

Factors underlying early sexual initiation among adolescents: A Case Study of Mbare District, Harare, Zimbabwe

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Abstract

Early sexual debut among adolescents has become an emerging global concern since it exposes adolescents to a myriad of reproductive health issues such as early marriages, unwanted pregnancies, abortions, sexually transmitted and HIV infections. Rationalising evidence from a survey, focus group discussions and key informant interviews, the study investigated the factors undergirding early sexual debut among adolescents. It was noted that adolescents engage in early sexual inauguration primarily because of the following: poverty; curiosity and experimenting; the absence of duty bearers (parents, grandparents, aunts, uncles, teachers and religious leaders) in the sexuality socialisation process; cultural initiation ceremonies; peer and sibling pressure; media; coercion; and contradictions imbedded in policy. The study thus recommends an integration and active participation of all duty bearers in the socialisation process of adolescents and enforcement of laws in order to reduce the incidences of early sexual debut. This is done with the view of upholding adolescents' reproductive health and behaviour.

Keywords: Early sexual debut, adolescents, duty bearers, socialisation, Mbare District.

INTRODUCTION

Early sexual debut (sexual intercourse before age 16) among adolescents has been observed as one of the myriad reproductive health problems faced by adolescents (Zimbabwe National Family Planning Council [ZNFPC], 1997: 1999: UNICEF, 2001: 2003: 2006: UNFPA, 2000: 2002: 2003: 2004: 2005: WHO, 1989: 1993: 1995: 2002: 2004: 2005: Moyo, 2008, Dhlwayo, 2009). In Zimbabwe, Chapter 9.21 of the Sexual Offenses Act (Amended in 2001) stipulates that it is unlawful for someone to have sexual intercourse with a minor (girls in particular below age 16). It is asserted that girls under age 12 are legally incapable of consenting to sexual intercourse and girls under age 16 are presumed to have not consented (Centre for Reproductive Law and Policy [CRLP], 2008). Despite the aforementioned Act, Central Statistical Office (1994), (1999) and (2005-6) have documented that 8.2%, 11.0%, and 9.7% respectively of adolescents had had sexual intercourse by age 15. Although proportions of sexually active adolescents vary by study, they are high, ranging between 29% and 52% (ZNFPC, 1997; CRLP, 2008: Moyo, 2008: Dhlwayo, 2009). The mean age at first sex in Zimbabwe is generally estimated at 14 and 15 years for boys and girls, respectively. (ZNFPC, 1997; CRLP 2008). In Malawi, 58% of female adolescents in villages indicated that they had sex before menarche (Jackson, 2002).

Of greatest concern is the fact that early sexual debuting exposes adolescents to untold reproductive health problems. These

include: unwanted pregnancies (ZNFPC, 1999: UNFPA, 2001: 2003: 2005: Reynold et al, 2006: WHO, 2006); abortions (Ahman and Shah, 2002: Berer, 2004: WHO, 2004: Dhlwayo, 2009); early marriages (UNICEF, 2006: CRLP, 2006: Dhlwayo, 2009) sexually transmitted infections (UNFPA, 2003: Zimbabwe Cluster Bulletin, 2009: Dhlwayo, 2009); and HIV and AIDS (ZNFPA, 1999: UNFPA, 2001: 2003: 2006). While the aforementioned studies have been carried out on the adolescents' reproductive health issues, it should be noted that they tend to be similar in nature. They have specifically concentrated on the identification of adolescent reproductive health problems, levels, trends, patterns and consequences of the issues. All studies notwithstanding, have not taken a holistic approach to establish the determinants of early sexual debut among adolescents. Thus, this study intends to fill the aforesaid gap by investigating the determinants of early sexual initiation among adolescents in a historic first black high density residential area, poorly resourced and low income area of Mbare District. This is done with the view of influencing policy and programming such that adolescents' reproductive health in high density residential areas is up-held.

METHODOLOGY

Study Design

Adolescents aged 15-19 were selected as the target population largely because sexual activity starts at adolescence stage. The study triangulated both qualitative and quantitative methods. A survey was used for collecting quantitative data. Focus group discussions (FGDs) and key informant interviews were undertaken to collect qualitative data.

Data Collection Methods and Tools

Survey

A total of 100 questionnaires were administered to adolescents aged 15 to 19 years. This was meant to quantify the magnitude of

Received: Oct 10, 2012; Revised: Nov 19, 2012; Accepted: Dec 26, 2012.

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early sexual debut among adolescents and possible factors underlying the observed levels.

Sample Size Determination

To determine the number of respondents in the survey, the following formula was used: $N = (z^2 \cdot p \cdot q) / e^2$; Where: N = desired sample size; z^2 = the standard normal deviate set at 1.96 which correspond with 95% confidence intervals; p = the proportion in the target population estimated to be aged 15 to 19; q = the estimated proportion of the target population who are not adolescents ($1-p$); e^2 = desired level of precision and in this study is set at 0.05. According to the 2002 census, the total population in Mbare Ward was

estimated at 68 250, where adolescents aged 15 to 19 years were 3090. Therefore, the following calculations were used to obtain the sample size $(1.96^2 \cdot 0.05 \cdot 0.95) / 0.05^2 = 66$. However, for robust analysis the sample size was rounded off to 100 respondents.

Sampling Procedure

Respondents were purposively selected from wards 03, 04, 11, 12, 46 and 47 as demarcated by the Central Statistical Office (CSO) Master Sample of 2002. The distribution of households and adolescent population per age group and per ward is shown on Table 1.

Table 1. Distribution of adolescent Population in in Mbare District

| Ward | Age Group | | | | | Total | Households Total |
|--------------|------------|------------|------------|------------|------------|-------------|------------------|
| | 15 | 16 | 17 | 18 | 19 | | |
| 3 | 126 | 121 | 112 | 209 | 213 | 781 | 327 |
| 4 | 26 | 23 | 22 | 19 | 25 | 115 | 55 |
| 11 | 105 | 93 | 97 | 88 | 217 | 600 | 55 |
| 12 | 126 | 129 | 127 | 109 | 219 | 710 | 318 |
| 46 | 75 | 64 | 62 | 65 | 61 | 327 | 173 |
| 47 | 109 | 98 | 86 | 78 | 186 | 557 | 255 |
| Total | 567 | 528 | 506 | 568 | 921 | 3090 | 1183 |

Source: CSO (2002) Provincial Profile, Harare Metropolitan Province.

Probability proportionate to size sampling (using the formula) $(N_h/N \cdot n)$ was used to determine the number of respondents firstly per ward. N_h = number of adolescents in ward x ; N = total number of adolescents in wards and n = sample size. Given that the total number of adolescents in ward 3 is 781 and total adolescents (aged 15 to 19) in Mbare District is 3090, the calculation of adolescents to be selected in ward 3 is $781/3090 \cdot 100 = 25$. The rest of the

respondents who were selected per each ward are shown in Table 2. Secondly probability proportionate to size sampling was used to calculate the number of respondents per age group in each ward, where N_h = total number of respondents in age x ; N = total number of respondents aged x in all wards; and n = sample size. The distribution of the sampled population per ward and age group is shown on Table 2.

Table 2. Distribution of the sampled population per ward and age group.

| Ward | Age Group | | | | | Total |
|--------------|-----------|-----------|-----------|-----------|-----------|------------|
| | 15 | 16 | 17 | 18 | 19 | |
| 3 | 4 | 4 | 4 | 6 | 7 | 25 |
| 4 | 1 | 1 | 1 | 1 | 1 | 5 |
| 11 | 3 | 3 | 3 | 3 | 6 | 18 |
| 12 | 4 | 4 | 4 | 4 | 7 | 23 |
| 46 | 2 | 2 | 2 | 2 | 2 | 10 |
| 47 | 4 | 3 | 3 | 3 | 6 | 19 |
| Total | 18 | 17 | 17 | 19 | 29 | 100 |

Households (where respondents were to be drawn from) were purposively selected from the CSO household lists of 2002. If in the household there were more than one adolescent, each adolescent was assigned a number and then a random procedure was conducted to select one adolescent.

Focus Group Discussions (FGDs)

Four FGDs (using a FGD guide) were carried out in this study. Separate FGDs were conducted with adolescent boys, girls, women and men above 35 years. FGDs were conducted so as to get the community perception of norms and values underlying early sexual debut among adolescents.

Key Informant Interviews (KII)

A total of 18 key informant interviews (using a key informant interview guide) were undertaken with police officers from the Victim Friendly Unit, religious leaders and school teachers. Six respondents were randomly selected for each group, three from either sex. Interviews helped to establish the determinants of observed levels of early sexual debut among adolescents, statistics and possible recommendations.

Data Analysis

Survey data was analysed using the Statistical Package for Social Science (SPSS) version 16.0. The package facilitated the analysis of data through frequency distributions and cross tabulations. D.T Search was used to analyse qualitative data using the thematic approach.

Ethical Considerations

The study respected freedom to participation. Participants

voluntarily consented to participate without coercion. There was no deception when informed consent was emphasized. The study adhered to research principles pertaining to privacy and confidentiality.

FINDINGS

Socio-Demographic and Economic Characteristics of Respondents

The respondents were fairly balanced although the majority (52%) were females (Table 1). The mean age of respondents was 17 years. The majority of the respondents, 82%, were aged 16 years and above. A higher proportion of the respondents (96%) were never married, 3% were married while only 1% of the adolescents were divorced/separated. The majority of the respondents (80%) reported that they were school pupils, 8% were paid employees, 5% were self-employed and 7% were unemployed (Table 1). The mean years completed at school by respondents was 10 years. A higher proportion of the respondents (43%) reported that they had completed 10 years at school while about 0.4% completed at least three years of schooling (Table 3).

Table 3. Percentage Distribution of the Respondents by Selected Socio- Demographic Characteristics

| Demographic Characteristics | Male % | Female % | Total % |
|-------------------------------------|------------|------------|------------|
| Sex | 47.7 | 52.3 | 100 |
| Age | | | |
| 15 | 18.8 | 22.0 | 18.4 |
| 16 | 14.1 | 20.1 | 17.1 |
| 17 | 14.3 | 18.1 | 16.4 |
| 18 | 17.7 | 19.1 | 18.4 |
| 19 | 35.1 | 21.3 | 29.7 |
| Total | 100 | 100 | 100 |
| Marital Status | | | |
| Never married | 96.2 | 94.6 | 96.0 |
| Married | 2.8 | 3.3 | 2.8 |
| Divorced/Separated | | 2.1 | 1.2 |
| Total | 100 | 100 | 100 |
| Occupation | | | |
| Student | 77.4 | 81.8 | 79.8 |
| Paid Employees | 13.0 | 3.9 | 8.3 |
| Self Employed | 5.5 | 4.7 | 5.1 |
| Unemployed | 7.5 | 6.7 | 7.1 |
| Total | 100 | 100 | 100 |
| Completed Years of Schooling | | | |
| 3 | 1 | --- | 0.4 |
| 5 | --- | 1.0 | 0.4 |
| 7 | --- | 0.8 | 0.4 |
| 8 | 0.8 | 2.0 | 1.6 |
| 9 | 6.0 | 6.0 | 6.0 |
| 10 | 40.7 | 45.1 | 43.0 |
| 11 | 33.1 | 26.1 | 29.4 |
| 12 | 14.4 | 12.0 | 13.2 |
| 13 | 4.0 | 7.0 | 5.6 |
| Total | 100 | 100 | 100 |

N = 100

Early Sexual Debut

Love relationships are a proxy for early sexual encounters. Study results revealed that love relationships are very common among adolescents in Mbare district. The majority of respondents (94%) agreed that their friends have either a boy or a girlfriend. It was also interesting to note that more males (97%) were more likely to know whether their friends had a boy or girlfriend than girls (91%). When adolescents were asked about their individual experiences, it

was interesting to note that the majority of respondents, (87%), stated that they had love partners. Consistent with their friends' experiences, more males (90%) agreed that they had love partners than females (83%).

Several reasons were put forward as to why adolescents are in love relationships. These include peer pressure; lack of adult supervision; curiosity; effect of today's media; the assumption that it is part of the normal life processes; the collapse of the extended family system; and the need for financial and other favours from

lovers. It was interesting to note that nearly half (45%) females stated the need for financial and other favours as compared to paltry 2% males (Table 4). Curiosity was also noted to be the major driver for males (39%) as compared to 18% females. In addition, peer

pressure seem to have more influence to males (24%) than females (9%). The rest of the percentage distribution of respondents as to why adolescents are having boy or girlfriends is shown in Table 2.

Table 4. Percentage Distribution of why Adolescents Respondents are having Boy/Girlfriends by Sex.

| Reasons why adolescents are having boy/girlfriends. | Male | Female |
|---|------------|--------------|
| | % | % |
| Pleasure | 26.1 | 15.6 |
| Curiosity | 39.2 | 18.2 |
| Effect of today's media | 3.1 | 2.1 |
| Peer pressure | 24.4 | 9.0 |
| Part of life | 1.1 | 4.6 |
| Lack of adult supervision | 1.7 | 3.2 |
| Collapse of the extended family system | 2.3 | 2.2 |
| Financial and other favours | 2.1 | 45.1 |
| Total | 100 | 100.0 |

N = 100

Key informant interviews with a female pastor of a local church also substantiated that girls have a higher percentage of love relationships due to the need for financial and other favours than boys since she remarked:

From my routine household visits, parents of a certain family were just numb and cold when I came out from their fifteen year old daughter's bedroom with US\$20, two litre bottle full of coca cola, two big packets of lemon creams biscuits and a big packet of zap-naxs. The girl admitted that she was given the abovementioned items by her boyfriend.

Results revealed that adolescents indulge in sexual activity before age 16. More than three quarters (82%) of the adolescent respondents agreed that their friends had had sexual intercourse

before the age of 16, while 18% do not know. There was no noticeable variation by sex. When respondents were asked about their own sexual experiences, 76% reported that they were sexually active. Of those 76%, it was interesting to note that 80% reported to have had sexual intercourse before age 16 (Table 5). Analysis by sex revealed that more females (84%) than males (68%) are having sexual intercourse before age 16.

Whilst respondents in all FGDs revealed that the appropriate age for sex was 20 and 19 years for boys and girls respectively, results from the survey revealed that the mean age at first sex was 15. It was also interesting to note that 5% of adolescents have become sexually active as early as 12 years (Table 5).

Table 5. Percentage Distribution of Age at First Sex of Sexually Active Adolescents

| Age | Percentage |
|-------|------------|
| 12 | 4.6 |
| 13 | 3.6 |
| 14 | 2.6 |
| 15 | 69.2 |
| 16 | 8.9 |
| 17 | 5.8 |
| 18 | 3.7 |
| 19 | 1.6 |
| Total | 100 |

N = 76

The fact that adolescents are having sex as early as 15 years was also supported by one female in the FGD of those aged 35 years and above. She propounded that:

I am a renowned prostitute and now competing for clients with girls below 15 years. Some of my clients are boys below age 15 who want to be taught sexual intercourse skills by me.

Results from the multiple response question of the survey revealed that several factors underlay early sexual debut among adolescents. These include peer and sibling pressure (89%), financial favours (89%), media (94%), lack of guidance from duty bearers (86%), poverty (85%), curiosity and experimenting (88%) and coercion (51%).

All the FGDs highlighted the need for financial and other

favours as the major determinant for adolescent girls' involvement in early sexual debut. One woman in the FGD of those aged 35 years and above asserted that:

When we grew up it was a norm that we must not accept anything from strangers. However, nowadays girls can be easily attracted by anything from any type of a man. When a man presents himself to a girl with cash or other attractive material possessions in exchange of sex, the girl will easily give in to the demands because she will be in dire need of the presented items.

Curiosity and experimenting were also cited as major factors leading to early sexual debut in adolescent FGDs. One female adolescent promulgated that:

Our parents always threaten us with a death penalty if they see us flirting with boys. As a result, we are always eager to establish the

taste of sexual intercourse which has always been associated with the death forfeit.

Another male adolescent substantiated the aforementioned by stating that:

We always hear our peers and siblings saying there is more to sexual intercourse. Actually, one of my peers asserted that his first day of sexual intercourse was like heaven on earth. All he remembered was that the back of head was just numb. It was like he was in a trance. So who does not want to have a taste of such an experience? Believe me sex is enjoyable.

Early sexual intercourse in adolescents' relationships seems to be aggravated by the belief that sexual intercourse cements a relationship. The majority of adolescents, 53%, answered in the affirmative. It was also interesting to note that more females (60%) than males (46%) assented with the aforementioned assertion.

Respondents in adolescent FGDs who supported that a relationship must be cemented with sexual intercourse argued that sexual intercourse is an expression of love. One male adolescent remarked:

The love equation is never complete if sexual intercourse is missing. If you love me, then let us have sex in order to balance the love equation.

Another male adolescent in an FGD supported the aforesaid as he said:

If any food has been cooked, the purpose is crystal clear, let people eat it. So if you have a girlfriend, have sexual intercourse since she is not for displaying purposes. Only plates and clay vessels must be displayed and not women.

Key informant interviews with teachers also revealed that lack of parental guidance and supervision coupled with the collapse of the extended family system also plays a significant role in perpetrating early sexual activities among adolescents. All FGDs cited the invisibility of aunts and uncles in the socialisation process of adolescents. One male respondent in the FGD of men aged 35 years and above remarked that:

Urbanisation and migration led to the disruption of the traditional socialisation process. Traditionally, reproductive health education was imparted to boys at the men's meeting place (dare) by uncles and grandfathers. As you can see, urbanisation has created nucleation of families thus interrupting the role of the extended family system in the secondary socialisation process of adolescents. Thus nowadays, adolescents no longer have the traditional grandparents, aunts and uncles who usually were the sources of reproductive health education.

One female adolescent with the support of group discussant remarked that:

Nowadays adolescents do not have any one to teach them about reproductive health education, in particular demerits of early sexual debut. Traditionally, this was the domain of aunts and uncles but because of modernisation this practice was destroyed. We look forward our parents to provide the information but parents seem to be weary of providing such information to us. May be they think that this will encourage early sexual debut and prostitution or the parents are also be incompletely informed about many important facts sex and reproductive health.

The idea that sexual education leads to prostitution among adolescents was supported by all FGDs of participants aged 35+ years.. One female participant furiously propounded that:

Giving reproductive health education to adolescents is a green lamp to encourage early sexual debut and consequently prostitution.

Normally adolescents have a tendency to practice that which is illicit. They seem to be eager to unearth that which is in sexual intercourse which makes it a forbidden practice at adolescence stage.

One female teacher in a key informant interview was of the opinion that parents have offloaded their responsibility of providing guidance and counseling to housemaids. She asserted that:

Most biological parents lack the capacity to give guidance and counseling lessons and supervision roles to adolescents. They have currently offloaded their responsibility to misinformed housemaids.

On the other hand, parents in FGDs of those above 35 years argued that they cannot provide reproductive health education to their children because of the traditional chinyarikani register which exist between them and the children. One male discussant asserted that:

We are Africans and we have to abide by our culture. Reproductive health issues are a domain for aunts, uncles, grandparents. Parents it's a non-starter because there are certain words I cannot pronounce to my adolescent children because of the chinyarikani register. Nowadays teachers and churches can also provide such information to our adolescents. We assume that teachers and churches are providing reproductive health education to our children.

Key informant interviews with teachers revealed the absence of teachers in the socialisation process of adolescents with regards to imparting reproductive health to pupils. If anything is to be said about reproductive health, one teacher asserted that those will be bits and pieces in biology lessons. One male teacher asserted that:

Issues to do with sexual intercourse are only covered during biology lessons. Our community does not approve their children to be taught about sex issues. They believe that this will encourage early sexual debut and prostitution.

Another female teacher mentioned that the Ministry has made it mandatory to teach Guidance and Counseling (G & C) in schools from the 1990s. This was hoped to impart knowledge about reproductive health to pupils. However, the female key informant teacher was swift enough to highlight the shortfalls of G & C. She asserted that:

Up to now there is no national syllabus for G&C. Resultantly, each school and worse still each teacher can choose what to teach in G&C lessons. Topics range from washing clothes, bathing, neatness and even covering and maintenance of books. In addition, G&C is only supposed to be taught in a forty minute lesson and once a week. Furthermore, G&C is not an examinable course, thus most of the times it is not given the seriousness it deserves.

Another male teacher had this to say about G&C:

G&C is not given priority in most schools. At times the subject is allocated to headmasters to teach the subject the whole school. However, you will realize that most of the times the headmasters are 'too busy' with administrative work. Resultantly, adolescents remain with little knowledge about the effects of early sexual debut.

Religious leaders were also absent in the secondary socialisation process of the impacts of early sexual debut. Key informant interviews with all religious leaders revealed that they do not discuss issues related to sexual intercourse with adolescents. They believed that this would encourage adultery and prostitution. One male pastor substantiated the aforementioned as he stipulated that:

In my church, adolescents below 16 years are considered as Sunday school. As such, they are not taught about any information regarding sex and sexuality. I am aware that normally adolescents

have a problem of trying to implement anything connected to sex. In addition I regard any sex education as leading to adultery and prostitution which are all sins before God.

All adolescents in FGD highlighted initiation rites (where adolescents are secluded for training to be 'ideal wives and husbands') as another determinant for early sexual activity. One female adolescent remarked:

Some adolescents aged between 12 and 15 years go for initiation rites 'Chinamwari' during the August holiday especially those descendants from Malawi and Zambia. During such initiation, adolescents are taught about what it means to be an 'ideal wife or husband' including sexual performance. Normally after such rites, these adolescents are eager to put into practice what they will have learnt.

All key informant interviews with local religious leaders revealed that some unique church principles encourage early sexual inauguration among adolescents. Particular reference was given to the Johanne Masowe apostolic sect which justifies marriage of girls even below 15 years.

Spiritual poverty was also linked to early sexual debut by religious leaders. One female pastor in a key informant interview postulated that:

Adolescents are involved in early sexual activities because of spiritual poverty. A human being is made up of the soul, spirit and the body. It is the spirit which teaches the soul and the body to behave in a morally acceptable way by God. Absence of spiritual guidance will definitely lead to spiritual poverty where adolescents will indulge in sexual intercourse before age 16.

It was equally important to note that in all the four FGDs, members highlighted that some adolescents engage in early sexual initiation involuntarily as a result of coercion. The aforementioned view was also supported by key informant interviews with the Victim Friendly Officers (VFO) at Zimbabwe Republic Police (ZRP) Mbare Camp. The officers asserted that case records from 2011 and January to August 2012 revealed that 65 and 32 cases of rape of girls below 16 years were recorded respectively. VFO also stated perpetrators of rape included: fathers; father's young or elder brothers; uncles; grandfathers; and even strangers.

Double standards of culture imbedded in the contradictions of the Sexual Offences Act were also cited as another drive to early sexual initiation among adolescents. This view was strongly supported by VFO as one of them asserted that:

The Sexual Offences Act is inconsistent when it comes to adolescent sexual activities. You will realise that it is an offence, according to the Act, to have sexual intercourse with a girl less than 16 years. Yet the same Act contradictorily stipulates that the offence is committed by any male over age 14. Implicitly, it means men are allowed to have sexual intercourse by age 14.

Various forms of media both print and electronic were attributed to early sexual instigation among adolescents. Results from this study revealed that 98% of adolescents were aware of the existence and availability of sexually explicit materials within the community. A multiple response question in the survey revealed that videos, pornographic magazines, novels and internet were cited as the major source of sexually explicit information by 97%, 92%, and 69% 96% of adolescents respectively. The sex specific proportion of ever-exposure was apparently higher in males, 95%, compared to 81% in females.

It was noted in all FGDs that widespread modernisation brought about the growth of internet which has far reaching effects on cultural

diffusion. Internet was said to have facilitated downloads of videos and pornographic materials. In addition, high levels of piracy have facilitated the flooding of cheap pornographic material in all streets pavements and the famous Mbare Musika. One female adolescent with the support of all group members argued that:

The global technological advance has left many adolescents exposed to indecent and obscene films of pornographic materials which will be put into practice at some point in time. Pornographic discs have flooded all urban streets selling at dollar for two, rendering them easily accessible to anyone in need of them. These films accelerate the speed at which one need to experience all or part of what was seen, culminating in to early sexual intercourse. In addition, there is no law enforcement on censorship issues.

Female adolescents in a FGD argued that female adolescents are encouraged into early sexual debut because of cultural practices of girl pledging. One female adolescent with the support of other discussants stipulated that:

Early sexual debut has been very common in our culture through the kuzvarira, chimutsa and chigadza mapfihwa and kuripa ngozi. However, it is the kuzvarira concept which was of major practice in order to generate income and a source of livelihood for the family through the bridal system.

DISCUSSION

Poverty and the need for material possessions especially among adolescent girls are contributory factors to early sexual debut among adolescents in Mbare District. This is congruent to findings by UNFPA (2003) and UNICEF (2001) where poverty is alleged to have resulted in increased risks of early sexual debut and consequently prostitution. On the other hand, poverty has traditionally forced early marriages among girls soon after menarche through the kuzvarira, chimutsa, and chigadzamapfihwa and kuripa ngozi. As argued by Burdillon (2003), such forced marriages were facilitated in order to generate income for the low economic status of the bride's family. However, it should be argued that whilst the bride's family benefit from the bride system, the adolescent girl is left exposed to risks and effects of early sexual activity, early marriages, unwanted pregnancies, abortions, STIs and HIV infections. In addition spiritual poverty has also been linked to early sexual debut in this study.

Absence of parents, aunts, uncles, grandparents, teachers, in the socialisation process and dissemination of reproductive health education in particular was stipulated in this study as one of the causes of early sexual debut among adolescents. The aforementioned finding is in line with findings by Lowenson et al (1996), Kulin (2000) Mhloyi in UNICEF (2001), UNFPA (2003) and UNFPA (2002). In particular, UNFPA (2003) noted that 80% of parents agreed that aunts, uncles and grandparents no longer perform their traditional role of providing sex education to adolescents. Parents in this study perceived sexual education to adolescents as the exclusive domain of aunts, uncles and grandparents. Traditionally, systems existed in Zimbabwe that prepared adolescents for adult life. Young adolescents received guidance and counseling mainly from grandparents, aunts and uncles. As asserted by Mhloyi in UNICEF (2001) the aforementioned duty bearers inspected and so often checked if adolescents were still virgins. However, modernisation, rapid urbanisation and migration have eroded the extended family structures. This led to changing family relationships to the demise of the traditional institution. Consequently, adolescents are left spatially and psychologically cut

off from elders who traditionally provided pivotal roles in providing reproductive health information to adolescents in the socialisation process. As alternative, adolescents in this study asserted that they are now relying and receiving mixed messages on sexual responsibility and experimenting from elder siblings, friends and mass media. Such sources of information are argued to perpetuate the desire for early sexual debut.

While parents are perceived to be the logical source of information, in this study, they are often invisible in the equation of adolescent sexuality socialisation process. Parents argued that they are constrained by the cultural register of *chinyarikani* which makes it difficult for them to play the role of aunts and uncles. In addition, parents also highlighted the persistent myth that sex education to adolescents leads to promiscuity. A similar assertion was echoed by Meekers (1993), Hayes (1997) and UNICEF (2005). However, research by Sahel (1994) and UNFPA (2002) revealed that sex education encourages responsible behavior including abstinence, later start of sexual activity, use of contraceptives and limited sexual partners. On the other hand, adolescents in this study argued that lack of communication between parents and their adolescent children is mainly due to the fact that parents are often incompletely informed about many important facts about sex and reproductive health. Due to break-down in reproductive health communication between parents and adolescents, adolescents argued that they depend on their ill-informed 'significant others' (friends and siblings) for most of sexuality information. A similar view was echoed by Kulin (2000) and UNFPA (2003).

Findings in this study point to the fact that parents perceived the school as a viable alternative for taking over the role of secondary socialisation. Parents believed that in the absence of aunts, uncles and grandparents, the school must disseminate reproductive health education to adolescents with special emphasis on impacts of early sexual debut. However, teachers revealed that they only mention issues of reproductive health in bits and pieces of biology lessons. The most probable substitute of reproductive health; G&C was found to be far much detached from reproductive health lessons. It was noted that there was no national syllabus for the subject. Thus, individual teachers use their own discretion on topics to be covered during G&C lessons. In addition, the subject is not being accorded the priority it deserves. This was largely because it is only taught in a forty minutes lesson once a week and is not an examinable subject.

The absence of religious leaders in the dissemination of reproductive health education was linked to early sexual debut in this study. Religious leaders in this study asserted that they are wary of providing reproductive health education to unmarried adolescents. The aforementioned view is consistent with findings by Mhloyi (1998) and UNDP (2003). This was primarily because they had deep rooted myths and misconceptions about adolescent sexuality which created fear and certainty amongst religious leaders. In some churches, key informant interviews with religious leaders revealed that adolescents below 16 years are considered to be Sunday School material, yet quantitative findings in this study pointed out the 80% of adolescents would have had sexual intercourse by age 16. Similar findings were echoed by Dhliwayo (2010). Religious leaders in this study believed that providing reproductive health education to adolescents encourages sexual experimentation, promiscuity and adultery; behaviours incompatible with traditional and religious values and ethics. Thus, teenagers now tend to value opinions of their 'also misguided' and 'misinformed' peers since even in Dhliwayo (2010) 62% and 15% of adolescents respondents stated that they get

reproductive health information from their peers and siblings respectively.

Cultural initiation ceremonies where adolescents are secluded for training to be ideal 'wives and husbands' as asserted in this study, leave adolescents prone to early sexual debut. The aforementioned assertion is consistent with findings by Jackson (2002), UNFP (2002) and Mhloyi (on going) where adolescents less than 15 years old undergo sexual training in the veld by specialized women. In Malawi, Jackson (2002) distressingly asserted that the training involves having sexual intercourse with an anonymous man selected from the community, a clear exposure of adolescents to HIV and AIDS, STIs, unwanted pregnancies, early marriages and their bio-medical and psycho-social consequences. In Mhloyi (on going) study, in one of the ten ethnic groups she studied in Zimbabwe, girls are socialised on how to be sexually competent. At the end of the training session, girls are given new names –a label which depicts how good they are in practicing sexual tactics. The elders were noting that girls who go through such initiation become prostitutes soon after the training. As argued by Mhloyi (on going) while such practices are culturally acceptable, it should be noted that they do not equip the adolescents on how to abstain before marriage in the current context where long periods of time elapse between initiation and marriage. UNFPA (2002) also substantiated the aforementioned by arguing that once initiated into sex, many adolescents accept it as a way of life and affects as young as 13 year olds who marry soon after initiation since they are considered ready for marriage.

Media in this study played a significant role in molding adolescents' sexual activity. Films, pornographic books and novels, and internet have been attributed as underlying factors to early sexual debut among adolescents in this study. Naturally, Brown et al (1993), Brown, Steele and Walshe-Childers (2002) and UNDP (2008) noted that the adolescence is a developmental period that is characterized by intense information seeking especially about adult roles. Given the lack of readily available information about sexual activity to teens by duty bearers in this study, it was observed that adolescents turn to media for information about sexual norms. In addition, it can be argued that adolescents also use the media as a sexual super-peer that encourages them to be sexually active, implicitly translating and testing the scenario in action. Hence, it can also be argued that increased exposure to sexual content predicts early initiation of sexual intercourse.

According to Bandura's Social Learning Theory (2005), young people can learn about sexual activity from observing others depicted in the media. The aforementioned observation is consistent with findings by WHO (2002), UNFPA (2003: 2004: 2005) and Young People's HIV and AIDS & Reproductive Health Needs and utilisation of Services in Selected Regions of Ethiopia (2005) and Kwankye and Augustt (2007). This study noted that 98% of adolescents were quite aware of sexually explicit materials. The abovementioned figure is within the range of 80% to 98% of adolescents who were aware of sexually explicit material in a study by Berhanu (2009). This was largely because of the so called technological advancement of the global village and high levels of piracy of pornographic materials in all pavements of cities and towns in Zimbabwe. In Zimbabwe, The Censorship and Entertainment Control Act Chapter 10.04.26 stipulates that "No person shall, without lawful excuse have in his possession any (a) publication picture, statute or record that is indecent or obscene... (b)...recorded video or film material on which is recorded a film that is indecent or obscene or prohibited." (National Laws, 2006: 208). However, all respondents in this study admitted

that there is a gap between law enforcement and censorship since adolescents are exposed to various forms of media some showing indecent or obscene material any time and at will.

Adolescents are also having early sexual intercourse as a result of rape. It was sad to note that some of the perpetrators of rape are duty conveyors (parents, uncles, and grandfathers) who are supposed to be torch bearers in the adolescent sexuality socialisation process. Religious practices of Johanne Marange (in line with their church principles) support the marriage of girls even those below age 15. Such practices leave adolescent girls within their sect exposed to the risk of early sexual inaugurations. Early sexual activities have also due to the double standards of culture embedded in The Sexual Offense Act in Zimbabwe which condoned sexual activity for boys even age 14.

CONCLUSION

In Mbare District, several factors account for early sexual initiation. Thus, it is important to have a holistic package for intervention policies and programmes. The package should facilitate active participation of all duty bearers and law enforcement in the adolescent socialisation process if early sexual initiation is to be curbed.

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