



Perceptions of Abortion Within the Context of Unhu/Ubuntu Philosophy, Reproductive Health Education and Educational Leadership

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ABSTRACT

There are several contentious issues that have remained on the international agenda for many decades now. These include the death penalty, legalization of euthanasia, legalization of homosexuality and legalization of abortion. There are general disagreements on the need to abolish the death penalty and or to legalize abortion. Some countries in Africa have laws that allow for abortion for specific reasons, while others prohibit abortion altogether. Some of the reasons that have found acceptance for abortion in some African countries include rape, poor health, and socio- economic reasons. Among the countries that have legalized abortion without any restrictions are Cape Verde, Mozambique, Tunisia and South Africa. Among other reasons, legalization of abortion is premised on the recognition of women's rights to make decisions on matters that affect them. In Zimbabwe, there is an on-going debate on whether abortion can be legalized without restrictions. The paper examines the implications of abortion within the context of cultural practices, the Unhu/Ubuntu Philosophy, reproductive health education and educational leadership. The study used mixed research methods. A sample of one hundred and twenty participants was opportunistically selected. It comprised parents, school heads, university lecturers, university students and teachers. The participants were sampled from Harare and Chegutu in Zimbabwe. The sample was categorized based on age, gender, and educational qualifications. These three variables were considered important as they were assumed to have a bearing on the respondents' views and opinions on abortion. Interviews, questionnaires and focus groups were used to generate data. These views and opinions were analyzed guided by the *Unhu/Ubuntu* Philosophy. The study concluded that abortion was generally perceived as some form of murder and culturally unacceptable within the context of unhu/ubuntu philosophy. The study noted that while productive health education is important in improving people's perceptions, culture and religion remain central to people's perceptions of abortion. Abortion remains a contentious issue that requires wider consultation in Zimbabwe.

Keywords: Unhu/*Ubuntu* Philosophy, Abortion, Culture, Rights, Pregnancy, Reproductive Health Education

INTRODUCTION AND BACKGROUND TO THE STUDY

In Zimbabwe, abortion is illegal despite advocacy for legalizing it. This is supported by several Acts of parliament which include the Termination of Pregnancy Act of 1977 (Chapter 15:10) and amendments Act 6/2000 and Act 8 of 2001 (Government of Zimbabwe, 2001). The Acts and the revised sections prohibit the termination of pregnancy except in special cases. The special circumstances include cases where the baby is conceived because of unlawful intercourse and when the health of either the mother or baby or both is at stake. Unlawful intercourse refers to rape, incest, mental handicap and intercourse with a minor. In the case of Zimbabwe, anyone below the age of 18 is regarded as a minor and does not have the right of consent to sexual intercourse. There are at least two positions that can be adopted from the above. First there appears to be concern for the health of the woman who is carrying the pregnancy. What it therefore means is that the life of the mother takes precedence over the life of the unborn child. However, the second reason advanced for





terminating pregnancy tends to justify physical or mental defects as reasonable grounds for terminating pregnancy. This has wide implications in terms of how society views the disabled, especially when it becomes the basis on which a pregnancy can be terminated. Implicitly, this appears to disregard the sacrosanct nature of life regardless of the physical and mental state of the child. The last part refers to legal termination within the context of unlawful intercourse. Unlawful intercourse entails that a medical certificate has been issued by a medical practitioner in cases of incest, rape or mental handicap. It must be proved beyond reasonable doubt that the pregnancy was because of the rape or incest for a magistrate to authorize the termination of the pregnancy. The Termination of Pregnancy Act of 1977 (as amended in 6/2000, 8/2001 and 22/2001) gives a detailed description and explanation of processes that must be followed in cases where there was a need to terminate a pregnancy. Within the context of the Act, Zimbabwe remains one of the countries in Southern Africa where abortion is illegal.

Zimbabwe came up with a new constitution in 2013 which went through a referendum process. What is clear about the constitution is that it recognizes and protects the life of an unborn child. There are several Acts that must be aligned to the new constitution. The Termination of Pregnancy Act of 1977 in its present form does not seem to run in contravention of the new constitution. However, there have been calls to legalize abortion in Zimbabwe. For example, there have been calls by the Parliamentary Portfolio Committee on Health and Child Care to legalize abortion. Some of the reasons advanced in the calls are that there was an increase in maternal deaths that are related to illegal abortions; an increase in the number of teenagers who end up with unwanted and unplanned pregnancies and that illegalizing abortion to some extent disempowered women on decisions that affect their health and rights. The last reason appears to be based on the women's emancipation lobby. There are about 70 000 illegal abortions annually in Zimbabwe (UNICEF, 2005). Most of these are conducted in backyards under the supervision of unqualified personnel. There are many factors which contribute to these illegal abortions. These include lack of proper reproductive health education, limited access to contraceptives, poverty, and lack of psychosocial support in cases of teenage pregnancies.

On a similar note, in South Africa where women have the right to terminate pregnancies, illegal abortions are noted to be thriving. There are several factors that contribute to these illegal abortions in South Africa. Among these are the lack of reproductive health education, and poor public health services in some instances. In that regard legalizing abortion does not necessarily address the issue of illegal abortions. The argument that the increase in illegal abortions can be attributed to abortion being declared illegal in Zimbabwe may not be convincing. There are other factors that contribute to illegal abortion as noted above. It also must be noted that despite legalizing abortion, South Africa still experiences cases of illegal abortion. They are considered illegal in the sense that they are not conducted by registered practitioners and under approved standards and conditions. In that regard, the increase in illegal abortions cannot be a justifiable reason to call for the legalization of abortion in Zimbabwe.

Statement of the problem

There are disagreements on the need to legalize abortion in Zimbabwe. While some argue that legalizing it would reduce the rate of maternal death, others are of the view that abortion is not different from murder. The paper is therefore concerned with whether abortion offers a solution to the challenges of reproductive health within the context of *Unhu/Ubuntu* Philosophy, reproductive health education and educational leadership.

Purpose of the study

The purpose of the study was to examine views on abortion within the context of *Unhu* Philosophy and Reproductive Health Education.

Objectives of the study

- To describe people's conception of abortion.
- To identify people's perceptions and views on abortion.

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- To explain abortion within the context of *Unhu/Ubuntu*
- To identify the role of Reproductive Health Education in controlling illegal abortions.
- To determine the role played by educational leaders in reproductive health education.

Research questions

To find answers to the main question the study came up with the following research questions:

- How do people interpret the concept of abortion?
- What are people's perceptions and views of abortion within the context of *Unhu/Ubuntu* Philosophy?
- To what extent do people accept abortion within their communities?
- To what extent has Reproductive Health Education played a role in controlling abortion?
- What role do educational leaders play in reproductive health education?

Significance of the study

The study is important to different stakeholders. Issues of abortion are related to reproductive health which is a factor that contributes to development. The study also provides a platform for people to express their views on the contentious issue of abortion. It makes contributions on the debate on whether to legalize abortion in Zimbabwe. In that regard it may influence the policy on reproductive health education and abortion. At the same time, it may open further debate on the issue of abortion.

Assumptions of the study

The study is premised on the following assumptions:

- The issues of abortion and Reproductive Health Education require wider debate and consultation.
- Legalizing abortion in Zimbabwe works against the Philosophy of *Unhu/Ubuntu*

Delimitations of the study

The study was conducted in Harare and Chegutu in Zimbabwe. The study was interested in the views and perceptions of people on abortion and Reproductive Health Education.

Limitations of the study

The issue of abortion remains contentious globally. However, the researcher is aware of the research methods employed in the study and their limits on generalizability of the findings. As such the findings cannot be generalized to the wider population. The findings can only be used to refer to the views and opinions of the respondents in the survey who were opportunistically selected, and not randomly selected.

REVIEW OF RELATED LITERATURE

Conceptual Framework: Abortion and Reproductive Health Education

Abortion can be best explained within the context of Reproductive Health Education. Reproductive Health Education provides for interventions that must assist citizens in acquiring and developing best practices on handling issues that relate to sexuality, sexual attitudes, interpersonal relations and acting responsibly on matters that affect their health. There are several factors that must be considered for a Reproduction Health Education curriculum to be implemented successfully. Such a curriculum must focus on at least the following: targeting behaviours that contribute to unwanted pregnancies; clear communication on condom and contraceptive use; handling of peer pressure and social pressure; and the use of appropriate methods and techniques that are sensitive to the following: age, gender, experiences and culture of the learners or the intended beneficiaries (Kirby, 2001). The need to focus on behaviours that contribute to unwanted pregnancies

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has a bearing on the rates of abortion globally. Unwanted and unplanned pregnancies are some of the major factors that contribute to abortion, legal or otherwise. Other factors that must be addressed by Reproductive Health Education include happy and safe sex life, freedom to make informed choices on matters that affect their health, access to contraceptives and other safe methods of birth control and access to well-equipped health and well-trained health personnel. Unsafe abortion is therefore not always a result of making abortion illegal, but other factors noted above.

Some of the factors that make Reproductive Health Education necessary are the need to address cultural practices that enforce child marriages and noted increases in sexually transmitted infections among adolescents. Reproductive health focuses on the rights of both men and women to exercise their rights on matters of personal development. However, there appears to be a misleading notion that reproductive health is for women. The United Nations Population Fund (UNPF) identifies a number of key facts about reproductive health. It notes that reproductive health is concerned with reproductive processes regardless of age and gender and it contributes to the general wellness of society. A healthy society plays a positive role in the social and economic development of the nation. Reproductive health education has been credited for the following: reducing misinformation on sex and sexuality issues; developing positive values and attitudes among adolescents; improve decision making skills; improved perceptions of norms; and increased communication with parents and guardians (Wahba and Roudi-Fahimi, 2012).

The major concern is the prevalence of unwanted pregnancies, despite the availability of contraceptives. If contraceptives are available and accessible to all who require them why does abortion because of unwanted pregnancies remain an issue today? The World Health Organization (WHO) observes that 20% of maternal deaths are due to unsafe abortion. The term abortion refers to the deliberate termination of pregnancy before viability (Kulczycki, 2015). Measures that can be taken to reduce abortion include effective use of contraceptives, an effective health education programme, and provision of the necessary resources and support for women of childbearing age (Kulczycki, 2015). While abortion is viewed as a safe medical procedure and has now become acceptable in many countries, it has remained a moral issue rather than a legal issue in some countries. Within this context some arguments have centred on the stage at which the fetus can be classified as a living being.

Theoretical Framework: Abortion and the Philosophy of Unhu/Ubuntu

Throughout the history of mankind society has always placed value on human life. Unhuism/Ubuntuism, like many other Philosophies aims at investigating behaviours, rules and ideologies that underpin our interpretation of reality. Abortion is a problem as it involves an attack on human life as the fetus is destroyed which contributes to its failure to fully develop (Kegode, 2010). This raises at least two fundamental questions, first on why society should support abortion as it causes a threat to human life and secondly, abortion is questioned in terms of its moral legitimacy. Abortion divides people on two fronts as "it exists as a solution to certain human problems that it is addressed to [and] others view it as a necessary and an inevitable effect of these problems" (Kegode, 2010:11). Unhu/Ubuntu Philosophy emphasizes the sacredness of preserving life. The main question often raised is at what stage of development a fetus can be regarded as humane. Despite contestations about abortion, there are agreements on its effects which include spiritual, physical, emotional, social and cultural effects. Unhu/Ubuntu Philosophy is underpinned by the understanding that cohesion in society is more important than the rights of an individual. The individual enjoys rights within the context of societal rights. It places emphasis on human dignity, which can be interpreted as *unhu* within the Shona people of Zimbabwe. Within the context of the *Unhu/Ubuntu* Philosophy you are what you are because of others. One does not operate independent of the demands and needs of society. It is guided by the strong belief that responsibilities are more important than individual rights. Within the Shona tradition, one has the responsibility to look after his/her relatives including those in the extended family. This responsibility includes the requirement to take care of and look after the needs of the unborn child. Such responsibilities take away the right to private life as you must be socialized to accept that you are part of a system and had to thrive to fit well into the same system. In that regard, responsibilities are viewed as more important than individual rights. Any behaviour that does not promote human dignity is condemned and may lead to isolation and rejection.

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Some of the key principles of *Unhu/Ubuntu* are that one must affirm his/her humanity by acknowledging the existence of others with whom they have to establish good relations, and that preservation of human life is more important than material wealth (Samkange and Samkange, 1980). Abortion (*kubvisa pamuviri*) is a practice that is generally condemned within Shona society. It is classified as deviant behaviour and therefore alien to most of the Shona people. In that regard, abortion becomes more than a rights issue, but a moral and cultural issue.

The principles of *Unhu/Ubuntu* appear to be under threat from different directions. These have challenged the hegemony that existed before the advent of other cultures. What comes into mind is the advent of Western cultures that place emphasis on the rights of the individual at the expense of the rights of the collective. In that regard, laws that promote abortion appear to be championed by organizations that ignore the importance of the Shona culture and the philosophy of *unhu*. There appears to be a conflict of cultures as the Shona culture, like most African cultures promotes the sanctity of life. The claims that abortion has become widely accepted in Africa as a personal matter have been disputed, as it is argued that it is a Western concept which is being forced upon Africa by the powerful nations who have the money and the power to influence international laws and policies (Hagamu, 2012). This raises pertinent questions about the issue of abortion. It is a fact that some of the agencies that champion the abortion crusade are donor funded and are headquartered outside Africa.

Within this context, the beliefs of the Shona people on such practices as abortion appear threatened by the advent of modernity which promotes individual rights and empowerment of the girl child. When we design and develop laws and policies, it is then imperative that we be guided by the *Unhu/Ubuntu* Philosophy and the general cultures and practices of the people. The *Unhu/Ubuntu* Philosophy provides for a holistic education which aims at producing an individual who is developed in the fullest and noblest sense (Report of the Presidential Commission of Inquiry into Education and Training, 1999). The Report further identifies the behaviours that characterize *Unhu/Ubuntu* Philosophy. These include virtues such as responsibility, honesty, justice, trustworthiness, hard work, integrity, a cooperative spirit, regards for others, self-discipline, care, diligence and tolerance among others.

On the other hand, proponents for abortion have argued that it is within the rights of women to make decisions on issues that affect them. However, it can be argued that rights have their own limitations and at the same time they come with responsibilities. The controversy on abortion goes beyond the pro-abortion and antiabortion groups as the proponents of abortion do not agree on the appropriate methods to be used. The other arguments are on where and when human life begins, with opponents of abortion arguing that it begins right from the unicellular zygote, while proponents of abortion argue that it begins after birth (Schwarz, 1990). There have been advances in Science and Technology which have made Reproductive Health Education accessible to many who require it. Reproductive Health Education must be taken seriously in schools. On a related issue, the Report of the Presidential Commission of Inquiry into Education and Training (1999) noted that there were no comprehensive Health Education programmes in schools, colleges and universities in Zimbabwe. It is within this context that resources have to be expended on Reproductive Health Education programmes that equip adolescents with skills that help them make informed decisions on pregnancy.

Reproductive Health Education is critical in raising awareness in adolescence to be able to handle issues that contribute to their well-being as they grow into adult life. Such an education programme improves communication between adults and the youths on sexual health. In the traditional Shona culture, there was a clear division of responsibilities when it came to Reproductive Health Education and sex education. For adolescent girls, the responsibility to educate them lay with the aunts and grandmothers. For the adolescent boys, the responsibility lay with the uncles and the grandfathers. The main emphasis on the teaching of sex education then was on abstinence. Such abstinence was observable due to several factors. These included the ability of the community to observe and monitor the behaviour of the adolescents and emphasis on acceptable norms and values as epitomized in the *Unhu/Ubuntu* Philosophy. It must be noted that such practices were quite applicable within the Shona family set-up, before the advent of Western influence on the Shona lifestyle. At present, there is a breakdown of the extended family and institutions of learning have taken over the roles initially played by aunts, uncles, grandmothers and grandfathers. At the same time, we live in a market-driven

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economy in which every member of the family must play his/her role and in most cases may be operating away from the family home. Apart from the education that came from the orientation of selected people such as aunts, uncles, grandmothers and grandfathers, the socialization process within the family arrangement recognized the principles of *Unhu/Ubuntu*.

Theories on abortion

The different views expressed above appear to fall within any of the four theories as explained by Rasekh (2003). These include Theory of life sacredness (pro-life theory), theory of free-will (pro-choice attitude), theory of investment value and theory of person or conscious entity (Rasekh, 2003). Opponents of abortion fall within the Theory of life sacredness. The study will not go into detail in terms of describing the theories. However, it suffices to note that the pro-life theory has a lot in common with the *Unhu/Ubuntu* Philosophy. The shared platform between the two lies in that they are both opposed to abortion, and they therefore take an anti-abortion stance, and that the fetus has to be protected regardless of its stage of development. In fact, the distinctive difference between the two lies in the fact that within the *Unhu/Ubuntu* Philosophy the concept of abortion as advocated by the theory of free-will is non-existent. However, it must be noted that other anti-abortion stances are not necessarily always interested in protecting the fetus, but rather they are out of concern for women. They argue that abortion hurts the women much more than it benefits them.

RESEARCH METHODOLOGY

The study which sought to examine the views of people on abortion was conducted in an urban setting. Such variables as age and gender were at times used to come up with conclusions. The study used mixed research methodology and descriptive survey design. Data was collected using partially structured questionnaires.

Sample

A sample of one hundred participants was opportunistically selected. It comprised primary school teachers, university lecturers, university students, and non-academic staff at university. The sample was selected from Harare and Chegutu in Zimbabwe. These are urban areas in Zimbabwe. This consisted of ninety females and thirty males.

Data Analysis

Data collected using structured questionnaires and open-ended questionnaires was analyzed based on themes and variables that emerged from the research questions and from the respondents. Descriptive statistics were also used to analyze findings.

DISCUSSION OF FINDINGS

Data collected using both structured questionnaires and open-ended questionnaires is presented and discussed in this section. A total of one hundred and twenty respondents answered the questionnaires. The findings that underpin the views of the respondents are presented under the themes indicated below:

- Characteristics of the participants;
- *Unhu/Ubuntu* Philosophy and abortion;
- Reproductive Health Education and abortion;
- Gender, age and views on abortion

Personal characteristics of respondents

The sample comprised one hundred and twenty respondents who were opportunistically selected. Since the topic appeared to affect women much more than men, more women voluntarily responded to the questionnaires





2010).

than men. As such, the initial sample of one hundred respondents increased to one hundred and twenty, consisting of ninety females and thirty males. The sample was made up of primary school teachers, university lecturers, university students and non-academic staff at university. When it came to the ages of the respondents, they ranged from below thirty to over fifty years. The ages were distributed as follows, 15% indicated that they were below the age of thirty, 8% were in the 31-35 years age group, 17% were in the 36-40 years age group, 13% were in the 41-45 years age group, 30% were in the 46-50 years age group, and 17% were in the over 50 years age group. The ages of the respondents were found important as views and opinions are at times influenced by age and experiences. Studies on abortion in the United States of America indicated that there were generational differences on views on abortion, though the gap was narrowing of late (Saad,

Another variable that was to be noted was their educational qualifications. Since the respondents were either working as teachers, university lecturers, university students and non-academic staff at university, the minimum educational qualifications were diploma qualifications in different fields of study and the highest qualification was a Masters qualification in various fields of study. Educational qualification is one of the factors that influenced people's views on abortion, with the highly educated supporting reproductive freedom (Rinderknecht, 2006).

Interpretation of the concept of abortion

Respondents were asked to express their views on abortion. They were guided by the following terms; evil, murder, human rights and necessary, and working against African culture. Other terms that guided the description of abortion are views that it is a moral issue, health issue, rights issue, and taboo in the African culture. On a related note, other terms that were used to describe the term abortion are necessary practice, morally wrong, criminal and murder of the unborn child. Out of the one hundred and twenty respondents 42% of them viewed abortion as murder of the unborn child, 21% described it as evil, 13% indicated that it was a human rights issue and was necessary, 8% viewed it as a moral issue and 6% described abortion as morally wrong. Other views that came out included the description that abortion was against Shona culture as indicated by 4% of the respondents, and another 4% indicated that abortion was taboo in Shona culture, 1% noted that it was a health issue and 1% described it as criminal.

The views expressed above demonstrate that the respondents conceptualized abortion differently. What comes out of the responses is that most of the respondents did not support abortion as they described it as murder of the unborn child, evil and taboo in the Shona culture. The mixed views emanate from the two extremes that appear to emerge from the discourse on abortion. There is a pro--choice and the pro-life dichotomy in the abortion debate. The differences in opinion are at times difficult to contain even in countries that have legalized abortion. For example, in South Africa where abortion is legal, 56% of the population believes that abortion is wrong (Stephen, 2004).

In line with the different views expressed in the responses above, respondents were asked to examine the extent to which the Shona culture supported abortion. The major descriptives that were used are the following: not at all, to a limited extent, within the confines of the law, and to a larger extent. Out of the one hundred and twenty respondents, 65% noted that the Shona culture did not support abortion in any form, 22% indicated that the Shona culture supported abortion to a limited extent and 13% noted that the culture supported abortion within the confines of the law. The responses suggest that the Shona culture abhors abortion, though it can be accommodated in extenuating circumstances. Such circumstances included cases of rape and incest as noted by some. In view of this cultural position, the decision to terminate pregnancy goes beyond individual decision making, as it impacts on the cultural value system. In Zimbabwe, the decisions on abortion have been influenced by several factors which included the erosion of traditional cultural values, health problems, the desire to pursue carriers before parenthood, and lack of facilities and contraceptives for women (Chiweshe et al, 2017). Within this view, perceptions on abortion go beyond individual rights are defined within the context





of your relevance and the values of society. As such, before coming up with a decision an individual must interpret action in terms of how it impacted the community and society. This is supported by such sayings as *Munhu munhu nevanhu/Ubuntu ngumuntu ngabantu*. These sayings are common in both Shona and Nguni societies in Sothern Africa. When literally translated these two sayings mean that a person is a person through others. When discussing the issue of abortion, it is difficult to ignore the elements of culture that are now at cross-roads and conflicting some of the time. When there is cultural conflict, the general question that comes into mind is whose culture should supersede the other?

Unhu/Ubuntu Philosophy and abortion

The views expressed above resonate with the ideas of *Unhu/Ubuntu*. When explaining *Unhu/Ubuntu* philosophy it is necessary that we focus on its different dimensions. These are dimensions that contribute to society's well-being in all spheres of life. These include the political, religious and social spheres of life. Its focus is on behaviour of individuals as it relates to the expectations of society. While different societies may focus on different elements of *unhu/ubuntu* philosophy, main aspects that stand out in most African Societies are the virtues of generosity, human consideration, care for others, protection to others, humanity, sharing, respect for human dignity, and preservation of life (Samkange and Samkange, 1980). The Philosophy of *Unhu/Ubuntu* highlights the elements which are relevant to the study of people's views on abortion, which include respect for humanity, responsibilities and the sanctity of life (Samkange and Samkange, 1980).

In relation to the position advocated by the *Unhu/Ubuntu* Philosophy as noted above, respondents were asked to respond to the question on whether they would disclose it to their spouse if they once had an abortion in their lives before marriage. They had to indicate any of the following: not at all; much depends on the situation; very much so; and not sure. This question was answered by the ninety female respondents. 60% of the female respondents indicated that they would not disclose that they had an abortion before marriage, 28% noted that their disclosure would depend very much on the situation, 10% noted that they would be very much willing to disclose that they had an abortion before marriage, and 2% noted that they were not sure of how they would handle the issue. The general fears were that disclosure of an abortion before marriage would hurt the relationship and could lead to divorce. However, most of those who noted that much depended on the situation expressed the view that they would disclose only if the pregnancy came about as a result of abuses such as rape and incest. This appeared to suggest that under normal circumstances they could not be willing to disclose past abortions.

On a related question male respondents were asked whether they would marry someone who had had an abortion before. They were asked to indicate their responses under the following descriptions: not at all; much depends on the situation; very much so; and not sure. 93% of the male respondents indicated that they would not marry someone who had had an abortion. When asked to give reasons most of them noted that such a practice lacked the spirit of *Unhuism/Ubuntuism*. At the same time, some noted that they were afraid of the stigma that society attached to such behaviour. Only 7% of the male respondents indicated that marrying someone with a past abortion history would depend on the situation. The reasons they found acceptable were issues beyond the woman's control such as rape and incest.

Reproductive health education and abortion

Reproductive health must encompass the well-being of individuals on matters to do with sex life and the choices they make on matters to do with reproduction regardless of gender. There is a tendency to treat reproductive health as an issue for women only, and yet it is not. Reproductive health education must include both the girl child and the boy child, both women and men. Reproductive health education contributes to exposing young people to educational experiences that help them understand and appreciate their sexuality and acquire skills that assist in managing sexual and reproductive health behaviour (UNESCO/UNFPA, 1998). The explanation given above demonstrates the need for society to come up with formal education programmes that have to include reproductive health education as it helps them to manage real life situations. It enables





young adults to make decisions on the right time to have sexual intercourse and avoid unwanted pregnancies. At the same time, as young adults they must make informed decisions on contentious issues like abortion. The need to develop reproductive health education skills brings to the fore the role of schools and institutions of higher learning in equipping young people with the relevant skills.

In view of the acknowledged role of reproductive health education the respondents were asked if they had reproductive health education programmes in schools, colleges, universities and communities. They indicated their responses using the terms: not sure; to a limited extent, not at all; and to a large extent. Within the same context respondents had to identify factors that contributed to illegal abortions in their communities. 56% of the respondents noted they had reproductive health education programmes which were provided by the Ministry of Health and Child Care once in a while or only when one had visited clinics or hospitals, 24% were not sure of the programmes, 12% had not been involved at all and 8% indicated that they were involved in reproductive health programmes to a large extent. While it may be difficult to measure the extent to which the reproductive health programme is implemented, schools, colleges and universities appear not to have clear reproductive health education programmes.

When it came to factors that contributed to illegal abortions in their communities, 41% noted that lack of reproductive health education in young adults was a major factor, 28% attributed it to poverty, another 28% indicated stigmatization as a major factor and only 3% attributed illegal abortion to lack of resources. The responses appear to suggest that the respondents generally appreciated the role of reproductive health education, since they attributed lack of it to illegal (backyard) abortion. On the other hand, society's attitude on abortion still contributes to stigmatization as noted.

Gender, age and views on abortion

The research made an attempt to establish a link between characteristics of gender and age on views about abortion. Respondents were asked to indicate whether they would support legislation that legitimizes abortion in Zimbabwe. 66% indicated that they did not support any legislation that legalized abortion in Zimbabwe, 19% supported the idea that abortion should be legalized in Zimbabwe, and 15% supported legislation that legalizing abortion in specific cases like rape, incest and on health grounds. Of the 66% who did not support legislation that legalized abortion, 15% were in the 21-30 years age group, another 15% were in the 31-40 years age group, 27% were in the 41-50 years age group and 9% were in the above 50 years age group. Of the 19% who indicated that abortion should be legalized 9% were in the 41-50 years age group, 6% were in the 31-40 years age group, 2% were in the 21-30 years age group and another 2% were in the above 50 years age group. Of the 15% who noted that they would support legislation that legalized abortion in specific cases like rape, incest and on health grounds, 6% were in the 31-40 years age group, another 6% were in the 41-50 years age group and 3% were in the above age group.

The responses appear to suggest that views on abortion were not very much influenced by age. The majority of the respondents did not support legislation that legalized abortion. Such views can be attributed to other factors. Such factors may include religion and the cultural practices among the Shona people which are to a large extent guided by the philosophy of *Unhu/Ubuntu*.

Similarly, there was little evidence to suggest much difference in views on abortion based on gender. 50% of the male respondents indicated that they would not support any legislation that legalized abortion, 33% of the male respondents supported abortion and 17% supported it only in special circumstances like rape, incest and on health grounds. When it came to female respondents, 70% did not support abortion at all, 15% of the female respondents indicated they would support legislation that legalized abortion and another 15% indicated that they would support legislation for abortion for specific cases like rape, incest and poor health. In both cases the majority of male and female respondents did not support legislation that legalized abortion. The responses appear to suggest that views on abortion were not gender related.

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CONCLUSIONS

On the basis of the findings discussed above, the study came up with the following conclusions:

- Abortion remains a contentious issue which is interpreted differently by communities. Some of the respondents viewed abortion as a form of murder, and therefore morally wrong.
- Practices and beliefs that are informed by such factors as cultural values and traditional teachings of *Unhu/Ubuntu* appear to influence people's attitudes towards abortion.
- Abortion remains generally unacceptable except in cases of rape, incest and poor health.
- Reproductive health education had not contributed to helping young adults to make informed decisions on behaviours related to sexuality and abortion. There were no clear policies on reproductive health education in schools, colleges and communities.
- Abortion remains a contentious challenge which is still viewed as a problem rather than a solution to the challenges of sexual reproduction.

The study ends with the recommendation that, while debate on the issue of abortion is encouraged, the divergence of views due to such factors as cultural values and beliefs cannot be ignored, as no culture can be superior to another.

IMPLICATIONS OF THE STUDY

The study has the following practical and theoretical implications:

- Abortion remains a contentious issue that is influenced by culture. As such, education has a critical role to play to change people's views, values and perceptions.
- The role of Reproductive Health Education must be enhanced at all levels of the school curriculum.
- Abortion remains a problem which is cyclic in nature. To find a solution we end up with multiple problems of a social and cultural nature.
- There is a need for further studies at a wider scale.

REFERENCE

- 1. Chiweshe, M., Mavuso, J. and Macleod, C. (2017). Reproductive justice in context: South African and Zimbabwean women's narratives of their abortion decisions. In Feminism & Psychology 2017, Vol. 27 (2) 203-224. SAGE Publications.
- 2. Criminal Law (Codification and Reform) Act (Act No. 23 of 2004), 2004: hsph.havard.edu/population/abortion/Zimbab.abo.htm: Accessed 20 June 2017.
- 3. Hamagu, E. (2012). Abortion is Foreign to African Culture. In Human Life International Pro-Life Missionaries to the World. Life SiteNews.com. Accessed 4 July 2017.
- 4. Kegode, G. (2010). Abortion and Morality Debate in the African Context: *A Philosophical Inquiry*. Eldoret, Zapf Chancery.
- 5. Kirby, (2001). Sexual and Reproductive Health Curriculum Conformity to "best practices" In MEASURE Evaluation. USAID
- 6. Kulczycki, A. (2015). Abortion and Reproductive Health. In McFarlane, D. R. (ed) (2015). Global Population and Reproductive Health. Burlington, Jones & Bartlett.
- 7. UNESCO/UNFPA (1998). Handbook for Educating on Adolescent Reproductive and Sexual Health. Book 2. Bangkok, UNESCO.
- 8. UNICEF (2005). Children and Women's Rights In Zimbabwe: irinnews.org/feature/2005/03/30/abortion-figures-underscore-need-more-reproductive-health-education: Accessed 20 June 2017.
- 9. Rasekh, M. (2003). Battle of Life: A Brief Study of Theories on Abortion. In J Reprod Infertil. 2003; 4(3): 220-236.



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- 10. Report of the Presidential Commission of Inquiry into Education and Training (1999). Harare, Government Printers.
- 11. Rinderkknecht, L. (2006) Supporting Attitudes on Abortion with the Influence of Education and Gender. People.oregonstate.edu Accessed 18 October 2017.
- 12. Saad, L. (2010). Generational Differences on Abortion Narrow. In Gallup News Politics March 12, 2010: news.gallup.com/poll/ 126581/generational-differences-abortion-narrow.aspx Accessed 18 October 2017.
- 13. Samkange. S.J.T. and Samkange. T.M. (1980). *Hunhuism or Ubuntism: a Zimbabwean indigenous political philosophy*. Harare, Graham Pub.
- 14. Schwarz, S. (1990). Moral Questions of Abortion. Chicago, Loyola University Press
- 15. Stephen, R. (2004). Rights of wrongs? Public attitudes towards moral value: Human Sciences Research Council (HSRC) of South Africa Review, 2 (3). Retrieved March 25. 2007.
- 16. Wahba, M. and Roudi-Fahimi, F. (2012). The Need for Reproductive Health Education in Schools in Egypt. In Policy Brief, October 2012. www.prb.org. Accessed 23 June 2017.
- 17. Zimbabwe: Termination of Pregnancy Act of 1977[Zimbabwe], Chapter 15:10, 1977, http://www.refworld.org/docid/4c464de2. Accessed 19 June 2017.