



# THE VOICE

The Female Students Network Trust Publication



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## POEM

### The forgotten girls

Poet: Floe

I hear the cries of innocent souls still thriving to exist and resist,

Forgotten by their mother land,

Their world has become as hollow as it's glitter in essence.

The Ministers tried to fight for their case,

The Human rights activists even tried to intervene,

Mr. President himself chipped in for their case,

But along the way the case just faded away

The girls cries out for justice.

Oh! how they wish for peace but, ...

They became forgotten like they never existed.

Everyday they're are hunted by monsters that destroyed their lives,

They got lost in battle that they have lost all hope,

They became the talk of their country,

They headlined the news channels and printing press within and beyond borders.

They're waiting for some saving grace to come to their rescue.

They keep hoping for a brighter day to come for their world has become black with shadows, darker than a moonless sky.

They have become nothing but just forgotten girls.

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## WE NEED CONDOMS: FEMALE STUDENTS LAMENT



By Nobert Kuvamudiki

Female students from the Catholic University of Zimbabwe (CUZ) during a dialogue meeting conducted by Female Students Network Trust (FSNT) with support from Ur-

gent Action Fund (UAF) recently at the institution's premises have called on the religious oriented University to provide condoms and other SRHR services at the institutions for easy access by students.

The dialogue comprised of 60 female students and 15 authorities unravelling SRHR statutes that mandates for the provision of SRHR services and information and what the institution has been doing on the matter so far.

The selected institutions have strong religious backgrounds which do not embrace issues of SRHR due to their doctrines of purity and sanctification based on 1 Thessalonians 4v s3-5, which states that, "for this is the will of God, your sanctification: that you abstain from sexual immorality; that each one of you knows how to control his own body in holiness and honour, not in the passion of lust like the Gentiles who do not know God" neglecting the sexual activeness of students

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# How communities can help pregnant girls and adolescent mothers continue their education

By *STAFF Reporter*

The threat that COVID-19 poses to efforts to realize the right to education for all children is clear. UNESCO estimates that nearly 24 million learners, from pre-primary to university, were at risk of not returning to school following school closures due to COVID-19. Of these, 11 million are primary and secondary school learners who, if they did not return to school, it would have wiped out gains made in reducing the level of out-of-school children since 2012.

Girls' education is uniquely threatened. School closures increase vulnerability to child marriage, early pregnancy, and gender-based violence – all of which decrease the likelihood of girls continuing their education.

“This is an all-hands-on-deck moment for vulnerable girls. Governments, donors, partners, and communities have to coordinate closely to ensure that each and every girl returns to school safely as they reopen,” Stefania Giannini, Assistant Director-General for Education, UNESCO

## Lifting the ban on pregnant girls

While a few countries across Africa – namely Togo, Equatorial Guinea and Tanzania – have laws and policies that expel pregnant girls from school and ban them from returning, many more countries across the continent prevent their return out of common practice, absence of clear policies, or re-entry policies that present other barriers or obstacles.

This has begun to change. In Sierra Leone, where 11,000 adolescent students became pregnant during the 2014 Ebola outbreak school closures and were met with the nation's ban on their re-enrolment after schools reopened, the ban was lifted in March of this year after the ECOWAS court ruled it discriminatory.

The government is now praising this policy reversal as it anticipates similar impacts from COVID-19 and has additionally been conducting a nationwide campaign to protect girls and prevent teenage pregnancy during school closures.

In August, Zimbabwe amended its Education Act, making it illegal for schools to expel students due to pregnancy – a change that World Vision and educationalists had been advocating for years.

Elsewhere in places like Uganda and Kenya, school reopening's following COVID-19 closures will put the effectiveness of their re-entry policies to the test?

## A new initiative in Zimbabwe to help girls stay in school

Lifting bans and establishing supportive policies are essential for the continued education of pregnant girls and adolescent mothers. The solutions needed to ensure the continuation of their education are, however, as multidimensional as the problem itself.

In Zimbabwe, World Vision leads the Improving Gender Attitudes, Transition, and Education Outcomes (IGATE) initiative – an A+ rated program of the UK's Girl Education Challenge implemented in 318 rural schools in Zimbabwe.

IGATE works with networks of community learning champions, resident teachers, and peer leaders from school clubs to help girls enroll and stay in school or access community-based education opportunities like literacy and numeracy, life skills, financial literacy and vocational training.

During COVID-19 school closures, IGATE has continued to provide study guides, daily literacy and numeracy exercises, and support networks to meet the gap in distance learning for rural girls and boys.

As schools reopen in phases in Zimbabwe, the impact of the lockdown and school closures on adolescent girls is becoming clear. Early reports in some remote areas show as many as half of girls in exam classes are pregnant, married or not returning for other reasons, such as work.

While absenteeism of girls is a third higher in preliminary data, boys are also dropping out as they have moved to support themselves or their family in activities like gold panning, livestock herding or trade.

# STUDENTS STARVED OF SRHR SERVICES

By *STAFF Reporter*

Students are facing challenges in accessing sexual reproductive health rights (SRHR) such as access to comprehensive sexuality education and to essential sexual and reproductive health services. Students are struggling to access contraceptives in tertiary institutions especially church-based in-

stitutions. As a result, student is engaging in unprotected sex which leads to the contraction of STIs such as HIV and sick and this is leading to unintended pregnancies.

Information gap is another challenge that students from tertiary institutions

are facing this is because students are lagging behind whilst others say lack of comprehensive sexuality education was increasing exposure to risk and unintended adverse outcomes. Children in tertiary institutes especially those which are

church based want to engage in sexual activities and they are engaging in sexual activities whilst the school rules say you should abstain but students do not obey because they have their sexual rights so they don't have adequate information on safer

sex you which is exposing them to risk.

Nurses or health worker who works in university clinics shout at students and some of them rove around telling people our issues and some will delay giving us services we will be in need of such as contraceptives this is a challenge that students from tertiary institutions are facing

Students are not able to decide for themselves towards their sexual rights or their bodies. If a girl child got pregnant and want abortion some nurses or health workers they do not offer the service to the girl because she just decide on her own they say they want parental consent for access to the services on the other hand students opt not to seek care they want to avoid telling their parents about their health problems and sexual activity because they will end up judging basing on the societal norms and values

which says a girl should not engage in sexual activities before marriage so students end up being exposed to unsafe ways of abortion. Moreso, some laws serve to protect young people, national age of consent laws and social norms is also influencing service providers attitudes and behaviours and create barriers to service access.

Furthermore, recommendations for redressing sexual reproductive health rights challenges include health interventions should be available and accessible at the time and place they are needed and they must be also be acceptable and of high quality. This will ensure the safety of students in tertiary institutions. Providers of sexual reproductive health services should receive training and

ongoing supervision in providing services such as contraceptives, counselling and medication.

Finally, the spread of STIs and HIV cases in colleges and universities is more prevalent this is because of unsafe sexual practices and lack of contraceptives. Some universi-

ties have an outbreak of these STIs which shows that sexual reproductive health rights issues should be redressing or keep on raising awareness so that students will demand their sexual reproductive health rights in their institutions.



**Woman1:** (takes a deep breath), he is alive.

**Mai Shamie:** Mjolo wapindaneMumba maiMwana?

**Woman1:** Ko what happened?

**Mai Shamie:** (looking at her friend 😞) hanty you baba Shamie pavanga vakunonka kuuya kumba paya vachirara kuBhawa

**Women1:** Yes.

**Mai Shamie:** ndakazenge ndakudanana nemukomana wemuLin medu mustvuku uya anonzi Benny cz ndandanzwa neNzara wena, apa chikomanana chiya chinogona kurava basa sei, kana Baba Shamie ndandisatombova-funge ufunge. But ma1 avapo manje ndeyekuti Baba Shamie vakazozvibata manjee ende varikupenga

haaa ma1. Ko tanga takufarisa tichizvitorawo maPictures futi ka, so vakamaona ese saka kumba kurikupisa hakusi kutombogarika zvaizvezvi. Amhenomai Mwana kui zvichadii.

**Wome1:** Yoh aya ndoma1 manjee aya. Imimi mangamaku-zvinyanyawo imi aaah.

**Mai Shamie:** Ko hanty angaasisa perfume duty rake here akuita zveDoro.

## ZUPCO QUE-UE Conversations

*BY Daphine Maveke*

**Woman 1:** Hello Mai Shamie, how are you doing, long time.

**Mai Shamie:** I am doing fine my friend, how have you been.

**Woman 1:** I am okay I

guess, wow you look good Mai Shamie, it's quite clear Daddy is doing it right.

**Mai Tadi:** (laughs) really, thank you and you look good yourself as well. How is your husband by the way?



# THE PREVALENCE OF STIs AND HIV CASES IN COLLEGES & UNIVERSITIES

**BY Yolanda Nagoma**

Zimbabwe has widespread epidemics of most major sexually transmitted infections (STIs) including HIV. It is believed that one-third of new sexually transmitted infections cases usually occurs to people under 25 years of age every year, this is because university or college students are in the youth age and are exposed to risky sexual behaviours such as unprotected sexual intercourse thus leading to STIs. STIs are spread predominantly by sexual contact, including vaginal, anal and oral sex. According to the local student union, In December 2015 67% of Zimbabwe's university students were infected with sexually transmitted diseases in that ended academic year. Most of these infected victims are poor female students who in their vulnerability ends up indulging in prostitution with businessmen, politicians and top government officials in order to make ends meet.

They find prostitution or dating old and rich men as the only means in which they can satisfy their needs, this is due to lack of enough funds from the parents which most of them have lost their jobs and has turned into vendors all in the name of fending for their children. In this case

youths are therefore not satisfied because at a tertiary level the demand rises in every angle and on a daily bases mostly because this is where people of different backgrounds and genres meets hence there is need to meet up with the standards of that of a high class student and by so doing joining the dirty deeds of men who prey on innocent girls or even women who also preys on innocent boys and most of them refuses them their right to protect and they don't state their statuses at all. They even refuse to go for a test on STIs with the statement "don't you trust me?" thus these girls and boys fall into the trap ending up being infected at a young and very tender age and thus the cycle continues on a daily basis leaving the country with a high rate of deaths in the younger generation.

Although treatment is available for all STIs, not



all are curable. Of all age

groups the highest prevalence of STIs is among college-aged students with the reason being attributed to the "hook-up culture", a term used to describe casual sexual relationships. A national college health assessment survey in 2018 found 66% of students reported having sex in that last year. Regardless of sex recession in recent years, students are nevertheless practising unprotected sex. According to a survey of thousands of college students across the country, only 62% reported that they always or usually wear a condom and in 2019 only 40% of college males and 55% females reported receiving and completed their HIV vaccinations. Condoms and vaccination help reduce the transmission of STIs, which is important in the sense that one may not know the sexual history of their partner.

While the overall incidence of HIV infections has decreased in recent years,

rates of HIV among college

students has not seen a similar decline. It is estimated that one in 500 college students are infected with HIV while 22% of HIV cases involved individuals aged 13-24. The other means of infection being the sharing of needles with illicit drug use. Some STIs can spread through other means such as skin to skin or oral contact. Methods to prevent HIV includes condom use and pre-exposure prophylaxis (PrEP) which is a daily antiretroviral pill for uninfected people who are at high risk of HIV infection and is nearly 100% effective.

It is to note that the highest prevalence of STIs is among college aged students with approximately two thirds of students reporting having sex in the last year; men and women having 14 and 12 sex partners respectively. On average in college STIs range from common curable ones like chlamydia to deadly ones like HIV. The strategies to prevent STIs to help to protect not only one's health but of others are to limit the number of sex partners, wearing a condom, getting tested as well as receiving vaccinations that prevent STIs in order for us to have a better and brighter future also it contributes to a decrease in the number of suicides among students.

# WE NEED CONDOMS: FEMALE STUDENTS LAMENT

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in Tertiary Institutions and their SRHR needs. Hebrews 13 vs 4 talks of the judgement of the sexually immoral and adulterous, a verse usually used by men of the cloth in these institutions to instil fear amongst female students to practice their bodily autonomy.

Speaking at the event, female students alluded that there are neither SRHR services nor infrastructure at the institution yet students are indulging in sexual activities despite the fact that the University does not offer ac-

commodation facilities exposing them to Sexually Transmitted Diseases (STDs).

“Yes, we really need condoms, sanitary wear and

with so it means that if someone has a headache that person will have to commute to town for such basic services to be provided”, said Loraine (Catholic University Female Student).

Other female students pointed out to discrimination as another problem they are facing when they get a chance to access SRHR services from outside stakeholders who would have visited the campus.

“Here at Catholic University, we don’t have access to

those services, but when we manage to access the services from different outside stakeholders, we often face discrimination and judgement from them especially when being tested for HIV they ask us why we do sex at first place of which we are adults not some primary pupils and sex is a physiological need”, said Shamiso Mbada.

The concept of providing Sexual Reproductive Health Rights (SRHR) services and information in Universities and Colleges is usually treated as secondary especially in religious based institutions where religious ethos are prioritised.



other health services readily available at the campus because right now we do not even have a clinic to begin

## SOCIAL SCENE

