RUMOR 1

“Mapiritsi ekuronga mhuri otigwarisa neBP.”

Translation:
“Family planning tablets are causing BP.”
FACT CHECKING

• The rumor emanates from concerns that contraceptive pills contribute to high blood pressure in women. Such concerns may have been driven by unverified reports circulating in communities where women report having high blood pressure and suspect that this is a result of using contraceptive pills. Family planning or birth control pills are contraceptives used to prevent unwanted pregnancies.

• According to the Zimbabwe National Family Planning Council (ZNFPC), two broad types of family planning pills are used in Zimbabwe, Combined Oral Contraceptives (COC) such as Control and Marvelon28 pills, and Progestogen only pill (POP) such as Secure. These pills are 99-100% effective in preventing pregnancy, are easy to use and do not interfere with sexual intercourse.

• Dr Taurai Gunguwo, an Obstetrician and Gynaecologist said, “there is no evidence that family planning pills cause high blood pressure and if there was suspicion that such side effects exist, the pills would not be offered to people.”

• A research carried out by the Harvard Medical School indicates that women who already have high blood pressure are discouraged from using family planning pills as they may be deadly. Instead, they should consult doctors about other suitable family planning methods.

RECOMMENDATIONS FOR COMMUNITIES

○ Community health workers (CHWs) can share some information, Education and Communication (IEC) materials with women, youths and migrants that explain how birth control pills function together with potential side effects and debunk myths and misinformation on the use of birth control pills.

○ CHWs can invite health experts to participate in dialogues with women, migrants and youths where they share information on the importance of seeking sexual reproductive health information and consult on best suitable birth control pills.

ORGANISATIONS RAISING AWARENESS ON FAMILY PLANNING AND MATERNAL HEALTH

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“Umuntu osokiweyo kabambi igcikwane le HIV.”

Community listening group, Ndebele

TRANSLATION:
“A circumcised person cannot be infected with the HIV virus.”
Monitoring, Evaluation and Research Manager at Population Services International (PSI), Malvern Munjoma says “circumcision does not completely prevent HIV transmission but reduces chances of contracting the virus during sexual intercourse”. He highlights that on average, when compared to those who are uncircumcised, circumcised men have 60% protection from contracting HIV during sexual intercourse.

A study conducted by the Center for Disease Control (CDC) supports the assertion above noting that circumcised men are less likely to acquire new sexually transmitted infections such as syphilis, genital herpes and high-risk strains of human papillomavirus associated with cancer.

Although male circumcision has been recognised as an important strategy for prevention of heterosexually acquired HIV in men it should never replace known methods of HIV prevention such as abstinence, correct use of condoms, sticking to one sexual partner and taking pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP).

Community outreach workers can share flyers and pamphlets with men, women, youths and migrants highlighting the importance of correct condom use during sexual intercourse, the role of circumcision in reducing HIV transmission and information that circumcision does not totally guarantee protection against HIV infection.

CHWs can invite health experts to discuss benefits of circumcision with boys and men, emphasising correct condom use, getting tested for HIV even when circumcised, and ensuring that they make informed decisions about their sexual reproductive health.

### Organisations Raising Awareness on Circumcision and HIV in Zimbabwe

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Between February 15 and 21, 2023, Internews in Zimbabwe collected 201 COVID-19 and other health related rumours. Nineteen rumours were collected online (Facebook: Seven and Twitter: 12) and 182 through in-person interaction. Trending rumour themes were, “COVID-19 vaccines cause death” (44%), “COVID-19 is a hoax” (31%), “COVID-19 vaccines have serious side effects” (11%), “Drug abuse is escalating among youths” (9%) and “the cholera outbreak is due to poor sanitation” (4%).

First vaccine dose uptake in Zimbabwe decreased by 64% from 106,948 doses administered in week two of February 2023 to 38,047 doses administered in week three.

There was a 66% and 52% decrease in the uptake of second and third vaccine doses, respectively. Second vaccine dose uptake decreased from 46,329 to 15,576 doses, while third vaccine dose uptake decreased from 135,385 to 63,922 doses.

The COVID-19 vaccination campaign which ended on February 17, 2023, targeting children from 12 years could be the reason for the sharp decrease in vaccination numbers during the reporting week.

As of February 21, 2023, there were 772 active COVID-19 cases with 25 being hospitalised. Nineteen of the hospitalised cases were vaccinated and six were unvaccinated. No COVID-19 related deaths were recorded during week three.

Cumulatively, Zimbabwe has vaccinated 6,796,591 people with the first vaccine dose and 5,051,922 people with the second vaccine dose, translating to 50.4% of the 10 million herd immunity target initially set for end December 2022. A total of 1,562,211 people has received the third vaccine dose to date.