

Evaluation of the barriers faced by female secondary school students in Masvingo District in accessing contraceptives.

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Abstract

This study is concerned with evaluation of challenges faced by female students in Masvingo District secondary schools in accessing contraceptives. Using a wide survey methodology, 1000 questionnaires were distributed to female students in secondary schools of Masvingo District for data gathering. It emerged from the study that there are quite a number of factors that inhibit access to desired contraceptive methods by the female students in secondary schools in Masvingo district in Zimbabwe. These factors range from the side effects of the contraceptives, costs of contraceptives, loss of sexual pleasure, lack of knowledge, shortage of the contraceptives, limited confidentiality by service providers, male dominance, religion and community perception. Based on the findings of this study, a number of recommendations are suggested in order to address the challenges experienced by the students in accessing inappropriate contraceptives.

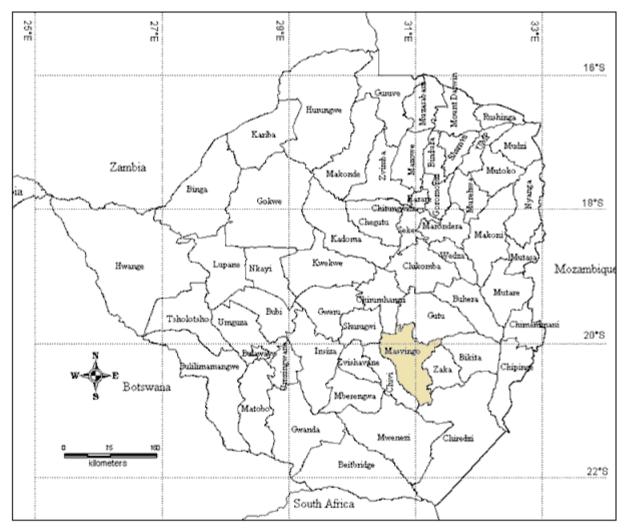
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1. Introduction

Numerous contraceptive methods have been used across the world since time immemorial. The use of contraceptive can be defined as the deliberate use of artificial methods or other techniques aimed at preventing pregnancy. The methods can either be reversible or irreversible. Reversible contraceptive methods of birth control are temporary in nature (Humezo, 2019). On the other hand, irreversible methods of contraception refer to birth control methods which are permanent. Contraception is practiced for many reasons which include limiting of number of children, avoiding medical risks of pregnancy and controlling world population growth (Chazireni & Chidzawo, 2017). Availability of contraceptives helps individuals eradicate unmet need for family planning. Unmet is defined as the percentage of women of reproductive age, either married or in a union who want to stop or delay childbearing but are not using any form of contraception (Casterline & Sinding, 2010). The use of different contraceptive methods has increased significantly in the developing world what remains worrisome is that there is still yet a significant demand of family planning needs that are still unmet. Students in secondary schools in Zimbabwe still face an unmet need for contraceptive methods. It is the purpose of this paper to evaluate the challenges faced by female secondary school students in Zimbabwe, with special focus on Masvingo District, in accessing contraceptive methods.

1.2 Delimitation of study area





Zimbabwe has ten provinces and sixty-one administrative districts (ZIMSTAT, 2020). Masvingo district is located in the southern part of Zimbabwe. Masvingo city, the oldest urban area in Zimbabwe, is the provincial capital situated in Masvingo district. According to the Ministry of Primary and secondary education, Zimbabwe (2020), Masvingo district has seventy secondary schools. The map (Figure 1) shows the location of Masvingo district in Zimbabwe. Other districts found in Masvingo province are Bikita, Chiredzi, Chivi, Gutu, Mwenezi and Zaka.

2. Materials and Methods

It was difficult to collect data from every female student in all the secondary schools in Masvingo district of Zimbabwe. For this reason, a sample of 1000 female students from secondary Schools in Masvingo district was chosen. One thousand (1000) survey questionnaires were distributed to female students at different Schools in Masvingo district for data gathering. To ensure that the required number of responses was collected from every school, more than one thousand were distributed and then the first one thousand were considered. The researchers used stratified random sampling. The technique was used because the researchers wanted to make sure that the sample represented specific subgroups or strata that were relevant to the study. Age groups of



students at the schools were taken into account. Informed consent was also obtained from all research participants as they were informed of the true purpose of the study before participating. More so, participants were also assured confidentiality with no possible identifiers to persons who provided the information being revealed.

3. Results and Discussion

In this study researchers sort to evaluate the level of awareness of the different contraceptive methods that female students in secondary schools of Masvingo district have. Students in this study, were asked to indicate if they were aware or not aware of the different contraceptive methods. Their responses are tabulated in Table 1. Of the 14 contraceptive methods available for use by the female students in Zimbabwe, students showed that that they mainly know only three methods and these are condom use, family planning pills and the withdrawal method. The numbers of female students aware of such methods were very high and the number of students who are not aware of such methods are very low as shown in Table 1.

As shown in Table 1, the majority of the methods are little known by the female students or are used on a small scale. This may imply that the level of adoption by female secondary school students in Zimbabwe may be generally low. The number of students who indicated being aware of the other eleven methods is generally low. The lowest number of 30 was scored by sterilization. Sterilization is irreversible and once one decides to adopt it, there is no more possibility of conceiving even if need arises. This may be one of the reasons why the frequency of irreversible contraceptive methods is extremely low. Some of the methods may have not be known by some female student because of the young age of the respondents and being unmarried. Examples of such methods are use of films, use of foams, use of lactation, use of the ring, use of sponge and uterine devices.

Table 1: Contraceptive methods known and unknown to female secondary school students in Masvingo district.

Contraceptive method	Number aware of	Number unaware of
	method	method
Condoms use	810	190
Family planning control pills	750	250
Withdrawal	650	350
Usage of jadelle	400	600
Usage of emergency pills	200	800
Usage of depoprovera	150	850
Vaginal Uterine Device	100	900
Vaginal ring	170	830
Usage of sponge	200	800



Sterilisation	30	970
Usage of contraceptive foam	90	910
Usage of contraceptive patch	160	840
Usage of contraceptive film	199	801
Lactation amenorrhea	80	920

As reflected in Table 2, various challenges are experienced by female students in secondary schools in Masvingo district in accessing different contraceptive methods. The challenges can be put into two categories. One of the categories has challenges that were mentioned by a large number of respondents. These are unavailability of contraceptives, cost of contraceptives, lack of confidentiality by service providers and lack of knowledge to use the contraceptive methods. It is not surprising to have a large number of respondents mentioning these challenges since Zimbabwe is a less developed country and some of these challenges can be attributed to lack of financial resources by government and students, limited awareness programs and limited resources at clinics to maintain confidentiality. Some of the findings of this research are in agreement with some scholars (Alexander et al, 2014; Bran & Masunungure, 2010; Humezo, 2019) who argue that the cost of some of the contraceptives is extremely high that most females cannot afford them. This has led to low levels of usage by most female students especially in Zimbabwe. The use of some contraceptive methods such as jadelle and rings requires expert knowledge which inhibits most people to use them if service providers are not trained (Humezo, 2019). As it emerges in the current research, lack of knowledge and awareness programs can pose significant amount of hindrance to contraceptive use. This view is in line with the argument of other scholars (Mautsa, 2016; Uthman, 2008) who maintain that the choice of contraceptives is highly determined by the amount and range of information people have.

Table 2: Challenges in accessing and using contraceptive methods by female secondary school students in Masvingo district.

Contraceptive challenge	Number of respondents
Side effects of contraceptives	30%
Costs of contraceptives	80%
Reduction in sexual pleasure	50%
Limited knowledge of contraceptives	62%
Limited availability to contraceptives	78%
Limited confidentiality by service providers	75%
myths	30%
Religion	25%
Stigma and community perception.	40%



On the other hand, there was a category that had challenges that were mentioned by a small number of respondents. These were loss of sexual pleasure, side effects, religion, male dominance and community perception. These challenges are basically social in nature and are usually dominant in societies that have limited accepted western and modern styles of life (Chazireni & Chidzawo, 2017). It is surprising for such a trend to emerge among female secondary school students (who provided the data) since such students are expected to be fast in the adoption of innovations and new ideas such as the different contraceptive tools.

4. Recommendations

The following recommendations can be made to the ministry of primary and secondary education, service providers, policy makers and academia for them to minimize the challenges faced by female students in secondary schools in accessing contraceptives.

Counselling services

There is need for provision of counselling services before and after administering of contraceptives in health facilities. This will enable the users to make informed judgements and make effective decisions.

Clinics and hospitals

It is necessary that the ministry of health invests more resources towards provision of contraceptives. Initiatives should be done to engage the services of youth friendly organisations as well as peer educators so that the female students are comfortable to access family planning services from the health facilities. The peer educators reduce the problem of shyness which often affects the female students who are still young and unmarried. Confidentiality should also be promoted when students are seeking the contraceptives.

• Training and education

There should also be availability of personnel trained to offer the basic contraceptive method mix (barriers, short and medium acting)

National policy

The government should invest in opening up more contraceptive service centres across the country as findings from this study indicated that the female students have challenges in accessing such services. Government should also target secondary school students when programs aimed at training health personnel in family planning come up. This helps in the improvement of service delivery by these institutions to the students.

• Community knowledge of contraceptive services

Community members often have knowledge of most of the common and basic contraceptive methods, but have less knowledge of emergency contraceptives and other more advanced methods. Such knowledge should be made readily available to the female students in secondary schools.



5. Conclusion

Female secondary school students in Zimbabwe and in Masvingo district in particular have access to different contraceptive methods. They are however, numerous factors which determine their choice, use and non-use of certain contraceptives. The factors that affect the choices of the types of contraceptives that are chosen or the failure to use certain types of contraceptives include side effects of contraceptives, costs of contraceptives, reduction in sexual pleasure, limited knowledge of contraceptives, limited access to contraceptives, limited confidentiality by service providers, male dominance, religion and stigma and community perception. To sum it up all, female students in secondary schools in Masvingo district in Zimbabwe face numerous challenges in accessing contraceptive. This is a serious violation of their sexual and reproductive health rights. Numerous recommendations are suggested in this study and if the proposed recommendations are taken into consideration, the challenges being faced by the female students in the secondary schools, can be minimised.

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