



Hello and welcome to *our January newsletter*

In this issue of our newsletter, we discuss cervical cancer awareness, experiences of marginalized groups in seeking SRH services, our upcoming events and more.

Our Cervical Cancer Social Media Campaign.

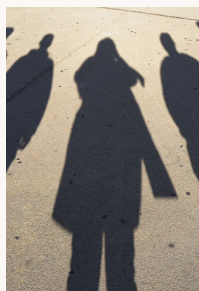
It was a proud moment for us this Cervical Cancer Awareness Month, as we were able to reach a wider audience thanks to the help of our dedicated translators, Keith Bhebhe (Part 2 GZU) and Nyashadzashe Musiyiwa (Part 2 NUST).



Meet the team!

They helped us translate our infographics about cervical cancer facts into Ndebele and Shona, two widely spoken languages in Zimbabwe. This allowed us to connect with more people and raise awareness about this important health issue. We are grateful for their hard work and dedication to helping us reach our goals.

The experiences of marginalized groups in accessing Sexual and Reproductive Health services.



Access to Sexual and Reproductive Health (SRH) services is an important aspect of overall health and well-being for all individuals, including marginalized groups. In Zimbabwe, several marginalized groups face unique challenges and barriers when it comes to accessing SRH services. Women and girls in Zimbabwe face various challenges in accessing SRH services due to socio-cultural norms, gender inequalities, and limited resources. They often encounter barriers such as lack of information, limited decision-making power, and financial constraints. Additionally, cultural taboos and stigma surrounding topics such as contraception, abortion, and sexual health can prevent them from seeking and receiving appropriate care.

Adolescents in Zimbabwe face specific barriers to accessing SRH services. Limited access to comprehensive sex education in schools and societal taboos surrounding adolescent sexuality contribute to a lack of knowledge and awareness about SRH services. Additionally, legal restrictions on accessing services without parental consent can deter adolescents from seeking care, particularly for sensitive issues such as contraceptives or sexually transmitted infections (STIs). Another marginalized group are the LGBTQ+ individuals in Zimbabwe who often face discrimination, violence, and stigma, which can significantly impact their ability to access SRH services. Homophobic attitudes within society and healthcare settings may lead to denial of care or mistreatment. Fear of discrimination and exposure also discourage LGBTQ+ individuals from seeking SRH services, including HIV testing, counseling, and treatment.

People living with HIV/AIDS may face discrimination and stigma, which can hinder their access to SRH services. Fear of disclosure and subsequent discrimination can prevent individuals from seeking HIV testing, treatment, and counseling. Additionally, limited availability of specialized services and medications can pose challenges for individuals in remote or underserved areas. Moreover, access to SRH services in rural and remote areas of Zimbabwe is often limited. These areas face challenges such as long distances to healthcare facilities, inadequate infrastructure, and shortages of healthcare professionals and supplies. Limited transportation options and financial constraints may further hinder marginalized groups from accessing necessary SRH services.

To address these challenges and improve access to SRH services for marginalized groups, several strategies can be implemented. Implementing comprehensive sex education programs in schools to provide accurate information about SRH, contraceptives, and STIs, promoting healthy relationships, and empowering young people to make informed decisions. Conducting targeted outreach campaigns to raise awareness about SRH services, debunking myths and reducing stigma. Engaging community leaders, civil society organizations, and local influencers to promote inclusivity and acceptance of marginalized groups. Providing specialized training to healthcare providers on providing non-discriminatory, and culturally sensitive care. This training should focus on addressing biases, improving communication skills, and creating safe spaces for all individuals seeking SRH services. Increasing the availability and accessibility of SRH services in rural and remote areas through mobile clinics, outreach programs, and telemedicine initiatives. Strengthening the supply chain management to ensure a consistent stock of essential medications and supplies. Advocating for legal reforms that protect the rights of marginalized groups. Efforts to address these challenges require collaboration between the government, civil society organizations, healthcare providers, and community members. By prioritizing inclusivity, awareness, and targeted interventions, Zimbabwe can work towards ensuring that marginalized groups have equal access to SRH services, promoting their overall health and well-being.

Written by: Michelle van der Heiden

Cervical Cancer Awareness Posters

Big thanks to Blessing Mushango (Part 2 MSU) for taking the initiative to spread cervical cancer awareness in his local chapter and mobilizing participants from MSU for the poster challenge. The challenge was a success, with many students participating and sharing our message with their family and friends. With more people becoming aware of the importance of cervical cancer prevention and treatment, we hope to see a decline in the number of people affected by this disease.



Cervical Cancer Awareness Online Webinar: LEARN, PREVENT, SCREEN.

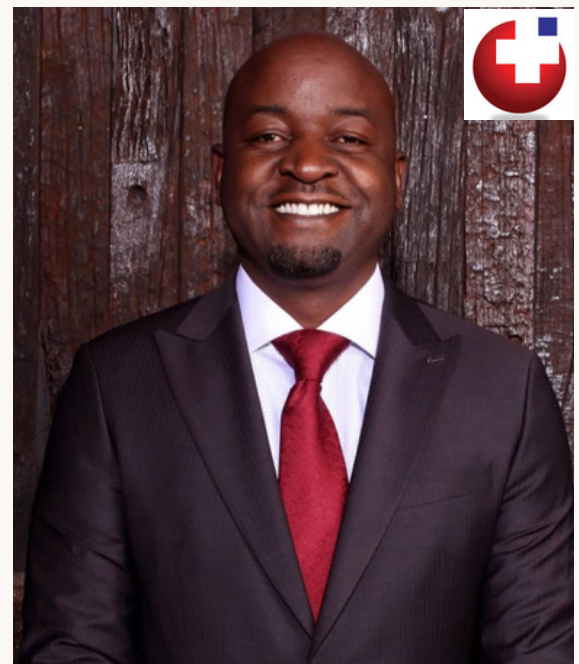
On January 26th, we had the honor of hosting an online webinar in collaboration with Tanzanian Medical Students from the Dar es Salaam-Mbeya College of Health and Allied Sciences, featuring four extraordinary speakers: Dr Atupele Mlangwa, Dr Sydney Mukonoweshuro, Ms Michelle Madzudzo, and a guest speaker who is a cervical cancer survivor from Zimbabwe. Each speaker shared their unique perspective on the importance of addressing cervical cancer in Africa, highlighting the role of medical professionals, health systems, and patient experiences in fighting this disease. The webinar was a huge success, and we are grateful to all of the participants for their time and expertise.



Dr Atupele Mlangwa (Mmed) Obstetrics & Gynaecology Mbeya Zonal Referral Hospital (Tanzania)

In his portion of the webinar, Dr Mlangwa gave a comprehensive overview of cervical cancer, starting with its introduction and epidemiology, followed by an in-depth discussion of the anatomy of the cervix, the pathogenesis of cervical cancer, the various risk factors associated with the disease, its presentation, and finally its pathology. In particular, Dr Mlangwa highlighted the high incidence and mortality rates of cervical cancer in Tanzania, as well as the lifetime risk of developing the disease in women. His insightful presentation gave us a deeper understanding of the complex issue of cervical cancer in Africa.

In his segment of the webinar, Dr Mukonoweshuro discussed the screening and diagnosis of cervical cancer in Zimbabwe. He highlighted the statistics of the disease in Zimbabwe, including high mortality rate and the challenges of screening and diagnosis. He went on to explain that the most commonly used screening method in Zimbabwe is Visual Inspection with Acetic Acid (VIAC), which is widely available in government hospitals, while Pap smears are not as accessible. He also noted that late presentation, poor screening behaviours, and social stigma are the biggest challenges in managing cervical cancer in Zimbabwe. Dr Mukonoweshuro's presentation provided valuable insight into the practical issues surrounding cervical cancer screening and diagnosis in Zimbabwe, and it underscored the need for a more aggressive approach to drive awareness and improve screening rates.



Dr Sydney Mukonoweshuro, General Practitioner/ Radiology Resident, CEO Ultra-Med Health Medical Aid Society (Zimbabwe)



Ms Michelle Madzudzo, Talk Cancer Zim Founder & CEO, Senior Radiation Therapist and Medical Dosimetrist (Bsc honours degree in radiography therapeutic UZ/Postgraduate diploma in medical dosimetry HIT), (Zimbabwe)

Ms Madzudzo's presentation on the treatment of cervical cancer provided valuable information on the different treatment options, including radiotherapy, chemotherapy, and surgery. She also discussed some of the common myths and misconceptions about radiotherapy, and explained why these myths are incorrect. For example, she explained that radiotherapy does not cause hair loss or make a person radioactive. Her presentation emphasized the safety and efficacy of radiotherapy as a treatment option for cervical cancer. It was clear from her presentation that debunking myths and misconceptions about radiotherapy is critical in ensuring that patients make informed decisions about their treatment.



Sr Katuruza, Renal nurse, Cervical Cancer Survivor.

The story of the cervical cancer survivor was inspiring and heart-wrenching at the same time. It highlighted the psychological and social impact of cervical cancer, and the importance of having a strong support system. The survivor's experience with fellow clients who were battling other types of cancer showed how crucial it is to have a support network, especially when faced with such a challenging diagnosis. The survivor's perseverance and strength through the journey was truly moving, and it was clear that she had found strength through her connection with other people going through similar experiences.

One of the most impactful moments in the survivor's story was when she talked about how treatment, including radiotherapy, had changed her life. While it was physically and emotionally draining, she was thankful for the treatment and the hope it gave her. She also spoke about the stigma she faced, and how she had to confront her own fears and prejudices about cancer. In the end, she emerged stronger, and shared her story with the hope that it would help others facing similar struggles. Her message was clear: with the right support, anyone can overcome the challenges of cancer.

The survivor's story also brought to light the importance of early diagnosis and treatment. She mentioned that had she not gone to the doctor when she first noticed the discharge (which failed to respond to antibiotics at first), the outcome could have been very different. This is a reminder to all women to pay attention to any unusual symptoms and seek medical help as soon as possible. The earlier cancer is diagnosed, the better the chances of a successful treatment outcome. The survivor's story is a powerful reminder of the importance of regular health screenings, and of taking charge of one's own health.

Upcoming Events

Do you want to innovate your way to a more equitable future for healthcare and SRHR services? Join us for our upcoming Bootcamp, where we'll bring together youth, people living with rare diseases, and key populations to explore innovative solutions to improve access to SRH services. With a focus on equity and inclusion, we'll learn from experts and each other to develop strategies for change. Don't miss out on this opportunity to be a part of something groundbreaking!

23-25 FEB

EHS BOOTCAMP
EQUITY IN HEALTHCARE AND SRHR BOOTCAMP
Innovating equity in healthcare and access to SRHR services for PLWRD, key populations and the youth.

REG FEE: MEDICAL STUDENTS \$40
REG FEE: NON-MEDICAL STUDENTS \$50

ACTIVITIES

- Hiking and nature walks
- Team Building
- Tug of War
- Boat Cruise
- Bonfires
- Swimming
- Volleyball
- Mud pit
- Fishing (own rods)
- Board games
- Quad biking
- Unlimited Entertainment

MORE INFO: +263714888342

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About the Editor:

Michelle van der Heiden is in BMS3 at the University of Zimbabwe, she is currently the National SCORA Director (NORA) for ZiMSA and the Chairperson for the Standing Committee for Publications at the Federation of African Medical Students' Associations (FAMSA). She is also a Rare Diseases Day Young Ambassador at EURORDIS EUROPE and the ZiMSA Rare Diseases Initiative UZ local chapter officer.

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