menstrual health and hygiene. The date symbolizes the average 28-day menstrual cycle and the roughly five days of menstruation, represented by the fifth month of the year.

This year, under the global theme **"Together for a #PeriodFriendlyWorld,"** Zimbabwe National Family Planning Council collaborated with local organizations in **Epworth** to empower adolescent girls with knowledge, support, and menstrual products, ensuring they manage their periods with dignity.

The event brought together adolescents, parents, teachers, and community leaders to confront long-standing taboos and promote open, inclusive discussions. Through **drama, games, and interactive sessions**, girls and boys learned about the menstrual cycle, personal hygiene, and how to treat menstruation as a normal part of life, not something to hide or to be ashamed of.



Girls and young women from the Epworth community receiving sanitary ware

A major highlight of the day was the **distribution of a variety of menstrual products**, including disposable and reusable pads, tampons, menstrual cups, and discs. For many girls in Epworth, this was their **first encounter with menstrual cups and discs**.

One young woman who was present at the commemorations, Rufaro, who is 17 years old said *"I've only used cloth or pads. I heard someone mention a menstrual cup at school talk, but I have never seen one in real life. We don't find those things in shops here."*

Chiedza who is a college student, said it was her first time to see a menstrual cup and had thought that it was a new contraceptive. Other girls said that that they were concerned about how big some of the products looked.

To address these concerns, health care workers **demonstrated** and educated girls on the **safety, hygiene, and use** of each product. Girls were encouraged to choose what works best for them. Support from organizations such as the **Ministry of Women Affairs**, Community, Small and Medium Enterprises Development, **Childline**, **SAYWHAT**, **Afripads** and **Kunashe Foundation**, ensured that **information and supplies reached those who need them most**, especially in low-resource settings.

A unique and powerful part of the event was the **involvement of boys and young men**. In many communities, menstruation is seen as a "girls-only" topic, often leading to teasing and shame. This time, boys joined and they shared during the discussion that they had looked at menstruation as a `girls` issue that boys should not know about. Such moments show meaningful progress in building respect, empathy, and awareness across genders.

As the day ended, girls left not just with sanitary products, but with **knowledge, confidence, and a sense of dignity**. Zimbabwe National Family Planning Council remains committed to making menstrual health a priority in adolescent sexual and reproductive health programming, **supporting every girl, one period at a time**.

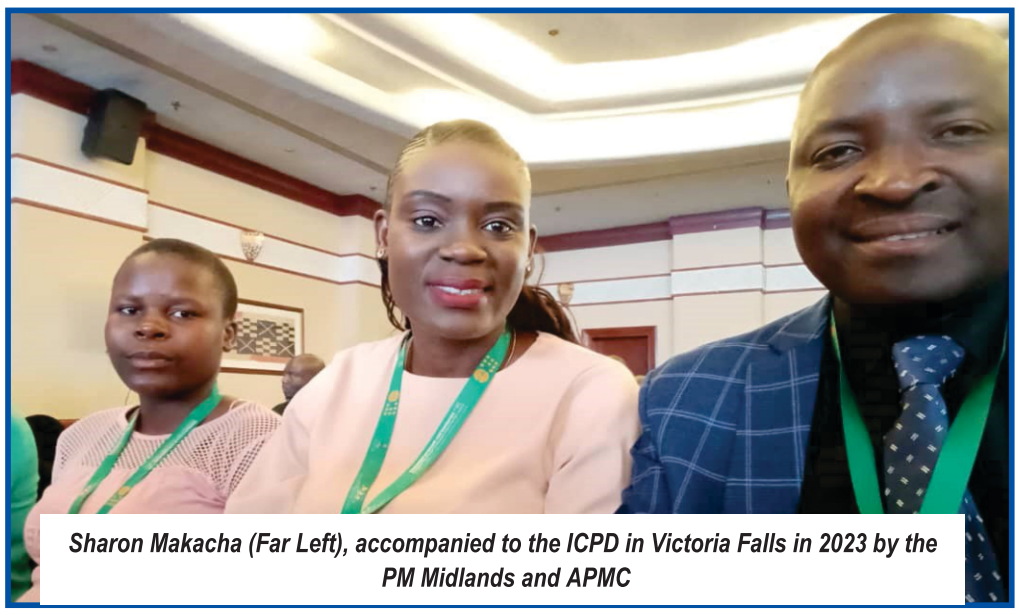
PEER EDUCATION: A PATH TO EMPOWERMENT AND GROWTH

By Sharon Makacha

19 years old, Mabasa Youth Center Peer Educator

After completing my primary education successfully, I encountered challenges with school fees payment due to being raised in a polygamous household with many siblings requiring support. This support was not always forthcoming, and I consistently faced hurdles until my uncle graciously took me in. He enrolled me at the school where he teaches commerce. Life began to brighten up, and hope for a better future emerged.

My fortunes improved further when I joined the Peer Educator group, where I gained valuable knowledge on Adolescent Sexual Reproductive Health, particularly on making informed choices and life skills. However, my uncle later encountered financial difficulties as his daughter entered Form One at a boarding school. My educational future seemed bleak until we started receiving quarterly allowances, which significantly eased my fees payments. Our Youth Facilitator, Mr. Edmund Garikai Mantiziba even liaised with our Head to request a special exemption from being sent home for fees arrears until the Province disbursed our allowances. The request was granted, and we thrived, becoming recognized figures in our community.



Sharon Makacha (Far Left), accompanied to the ICPD in Victoria Falls in 2023 by the PM Midlands and APMC

The confidence and assertiveness I developed propelled me to the position of Junior Member of Parliament for Mabasa, Runde Constituency. Subsequently, I was chosen to participate in the International Conference on Population and Development held at Victoria Falls in 2023, alongside the honorable President of the Republic of Zimbabwe Comrade Emmerson Dambudzo Mnangagwa and other notable senior government officials. Recently in May 2025, I joined the Peer Education Movement meeting held in Harare at the Zimbabwe National Family Planning Council headquarters, representing the Midlands Province. I am delighted to announce that I successfully completed my Ordinary Level with 8 passes, including English, Science, and Mathematics. I am now eagerly anticipating enrollment at Gweru Polytechnic College to further my education.

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ADVANCING AND EMPOWERING MENSTRUAL HEALTH, FAMILY PLANNING, AND TEENAGE PREGNANCY IN ZIMBABWE THROUGH KUNASHE PVO'S INITIATIVES

Kunashe Private Voluntary Organization (PVO) is a youth-led organization dedicated to advancing economic empowerment and participation of women and girls in society. Kunashe aims to inform, include and equip women and girls with resources to thrive through their Sexual Reproductive Health in order for them to fully participate in society by organizing and facilitating community sensitization and awareness-building. This focuses on Menstrual Health and Sexual Reproductive Health promoting social development while reducing unintended pregnancies as well as risky sexual behaviour among young people in various communities.

Menstrual Health Empowerment

Menstrual health is a fundamental aspect of women's health that is often stigmatized and neglected in many parts of Zimbabwe. About 1 in every 4 young girls miss school during their periods due to a lack of access to sanitary products. Kunashe PVO seeks to make a difference by providing menstrual health and hygiene education to women and girls by conducting workshops to dispel myths and reusable pads at the same time reducing stigma and period poverty. Kunashe also partners with local councils and schools. A notable example is Bondamakara School where Kunashe provides reusable sanitary pad making education to women and girls. This helps reduce period poverty and educate women and girls on sexual reproduction health education.

Family Planning Initiatives

Family planning is vital for individual well-being and the overall development of communities. The Zimbabwean health ministry aims to increase modern day contraception prevalence from 48% to 54%. Family planning helps to reduce unintended pregnancies, improves maternal health, and enables families to allocate resources more effectively.

Kunashe PVO seeks to make a significant impact by offering education about family planning. The organization empowers women and girls to make informed decisions about their sexual reproductive health. This includes workshops on contraception and community outreach programs to dispel myths and misconceptions about family planning. Empowering women with knowledge in this area leads to better health outcomes, reduces maternal and infant mortality rates, and contributes to economic stability.

Addressing Teenage Pregnancy

Teenage pregnancy is a significant challenge in Zimbabwe, often resulting from lack of education, poverty, and limited access to reproductive health services. Pregnant teenagers are more likely to drop out of school, face health risks during childbirth, domestic violence and encounter socio-economic challenges. Teenage pregnancy remains a significant public health and socio-economic challenge in Zimbabwe. According to the Zimbabwe Demographic and Health Survey (ZDHS) 2022, about 21% of girls aged 15–19 have begun childbearing. High rates are more common in rural areas, where access to education and reproductive health services is limited. Kunashe PVO has implemented programs specifically designed to prevent teenage pregnancy, including comprehensive sexuality education, mentorship programs, and support for pregnant teenagers and young mothers. By providing these girls with the support and resources they need it has helped them continue their education, improve their economic prospects, and break the cycle of poverty.

Conclusion

Kunashe has empowered women and girls to take control of their health, improve their economic prospects, and contribute to the development of their communities.

FROM DRUGS TO DREAMS

By Thank you Maphosa (Murowa Youth Center)

In our community, drug abuse continues to silently impact the lives of many young people. As a peer educator, I once encountered a boy whose life had been turned upside down by drugs. He was withdrawn and disengaged from anything productive. Many had given up on him, but I chose a different approach. I began by showing him respect and care, free of judgment. Gradually, he opened up and shared how he started using drugs due to peer pressure and how it had overtaken his life. He felt trapped and helpless. I assured him that recovery was possible and that I would walk this journey with him.

I encouraged him to attend support sessions and connected him with others who had overcome addiction. Hearing from people with similar experiences gave him hope. He began to believe that he, too, could conquer his addiction.

I also introduced him to community activities where he could volunteer and regain a sense of usefulness. His confidence slowly returned. I taught him life skills such as decision-making, goal-setting, and expressing his feelings through music and writing short stories. These small efforts helped him rediscover his self-worth.

Later, I linked him with professional counselors for ongoing support. Today, he has reformed, returned to school, and become an advocate for other young people struggling with drug abuse.

This journey taught me that transformation requires patience, empathy, and consistent support. As peer educators, our role extends beyond sharing information; we must support our peers until they believe in their own strength. Drug abuse destroys lives, but with love, guidance, and opportunity, anyone can rebuild. Let's continue to be a light for our peers. Change begins with us.

THE HIDDEN STRUGGLE

By Vongai Chimhini

In the busy and small town of Chiredzi, addiction often lurks beneath the surface of everyday life, touching families and friends in ways many would choose to ignore. The battle with drug abuse addiction is not merely a personal struggle, it ripples through communities, affecting the lives of everyone connected to the individual caught in its grip. Illustrating this reality is Sarah, a 22 year-old mother of two whose journey through addiction reflects a growing crisis faced by many across the globe.

Sarah, a nurse known for her compassion and dedication to her patients was once a vibrant and loving person whose laughter filled her home. However, her husband unexpectedly divorced her to marry another woman. It was a painful divorce and in the ensuing emotional turmoil, she turned to prescription painkillers to numb her pain. What began as a seemingly harmless escape spiraled into a full-blown drug abuse intake of excessive alcohol, marijuana, Crystal Meth unravel her life completely. Her transformation from a devoted nurse and mother to a shadow of her former was gradual but devastating. As her addiction deepened, she missed her priorities, family events, neglecting her work and her children and distancing herself from friends. The once warm atmosphere of her home turned cold, leaving her children and family confused and afraid. The children witnessed their mother's struggle but often too young to understand the nuances of addiction.

The implications of this epidemic reach far beyond the individual. Families fractured, communities strained under the weight of addiction-related issues such as crime, poverty and health crises. Hope can emerge from the depths of despair.

to be continued



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A MULTISECTORAL APPROACH IS THE KEY TO WIN THE FIGHT AGAINST TEENAGE PREGNANCIES AND CHILD MARRIAGES IN MASHONALAND CENTRAL PROVINCE.

By Percival Kushure

With a soaring rate of teenage pregnancies, from 31% in 2015 (ZDHS 23-24) to 37% and 49.50% for child marriages Mashonaland Central Province has a mountain like task to avert these challenges. It requires a multisectoral approach which includes governmental departments, parastatal, Non-Governmental Organisations (NGOs)to come up with effective strategies to empower communities and young people.

Several notable interventions are being done in the province in efforts to avert teenage and child marriages. These interventions include the "Not in my village campaign" which is being implemented through joint collaborations between community leaders and stakeholders in the province, the campaign is led by community leaders (Chiefs, village heads) to ensure that no young girls and boys are married off.

Drug and Substance abuse campaigns are being done by government ministries, NGOs and parastatals. The campaigns seek to educate young people about the dangers of using drugs and alcohol which can predispose young people to sexual activities leading to teenage pregnancies and child marriages.

Engagements with community leaders and community based health workers, parent child communication sessions, comprehensive sexuality education, radio programs, church programs on sexual reproductive health, implementation of behaviour change models for young people and adults such as the SASA champions, CATS models by the National Aids Council(NAC) and other partners, the DREAMS programs, Early Warning Systems in Schools by CAMPHED,Comprehensive Sexuality Education(CSE) and Parent Child Communication(PCC)being implemented by Zimbabwe National Family Planning Council(ZNFPC) and other partners are some of the broader interventions being implemented in the province.

Despite all these efforts which are envisaged to reduce and avert the incidences and prevalences of teenage pregnancies and child marriages, it seems like it's a losing battle, given the high prevalent rates. Questions arise. Are we losing the war? Should we give up? What should we do as a province? The answers to the first 2 questions is a big.NO. The popular German moto or manifesto during the first world war, was a "German Soldier never surrend". It is the mindset that we should all have as stakeholders in the fight against child marriages and teenage pregnancies.

Whether it seems like we are losing it, behavior change is a process and may take time so resilience on our part as stakeholders is required to continue with our interventions.

A number of challenges have been noted through scholarly reviews, research and observations, notably the 2023 National Adolescent Pregnancy survey, 2016-2020 National ASRH strategy, 2015 ZDHS finding and many others show that young people need knowledge. Information dissemination is a continuous process to ensure young people gain knowledge. That's interventions to ensure provision of sexual reproductive health information is key. Knowledge is power, it empowers young people to resist peer pressures to engage in sexual activities, knowledge helps young people to say NO and avoid the would-be consequences of sexual activities.

Knowledge of laws can equip young people to stand for their rights and avoid being pressured into deviant activities. A young person who lacks knowledge of laws and rights is naïve. Hence, the need for young people to be educated on laws, rights and responsibilities.

Lack of access to sexual reproductive health services is another area which needs to be strengthened through establishment of service delivery points convenient for young people such as youth centres. Land, infrastructure or financial and material resources to establish these youth centres in the province is key, and as such support from urban and rural district councils is appreciated. Private public partnerships are key for financial and material support to establish such centres.

It is therefore, upon, "the powers that be" in the private, public sector, community and local authorities to support the establishment of youth centres for sexual reproductive health programs when requests for support are extended to them.

Parent child communication (PCC) has been found to be lacking among parents and children. PCC helps to instill morals and values that shape the behaviours and conduct of young people as they grow up. Consequently, the need to educate parents across the province on how to communicate, what to communicate with their children, including issues to do with sexuality becomes cardinal. The approach requires sacrifice from parents and guardians to find time to be trained and thereafter to implement what they would have been taught. Even if the chance to be capacitated through funded programs is not accorded, parents should simply improve communication with their children, to talk, discuss issues, and provide counseling to solve problems that young people face.

Many of the unresolved problems and issues between parents and children on issues to do with sexuality emanate because of poor or non-existent communication at all. This gap may result in bad influence from peers and misleading information from social media. An old proverb says, "charity begins at home" means that to build a good personality and behavior in a child it starts very early at home through parental education and inculcation of knowledge to their children.

Unfounded Religious beliefs based on ambiguous doctrines have fueled the increase in child marriages cases in some Christian denominations. The basis of such marriages in these religious sects emanate from spiritual perceptions of dreams where men are said to encounter dreams instructing them to marry young girls. A practice mainly referred to as, " Kurotswa".

Studies contacted in 2023 on the assessment of adolescents in selected districts in Zimbabwe including districts in Mashonaland Central which include Mt. Darwin, Mbire, Shamva showed that christian religions under the apostolic sects had more cases on adolescent pregnancy and child marriages than other Christian religions. It then calls for engagements with the leadership to discuss amicably issues surrounding the proliferation of child marriages within their constituencies as research shows.

On another point, child marriages have also been increasing among similar age groups due to high sexual activities between young people, either as a result of drug and substance use, poverty and peer pressure. The result is that usually the girl child elopes with the sexual partner.

It is therefore paramount, to note that there is no one best way to change human behaviours given the magnitude of the problems, but through a myriad of effective interventions we can win the fight against teenage pregnancies and child marriages. "Chara Chimwe hachitswanyi inda."

So, to support the interventions stated at the outset being done through the multi-sectoral response to end child marriage and teenage pregnancy there is need for communities to work together and take action for the laws to work. Parents should not nicodemuosly marry off their young girls in desire of wealth or rather to pacify the sexual shenanigans committed by their children.

Neighbours should be whistle blowers on child marriages cases, child protection committees should continue with their sterling work to ensure that children are protected in the communities.

Communities should continue to support and participate in development and sexual reproductive health programs as they come to their communities. Sexual reproductive health services should be accessible to young people in rural areas as much as they are in urban settings. This can be achieved through private public partnerships where youth centres should be established in all districts of the province. The Zimbabwe National Family Planning Council and partners are willing to collaborate and partner stakeholders who are willing to support the establishment of youth centres in communities.

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PEER EDUCATOR COURAGE'S INNOVATION STORY

By Tendai Mwedzi

Peer education is a powerful approach that empowers young people to share accurate information on health, life skills, and positive behaviors with their peers. Zimbabwe National Family Planning Council (ZNFPC) is implementing this approach. Peer education has transformed thousands of lives by equipping young people with sexual and reproductive health knowledge, building confidence, and giving these young people a platform to lead in their communities.

In Manicaland Province, Courage Chiwarawara has become a driver of innovation and development. Using what he learned through peer education, he is making an impact in his community, not just by educating others but by developing creative solutions to local challenges. Courage has taken the peer educator role beyond its traditional scope, demonstrating how life skills education can inspire innovation, entrepreneurship, and community engagement.

Courage recently participated at a national Peer Educator Movement meeting, which brings together representatives from ZNFPC youth centres across all provinces every quarter. He stood out by presenting two projects he is leading in his community. The first is the production of baobab coffee, which he sells locally to obtain an income. The second project involves constructing egg incubators using simple, local and readily available materials. Both initiatives reflect his entrepreneurial mindset and commitment to community development.

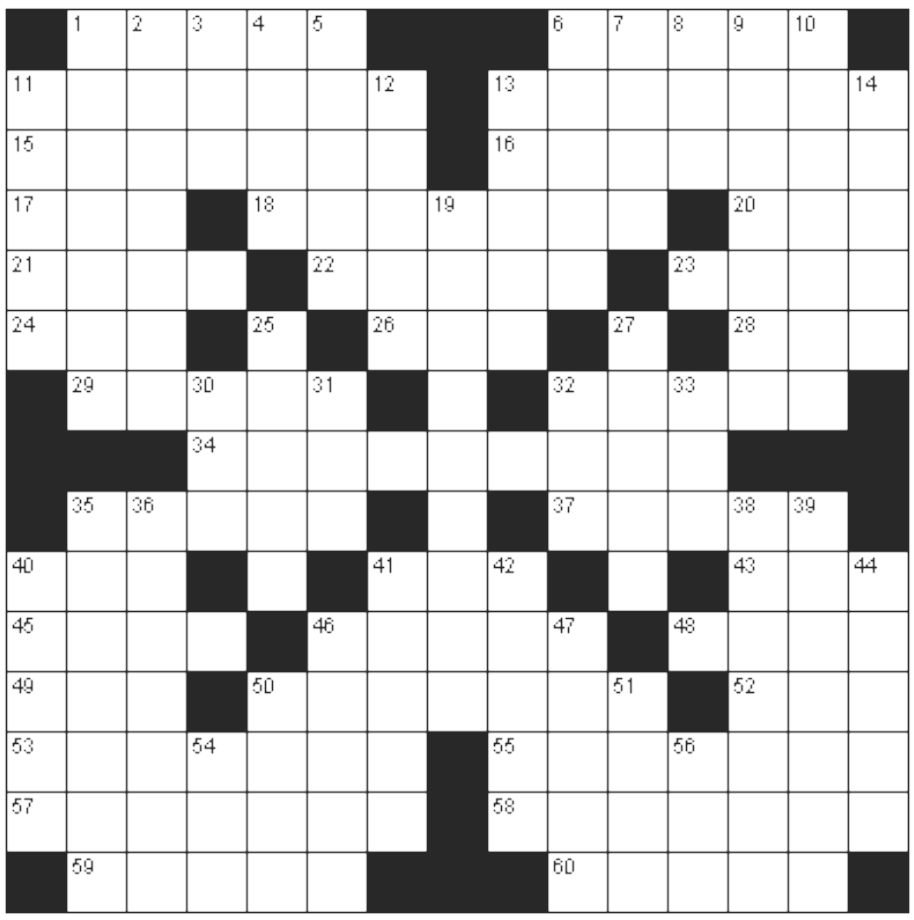
The ZNFPC Chief Executive Officer, Mr Farai Machinga expressed support for the projects initiated by Courage. Mr Machinga pledged to assist Courage to increase baobab coffee production and egg incubators assuring Courage of the organization's support in this regard. Mr Machinga said he was looking forward to a time when other youth centers and peer educators could harness what Courage has begun. The ZNFPC CEO encouraged the PEM delegates to also start projects in their communities.

Courage's journey reflects the broader impact of life skills empowerment. When youth are equipped with knowledge, supported with platforms for engagement, and trusted to lead, they become true agents of change. Peer educators are not just learners, they are innovators, role models, and builders of a brighter future for Zimbabwe.

PEM meetings are a vital part of ZNFPC's commitment to meaningful youth participation. They provide a space for young people to share activity reports, exchange ideas, discuss challenges, and suggest solutions that improve programming and services targeted at youth. By involving young people directly in these discussions, ZNFPC ensures that youth voices are not only heard but acted upon.



Courage Chiwarawara with the ZNFPC CEO Mr Farai Machinga



ACROSS

1. A lyrical poem attributed to King David
6. Anagram of "Deals"
11. Carnal
13. Effeminate
15. In a grossly stupid manner
16. Rhythmic
17. Viper
18. In a concise manner
20. Dress
21. Gratuities
22. Scorch
23. Correspond
24. South southeast
26. Demure
28. Old age (archaic)
29. Attempted
32. Volcano
34. A public declaration of intentions
35. 10th letter of the Greek alphabet
37. A southern US state
40. N N N N
41. A rapid escape
43. Gross National Product
45. Precipitation
46. Anagram of "Rakes"
48. Afrikaner
49. Vase
50. Some unspecified time in the future
52. Born
53. Lame
55. Specify individually
57. Flimsy or slight
58. Native born person of a country
59. Financial obligations
60. Lubricated

DOWN

1. Refuse to stop
2. Large-headed turtle
3. Donkey
4. Strong sexual desire
5. Not females
6. A structural support
7. A plant with showy pendulous flowers
8. Play a role
9. Gods
10. Give a title to someone
11. Sings in a particular jazz style
12. Words of a song13. Lament
14. Provoked
19. A piece of frozen crystalline precipitation
25. Jumped
27. Supply
30. Elf
31. A nucleic acid
32. Supersonic transport
33. Brine-cured salmon
35. Knotty
36. Mindless
38. Suffer39. Violently exhaled
40. Belch
41. Cripples
42. Army doctor
44. Primp
46. Alone
47. Relative magnitudes of two quantities
50. Blemish
51. A large hairy humanoid of the Himalayas
54. Bar
56. Military (abbrev.)

Success is not final;
failure is not fatal:
It is the courage to
continue that counts.

Winston Churchill

Produced by ***ZNFPC AUDIO VISUAL UNIT***
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