Research Paper

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Capacity And Popularity Of Centres Providing Sexual And Reproductive Health Services To Unmarried Youth With Particular Focus On Yeovil, Greenside And Morningside Low Density Suburbs, Mutare Town, Mutare District, Manicaland Province

Social Science

KEYWORDS : Youth Centres, capacity, sexual and reproductive health services

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ABSTRACT

The study sought to determine the capacity and popularity of Centres providing sexual and reproductive health services to unmarried youth in Zimbabwe, but focusing only on Yeovil, Greenside and Morningside Low Density Suburbs, Mutare Town, Mutare District, Manicaland Province. Such servicesneeded to be studied, for sexual and reproductive habits have a direct bearing on the spread HIV/ AIDS.The study used both Health-Belief and Social Learning Theories in determiningthe capacity of Centres providing sexual and reproductive health services to unmarried youth. The target population consisted of unmarried youth agedbetween 10 and 24 years old. A sample of 200 youths, equally representing males and females, was drawn according to ages 10-14, 15-19,and 20-24, consisting of 8 – 12 participants per group. The study unearthed massive compelling evidence that showed that:As high as 88% of the respondents were aware of the existence of the Youth Centre in their respective area, while only as low as12% were not;as high as 87% of male respondents and 86% of female respondents , respectively, stated that they are aware of the existence of the Youth Centre in their respective area; slightly below half of the male respondents, 35%, and half of female respondents, 50%, revealed that they had not at all visited the Youth Centre in their respective area for the past 12 months. However, when probed further, majority of these youths, both males and females, stated that if they were informed about the programmes at the Centres, they would certainly visit them for they had nothing else to do .Virtually all respondents unanimously agreed that, "Project Implementation Strategy of using Youth Centres and Sports as the rallying point" has not at all been in conflict with traditional practices; virtually all respondents were unanimous that the Youth Centre Project complimented cultural and traditional practices; majority of respondents stated that parents, political and traditional leaders fully supported the Youth Centre Project; and, as high as 85% of the respondents were ignorant of survival skills, which revealed the limited capacity of Youth Centres in providing such crucial skills. The study recommends that: Youth Centre Staff should actively involve parents in their activities; Youth Centres should negotiate with Financial Institutions for youths to be lent money for Income Generating Projects; and, that Youth Centres should take cognisance of cultural diversity.

Introduction:

Young people, the world over, and of whatever pigmentation or colour, are growing up in an environment of dynamic change and serious socio-economic challenges. For a minority of youths, this complexity provides opportunity and choice, while for majority of them; it means a struggle for survival. Generally, young people tend to have stamina and energy, curiosity, a sense of adventure and invulnerability, and exhibiting admirable youthful exuberance. They are resourceful and resilient, even under the most difficult conditions. However, the period of adolescence, known in the parlance of educational psychologists as the period of heat and storm, is a life phase in which young people are particularly vulnerable to health risks, especially those related to sexuality and reproduction, sexually transmitted diseases(STD), HIV/AIDS, unwanted pregnancy, unsafe abortion, too-early marriage and childbearing, and poor nutrition. This study was concerned with determining the **capacity and popularity of Centres providing sexual and reproductive health services to unmarried youth, aged** 10 to 24 years, **but focusing only on Yeovil**, Greenside and Morningside Low Density Suburbs, **Mutare Town, Mutare District, Manicaland Province.**

Origins of Youth Centres in Zimbabwe

The Zimbabwe National Family Planning Council (ZNFPC) has been the pioneer in the development and implementation of reproductive health programmes for youth in Sub-Saharan Africa(Phiri and Erulkar 1997). Initially, the ZNFPCfocused on educational activities targeted at youth, through its Youth Advisory Services Unit (YASU), established in ColonialZimbabwe in1978. The primary function of YASU was to counsel and educate youth, aged 11 to 25 years, -on sexuality, family planning, and reproductive health-related issues. This was done through the Family Life Education Programme (FLEP), consisting of 33Youth Advisors. Since YASU was established before Decolonisation, which only came into effect on 18th April1980, after the Lancaster House Constitutional Conference in London from October to 21 December 1979, it is not unreasonable to argue that the primary reasond'êtrefor establishing FLEP was not so much to assist indigenous youths, but rather those of the minority While Settler Oligarchy.Almost ten years later, in 1987, the Parent Education Programme (PEP) was introduced, essentially to educate parents on youth sexuality and reproductive health so that they could be more actively involved. However, an assessment of both FLEP and PEP programmes in 1993 revealed that the programmes had limited coverage, largely due to inadequate human resources.YASU was subsequently absorbed into the Information, Education and Communication Unit(IECU) of the ZNFPC in 1994, and Youth Advisors became known as IEC Officers. The issue of inadequate manpower, reveals nothing, but what one may call **"The Politics of Non-Governmental Organisation(NGOS),** by which these organisations are notorious for providing lavishly renumerated high Posts at their Head Offices, and only to have a few lowly paid indigenous employees on the lower echelons.

ZNFPC established three Youth Centres in Zimbabwe, namely, Baker Avenue Youth Centre, Harare; one in Mutare; and another one in Bulawayo. These Centres fall under the administration of the Service Delivery Unit(SDU) and the IECU of the ZNFPC. The Baker Avenue Centre was established in 1980, while the one in Bulawayo , and the other one in Mutare, were established in 1990 and 1993, respectively. The Centres provide both pupils and school leavers with reproductive health information, counselling and limited clinical services. Currently, ZNFPC' primarily targets unmarried young people between the ages of 10 and 24 years. Furthermore, the Centres provide recreational facilities. When in 2005 the United Nations Fund For Population Activities(UNFPA) stopped funding Centres providing sexual and reproductive health services to unmarried youth in Zimbabwe, the Programme found funding from the Global Fund(GF),

but this ended in September 2009. The GF renovated a total of 24 Youth Centres throughout Zimbabwe.

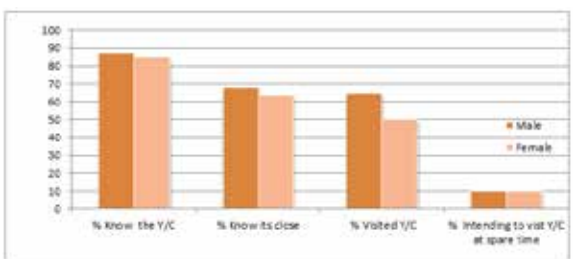
Methodology

The study used the Mixed-Methods Methodological Approach, for it was felt that both paradigms complimented each in enabling researchers to effectively argue and illustrate issues. The research design chosen, was that of case study, for it was seen allowing more in-depth analysis of the problem. A sample of 200 youths, equally representing males and females, was drawn according to ages 10-14, 15-19, and 20-24, consisting of 8 – 12 participants per group. The sample was chosen by Simple random procedure.

Findings

Table 1 below, clearly illustrates research participants' responses to questions on awareness and use of the Youth Centre in one's locality.

Table 1 : Awareness and Use of Youth Centre in the Locality



Responses of male and female research participants on their use of the Youth Centre in their respective localities, are quite revealing:

- A huge majority of 87% and 83% of male and female respondents, respectively, were aware of the existence of the Youth Centre in their respective localities;
- As high as 68% and 62 of male and female respondents, respectively, admitted that the Youth Centre in their respective locality was near;
- Just above half, 64%, and just half, 50%, of male and female respondents, respectively, had visited the Youth Centre in their respective locality; and,
- As low as 9% both male and female respondents intended to visit the Youth Centre in their respective localities.

It is crystal pellucid from the responses of both male and female research participants that a large majority of each gender was aware of the existence of the Youth Centre in their respective locality. This suggests that the failure to use such Centre by either gender, was not at all due to ignorance of its existence. Second, a reasonably large majority of both male and female research participants admitted that the Youth Centre in their respective locality was near. Again, distance was not a determinant of the use of the Youth Centre by either gender. Third, that just above half and only half of male and female research participants, respectively, visited the Youth Centre in their respective locality, is quite intriguing. It is not unreasonable at all to interpret such a low turn up a reflection unappealing programmes at the Youth Centre. Lastly, that about 10% of research participants of either gender intended to visit the Youth Centre in their respective locality strongly suggests that both male and female youths view such Centres as useful to them.

Table 2 below, shows quite clearly responses of both male and female research participants to questions concerning the issue of capacity and convenience of opening times of Youth Centres:

Table 2: Capacity and Convenience of Opening Times of Youth Centres

Human Capacity	Male	Female	Total Male and Female	%
Whether Youth Centres were Manned by Well-Trained Peer Educators				
Yes	49 31	36 35	85 66	50 38
No	7	14	21	12
Don't Know				
Total	87	85	172	100

Convenience of Opening Times of Youth Centre	Male	Female	Total Male and Female	%
Yes	67	67	134	70
No	18	15	34	22
Don't Know	2	3	4	8
Total	87	85	172	100

Equally illuminating, are research participants' responses to questions on the capacity of Youth Centres:

- On whether or not, Youth Centre's were manned by well-trained Peer Educators, just half of the respondents, 50%, thought they were, while as low as 38% of them held the same view, and a negligible 12% thought along similar lines;
- On the issue of whether or not, the opening times of Youth Centre's were convenient for the youths, as high as 70% of the respondents were of the opinion that the opening times were convenient to them, while about one fifth of them, 22%, considered them not convenient, a very tiny minority, 8%, were undecided.

Certain salient points may be made from the research participants' responses to the issue of capacity and popularity of Centres providing sexual and reproductive health services to unmarried youth in Zimbabwe. It is crystal clear that the Youth

Centres are not manned by adequate trained Peer Educators. This, reflects badly on the quality of service offered at such Centres. The high rating given to the convenience of opening times of Youth Centres strongly suggests these Centres could be far more frequented by the youths, if only they were manned by adequate trained Peer Educators. Thus, more effort should be directed at ensuring that the Centres were manned by adequate trained Peer Educators.

Conclusion

It is clear from the findings of this study that: A large majority of youth in Zimbabwe are aware of the existence of the Youth Centre in their respective areas; A reasonable majority of youth considered Youth Centres in their respective areas quite near; Just about half of the youth have visited the Centre in their respec-

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tive areas; Centres providing sexual and reproductive health services to unmarried youth in are manned by inadequate trained Peer Educators; and, that the opening times of Youth Centres are considered very convenient by the youths. The study recommends that: More effort should be made to ensure that Youth Centres are manned by Adequate trained Peer Educators; and, that more appealing programmes need to be introduced at the Centres.

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