Chapter 15: Phobia To Report Rape Cases Increases Unintended Pregnancies in Zimbabwe

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Abstract

The objective of this qualitative study was to provide insights into adolescents' experiences of falling pregnant as a result of rape yet not reporting the rape act because of fear of adults, thus highlighting the barriers to reporting, consequences of not reporting and adolescent needs for support in rural Zimbabwe. The research gap this study aims to fill, is the lack of empirical qualitative evidence of the specific dynamics of non reporting of rape aware pregnancies among the adolescent population in the Zimbabwe context. Informed consent and confidentiality were obtained from 15 participants with the aid of focus group discussions who were obtained through purposive sampling including six learners, two counsellors, two teachers, four parents and one Ministry of Primary and Secondary Education Primary and Secondary Education official who underwent themed analysis. One important discovery was that the adolescents were frightened of blame, stigmatisation and retribution from the adults, and were not trusting of "approved" reporting systems, which caused them to keep rape-related pregnancies hidden, with severe consequences for psychological distress and school malfunction. The study recommends for the Government of Australia to establish an adolescent-friendly and confidential system for reporting at the same time encouraging the setting up of community based sensitisation programs to reduce stigma and promote disclosure.

Keywords: adolescent pregnancy, fear of adults, rape, reporting barriers, Zimbabwe

1. Introduction and Background of the Study

Adolescent pregnancy as a consequence of sexual violence is one of the most egregious forms of human rights violation of children, with significant and enduring consequences for the sexual violence victims' physical, psychological, and social health. The prevalence of sexual violence against adolescents in Zimbabwe – just as in many other countries – is alarmingly high, and reporting rates are still low despite the individual, family and system-level barriers (Saruchera & Chidarikire, 2024). The trauma of being an adolescent mother due to rape can be especially deep because it not only involves stigma attached to early pregnancy but also the trauma attached to the sexual violence. This can put victims of sexual violence in a delicate situation which they may find untenable on their own. One of the salient points of concern with regard to rape in Zimbabwe is the low reporting rates (Chikoko & Mwapaura, 2023)

due to cultural sentiments, patriarchy and power differentials which engender victims being blamed and stigmatised. Reporting rapes of adolescents is also hindered by certain factors, such as lack of trust in the system, fear of the aggressor, and even the fear of being blamed by peers and family members (Umubyeyi, 2024). Adolescents can be very reluctant to disclose feelings of fear due to adult authority figures, such as parents or other grown-up relatives, who may react in many negative ways, from anger and blaming to punishment or rejection.

Rape-related pregnancy has a multi-faceted, devastating impact on a psychological level among adolescents. Post-traumatic stress disorder, depression, anxiety and suicidal thoughts are common in victims and can be accompanied by a further stressors, an unintended pregnancy (Echezarraga et al., 2024). Not reporting assault leads to the denial of necessary psychological and medical care to the victim such as access to emergency contraceptive pills (ECP), HIV prophylaxis, medical insurance, normal functioning, healthcare and awareness of continued care and mental health services (Jan & Bhat, 2025). Psychological difficulties can be increased by a constant reminder from the pregnancy itself, and cause difficulties for the victim to get on with their life. The educational implications of rape-related pregnancy are similar to those of any other adolescent pregnancy; victims of rape may be stigmatized, unable to attend school, or simply disgusted by sexuality education in schools (Marongedza et al., 2023). But, the trauma of rape related pregnancy only makes it harder for rape survivors to return to school. There is a stigma attached to sexual violence as well as the stigma attached to early pregnancy, and this can be too much for adolescent girls and young people to handle. By failing to report the rape, victims will also be denied access to the legal and institutional protection that would help them to overcome the difficulties.

Although the legal framework affords protection to children who are victims of sexual violence, and also to prosecute perpetrators, there are inconsistencies with regards to implementation (Mwapaura, 2024). Disclosure – as a key first step towards securing justice and support – is not the norm for adolescents, as they often fear that the criminal justice system will re-traumatise them, that they will not be believed, or that they may be exposed to the criminal justice process at all. Lack of child-friendly reporting mechanisms and inadequate support service including in rural areas further exacerbates the barriers to reporting (Chiyota, 2020). Adults' role in adolescents' lives is multifaceted and is possible source of support and harm. Not providing a safe and supportive environment can have devastating consequences for the victim, in the context of rape-related pregnancy (Brede et al., 2017). Some young people in the context of sexual violence might worry about being believed, or that they would be to blame, and not feel comfortable disclosing what happened in the absence of a trusted relationship with adults. Parent-child relationship quality at least plays an important role in adolescent disclosure of sensitive experiences such as sexual violence (Jaffee et al., 2001). The reporting of rape in Zimbabwe is influenced by cultural issues relating to sex and gender. Societal expectations of 'virginity' and 'female purity' can cause the victim to be held responsible for the violence that she endured; in some cases the questions were directed at the victim: "What was she wearing? What was she doing?" (Imbosa et al., 2022). Some victims and their families may choose to not disclose sexual violence, as the stigma attached to the violation is so great, they might rather hide the incident and the effects of it than to endure “disgust” from the community. Shame of confessing to family members and giving shame to the family can be a powerful disincentive to disclosure, especially in close-knit communities where social marginalization and gossiping are important factors.

The current study is guided by the following research questions:

1. What are the causes of rape-related pregnancies and the barriers to reporting among adolescents in rural Zimbabwe?
2. What are the effects of rape-related pregnancies and non-reporting on adolescents' educational and psychological well-being?
3. What solutions can be implemented to support adolescents who have experienced rape-related pregnancies and to encourage reporting?

2. Literature Review

Studies conducted in the United States on sexual violence and adolescent pregnancy have focused on the obstacles to reporting sexual violence and support services needed by adolescent pregnancy victims. Edelman (2018) explored Title IX regulations on pregnant and parenting students, including students who became pregnant as a result of sexual violence. The study revealed that sexual violence victims had other barriers to education, such as stigma and unhelpful others. The study pointed out the importance of having policies in place, which would safeguard the victims' rights, and which would help the victim to continue his or her education. The study however particularly concentrated on support after the rape and not the actual deterrence of reporting a rape and instead clarified the extent of the latter with a general reference to the barriers. To fill this gap, the current study aims to investigate the unique challenges to reporting rape-related pregnancies in the Zimbabwean context. In the United States, Hayes et al (2006) examined the psychological impacts of sexual violence and the importance of ACT in recovery from sexual violence. The study concluded that the psychological distress reported by these respondents may be profound and that certain therapeutic activities may be helpful in coping with their experiences when sexually abused. The study was mainly concerned with therapeutic interventions, however, and not on the barriers to disclosure or the social and cultural factors which affect disclosure. The current study will seek to address this gap by looking at the cultural and social context in which raping-related pregnancies occur and are being reported in Zimbabwe.

In the UK, studies on sexual violence and adolescent pregnancy have focussed on the impact of support services and social workers. Brede et al. (2017) analysed the experiences of autistic students who were excluded from school and it was found that supportive relationships contribute significantly to reintegration. The study had a different population but very relevant information in relation to the value of trust and support in the context of the victims of sexual violence. The study underscored the importance of establishing environments where adults can make themselves available to young people and relate to them in safe and acceptable ways to encourage disclosure of sensitive information. This finding is pertinent to this study which is about barriers to reporting rape-related pregnancy in Zimbabwe. Carneiro et al. (2024) carried out another study in the UK to investigate the effects of the Sure Start programme on educational outcomes for children of disadvantaged families. One of the key findings in the research was the need for early intervention and family support to achieve better outcomes, as well as helping victims of trauma deal with the effects of their experiences. But the study was not explicit about the reasons behind the reported sexual violence, which covered the reported barriers for the disclosures of rape related pregnancies by adolescents. The current study presents work that focuses on the particular factors that hinder reporting in Zimbabwe as a case in point. In a Botswana context studies on sexual violence and adolescent pregnancy have focussed on the culture and social context of sexual violence reporting. Umubyeyi (2024) did a study on curbing teenage pregnancy in south African schools with comparative insights in Botswana. That cultural attitudes and beliefs towards sexuality and gender had a strong impact on the willingness to report a case of sexual violence as many

victims feared they would be blamed and stigmatised. The study identified the need for culturally relevant interventions that tackle barriers to reporting, and offer support, to victims. Importantly, though, most of the literature referred to in the research was on steps to prevent rape-related pregnancies, so there was a lack of research to address the needs of women who have already experienced such pregnancies. Currently, no research has been conducted to look at the lives of adolescents who have fallen pregnant as a result of rape in Zimbabwe and this is what the current research sets to explore. The narrative of resilience among learners in a rural primary school in Swaziland was explored by Motsa and Morojele (2017) in another study in Botswana. Several factors—such as family support and community attitudes—were identified that contributed to resilience. The role of positive relationships in promoting resilience and the potential for supportive adults to help people surviving trauma to thrive were emphasised. But, the study was not specific in the perspective of the survivors of sexual violence; thus, there is a void in understanding the functioning of resilience in relation to rape-related pregnancy. The current study fills this gap by looking at some factors that help or do not help the rebuilding of adolescents that have been through rape-related pregnancies. The prevalence of sexual violence and barriers to reporting have been investigated in South Africa. A study Chigona and Chetty (2008) on teen mothers and schooling in South Africa identified the problems that faced teen mothers in the education system. The study revealed that a large number of teen moms had been sexually abused; the lack of reporting was found to be a problem for them. The study emphasized the importance of implementing comprehensive support measures to cater to the various needs of victims, such as psychological support, education, etc. The study, however, did not specifically address barriers to disclosing the rape, so there is little understanding regarding the factors that stop rape from being disclosed among adolescents. The current study takes into account this lack by exploring the challenges to reporting a pregnancy from rape in Zimbabwe. Another significant study was conducted by Imbosa et al., (2022) on the re-entry policy and retention of expectant learners and teen mothers in public secondary schools in Kenya – with a comparative perspectives from the Southern African region. This study revealed that a stigma and lack of support were some of the subsequent obstacles that sexual violence victims had to endure in order to receive an education. The study found a need for policies that will safeguard victims' rights and give them assistance to pursue further their education. However, the study did not directly focus on barriers of sexual violence disclosure, so it is not evident what is impactful in the Zimbabwean context. The present study seeks to fill this gap by looking at the challenges to reporting pregnancies resulting from rape in rural Zimbabwe.

Sexual violence and adolescent pregnancy research in Zimbabwe has focused on the prevalence of sexual violence and the problems associated with rape. Marongedza et al (2023) carried out a study on secondary school student performance in rural communities with regard to institutional constraint in Zimbabwe. The study revealed that sexual violence had a high impact on school dropout of the girls and that lack of reporting meant that they received no help they required. An intervention addressing barriers to reporting, and support for victims, was noted, a theme of the study. But the research tended to be more oriented towards institutional settings and not specifically on the barriers of reporting sexual violence. This current study was aimed at filling the lacuna by conducting a case study looking into the specific challenges on reporting of rape-related pregnancies in rural Zimbabwe. The study by Saruchera and Chidarikire (2024) under the theme of promoting inclusive policies to support pregnant grade 6 adolescent learners in Zimbabwe, was conducted. It was revealed that many challenges in accessing further education for sexual violence survivors existed, such as stigma and lack of support. The study found a need for policies to safeguard the rights of the victim and support him/her. But, very limited research was done to clarify the barriers to report sexual violence, only post-pregnancy support. The current study seeks to fill this gap, and informs policy and practice through its exploration of barriers to reporting rape-related pregnancy in addition to the outcomes of not reporting. A literature search

indicates that although a large body of work has been done on sexual violence and adolescent pregnancies, there is limited information about the particular challenges to reporting rape related pregnancies as they relate to Zimbabwe. Research on sexual violence and perceived problems for the victim has received the greatest attention, whereas little research on adolescents has aimed to provide information on what would keep them from disclosing sexual violence has been conducted. This study seeks to bridge this gap and present empirical evidence of the challenges women in rural Zimbabwe encounter when reporting rape and what happens when they don't report.

3. Theoretical Framework

The theory used in this study is mUrie Bronfenbrenner's (1979) ecological systems theory. Bronfenbrenner's development of the Ecological Systems Theory (EST) yields a comprehensive framework that allows the interplay of many levels of the environment/ecosystems to be understood for human development and behaviour. The theory suggests that a person is embedded in a sequence of systems, the microsystem (his/her immediate environs), the mesosystem (the interface between microsystems), the exosystem (systems to which he or she has indirect access), and the macrosystem (the cultural and societal values of the homeland). The first tenet is that the individual's immediate relations including family, peers and school are most influential in behaviour (the microsystem). Parental relationships and teacher-student relationships can influence whether or not the adolescent can disclose their situation and seek help in the context of rape-related pregnancy (Dube, 2020). A key factor in this study is the role of teens' family environment or the environment at school, which is also suitable for this tenet in addressing the decisions of adolescents to disclose or conceal pregnancies resulting from incident instances of rape. The second tenet is that the mesosystem, which consist of the interactions between different microsystems, can ease the way for or block behaviour. The family's role and the dynamics between the family and school would negatively affect the support provided to an adolescent when they share information on the pregnancy a result of rape with another person, for instance (Kufakunesu et al, 2025). This tenet pertains to the present study, which focuses on the role of the interplay of the three systems—family, school, and community—in the reporting and support for rape related pregnancies. The third principle is that the opportunities and constraints in which an individual functions are determined by the exosystem (indirect factors such as policies and community resources). Reporting avenues and access to support and legal assistance influence their willingness to report incidents of rape-related pregnancies (Chidhakwa, 2023). This tenet applies to this research as it focuses on the influence of institutional and policy factors that influence reporting and care of rape-related pregnancy. The fourth tenet is the interface between the individual behaviour and the broader context of the macrosystem, consisting of cultural values, beliefs and norms (Kanyopa & Chidarikire, 2020). In Zimbabwe, cultural attitudes towards sex, gender and family values shape whether the adolescent is comfortable in reporting pregnancy in the context of rape. It is a vital tenet to establish in understanding the barriers in the Zimbabwean environment to reporting.

The Ecological Systems Theory offers a rich framework to understanding rural Zimbabwe's challenges in reporting rape-related pregnancies. The model enables the exploration of the various dimensions of influence the adolescent might experience in deciding to disclosure or conceal the experiences (Kamwendo, 2025). On the microsystem level, family relationships, including with parents and siblings, and their relation to adolescents' comfort in disclosing their experiences is explored. A parent-child relationship that includes a trustful and communicative relationship is a key determinant of whether an adolescent will share sensitive information with his or her parent (Chidarikire & Saruchera, 2025). The mesosystem level is a study of the family and school and community systems and their relationships with one another. Family-school dynamics may impact on whether or not an adolescent gets support

once disclosing a rape-related pregnancy (Ganga, 2024). If the school is seen as supportive and responsive, for instance, how may this influence the adolescent's ability to disclose? However, if the school sees itself as judgmental and punitive, it might not be too willing to absorb the disclosure. At the exosystem level, institutional and policy-level factors that impact the reporting of rape-related pregnancies are explored (Nyahunda et al, 2024). Access to another person/place to inform or report, as well as support services and legal protections, can affect the willingness of the adolescent to share his/her experience. Limited access to childfriendly reporting mechanisms and services in rural areas is a major problem in terms of reporting. On the macro level, the culture and norms of a system are considered and how these affect the barriers to reporting (Marevesa, 2022). The absence of safe norms within cultures regarding sexuality, gender, and family honour can cause a strong deterrent to disclosure, with victims blamed and stigmatised. The theory offers a model for processes of the several levels of influence that negotiate the experiences of youth and adolescents who have fallen pregnant as a consequence of a rape.

4. Research Methodology

4.1 Research Paradigm

This study adopted an interpretivist paradigm, which recognises that social reality is constructed through the meanings and interpretations that individuals attach to their experiences (Mwapaura, 2024). The interpretivist paradigm is appropriate for this study as it seeks to understand the subjective experiences of adolescents who have experienced rape-related pregnancies and the barriers they face to reporting, rather than establishing objective causal relationships. This paradigm allows for a deep exploration of the meanings that participants attach to their experiences of fear, stigma, and non-disclosure, providing rich qualitative data that can inform policy and practice.

4.2 Research Approach

A qualitative research approach was employed in this study, consistent with the interpretivist paradigm. Qualitative research is particularly suited to exploring complex social phenomena and understanding the perspectives of participants in their own words (Chikoko & Mwapaura, 2023). This approach allows for the collection of detailed, contextually rich data that captures the nuances of participants' experiences and the meanings they attach to those experiences. The qualitative approach is appropriate for this study as it enables an in-depth exploration of the barriers to reporting rape-related pregnancies within the specific socio-cultural context of rural Zimbabwe.

4.3 Research Design

This study utilised a case study research design, which focuses on an in-depth exploration of a particular phenomenon within its real-life context (Hassan et al., 2024). The case study design is appropriate for this research as it allows for a comprehensive examination of the barriers to reporting rape-related pregnancies within the specific socio-cultural context of rural Zimbabwe. This design enables the researcher to capture the complexity of the factors that influence reporting and the consequences of non-disclosure.

4.4 Data Collection Methods

Data were generated through focus group discussions, which are particularly effective for exploring shared experiences and generating rich qualitative data through group interaction (Agarwal et al., 2024). Two focus groups were conducted, each comprising approximately seven to eight participants. The focus group discussions were guided by a semi-structured interview schedule that explored participants' experiences of rape-related pregnancy, the barriers to reporting, the consequences of non-disclosure, and the support needs of victims. The focus groups were conducted in the local language (Shona) to facilitate open communication and were audio-recorded with participants' consent.

4.5 Sampling Technique and Sample Size

The selection of the participants involved purposive sampling in order to obtain rich and relevant data about the research topic (Akwero, 2023). Fifteen people were selected, which included six learners (adolescents who had fallen pregnant due to rape and others who had awareness of such cases), two counsellors (School based and Community based), two teachers, four parents (of the adolescents) and one Ministry of Primary and Secondary Education of Primary and Secondary Education official. These were selected because they could offer valuable perspectives and expertise, unique to their part and profile. The learners shared their first-hand experiences of rape related pregnancy and challenges of reporting. Counsellors gave feedback around victim support needs, and resistance to disclosure. Teachers shared insights into the challenges of education as well as the role of schools for supporting victims. The parents provided some background on family life and what factors impact family disclosure. General policy oriented issues regarding support to victims and difficulties in reporting were given by the Ministry of Primary and Secondary Education official.

4.6 Data Analysis

The generated data were analysed using thematic analysis, following the six steps outlined by Braun and Clarke (2006). The first step involved familiarisation with the data, which required transcribing the audio recordings verbatim and reading the transcripts multiple times to gain an overall understanding of the content. The second step involved generating initial codes by systematically identifying interesting features of the data that were relevant to the research questions. The third step involved searching for themes by collating codes into potential themes that captured significant patterns in the data. The fourth step involved reviewing themes to ensure they were coherent and accurately represented the data. The fifth step involved defining and naming themes by identifying the essence of each theme and articulating its significance. The sixth step involved producing the report by selecting vivid examples and weaving them into a narrative that addressed the research questions.

4.7 Trustworthiness

Trustworthiness was ensured through member checking, which involved presenting the findings to participants to verify the accuracy and credibility of the interpretations (Chikoko et al., 2022). Participants were given the opportunity to provide feedback on the findings and suggest corrections or clarifications. This process enhanced the credibility of the findings by ensuring that they accurately reflected participants' experiences and perspectives.

4.8 Ethical Considerations

The ethical aspects were taken very carefully throughout the research process. All participants were given detailed information on the purpose of the study, the nature of their participation and their right to withdraw at any time without penalty since informed consent was obtained. In addition, parental consent was sought for all participants under the age of 18 years. To ensure confidentiality, pseudonyms were used, safeguarding the identities of participants as well as giving freedom to describe the experiences. The researcher specified that the study would be for the purposes of informing policy and practice and would not be a judgment or evaluation of participants. Participants were also informed that their answers were not to be disclosed to any other person or the school authorities who would be able to use the information against them. Specific care was taken to ensure there was no repeated trauma of the research process for those who had been subject to sexual violence themselves.

5. Discussion and Findings

5.1 Theme 1: Causes and Barriers to Reporting Rape-Related Pregnancies

This theme explores the factors that contribute to rape-related pregnancies among adolescents and the barriers that prevent them from reporting these incidents. Understanding these factors is essential for developing interventions that address the root causes of sexual violence and create conditions in which adolescents feel able to disclose their experiences. The following are the views of the participants:

Participant Learner Anesu, Age 16 urged that,

I was raped by a man in my community. He threatened to kill me if I told anyone. I was so scared. I did not tell my parents because I thought they would blame me. They always told me to be careful and not to put myself in dangerous situations. I thought they would say it was my fault.

On the other hand, Participant Learner Tafadzwa, Age 15 observed that,

My uncle raped me. I was staying with him because my parents had gone to work in South Africa. I did not tell anyone because I was scared. I thought no one would believe me because he was a respected man in the community. When I found out I was pregnant, I was too scared to tell anyone. I did not want to bring shame to my family.

Lastly, Participant Counsellor Mrs. Moyo, Age 45 commended that,

I have seen many cases of adolescent girls who have been raped and become pregnant but are too scared to report. The fear is real. They fear being blamed, being stigmatised, and being punished. They also fear that the perpetrator will hurt them or their families. Many of them suffer in silence because they do not trust the adults in their lives.

The above listed statistics show that pregnancy as a result of rape is due to a host of factors, sexual violence by a known person; absence of protective environments and susceptibility of adolescents when they are in situations that they do not have adults who are supervising and supporting them. These findings are comparable to the earlier research that revealed sexual violence as an important factor that causes adolescent pregnancy in sub-Saharan Africa (Jan & Bhat, 2025). Accounts of the participants point to high levels of family member- and community member-led sexual violence, and the power

dynamics that tend to exist in many of the relationships where adolescents are situated. Barriers to reporting includes pregnancy resulting from rape have many and are profound. Participants shared concerns about the risk of sanctions, stigma, and punishment from adults, and of a low perceived efficacy of formal reporting options. This is in line with research conducted by Umubyeyi (2024) whose findings revealed that cultural norms and fear of stigma were major challenges to reporting sexual violence. The worry of not feeling believed by others is also a big obstacle, especially if the aggressor is a well-known member of the community, or maybe a member of the family. Lack of trust in adultsbrought up by lack of safe and supportive relationships where the adolescent can give expression to what he/she has experienced. This theme's findings suggest that sexual violence by known perpetrators, and the vulnerability of adolescents in situations where safe environments are lacking, are contributing factors to pregnancy resulting from rape among adolescents. Fear of blame, stigmatisation, retribution, lack of trust in adults and formal reporting mechanisms are the barriers to reporting (Saruchera & Chidarikire, 2024). The results indicate a need for interventions that target the underlying risk factors for sexual violence and the need to establish a protective environment where adolescents can report sexual violence.

5.2 Theme 2: Effects of Rape-Related Pregnancies and Non-Reporting

This theme explores the effects of rape-related pregnancies and non-reporting on adolescents' educational and psychological well-being. Understanding these effects is essential for comprehending the full impact of sexual violence and the importance of early intervention and support. Below are the participants' responses:

Participant Learner Chido, Age 17 noted that,

I kept the pregnancy a secret for as long as I could. I was so ashamed. I stopped going to school because I could not face people. I felt dirty and worthless. I had nightmares about what happened. I thought about killing myself many times. I did not know how to cope.

More so, Participant Teacher Mr. Moyo, Age 42 was of the view,

We have had cases where girls become pregnant and drop out of school. Sometimes we suspect that they have been raped, but they never tell us. They suffer in silence. The psychological effects are severe. They become withdrawn, depressed, and sometimes suicidal. They lose their confidence and their hope for the future.

Lastly, Participant Parent Mrs. Dube, Age 48 shared that,

When I found out that my daughter had been raped and was pregnant, I was devastated. But I was also angry that she had not told me. I wish she had trusted me enough to tell me. I would have supported her. I think the secrecy and the shame are worse than the pregnancy itself.

The data indicate that the impact of rape-related pregnancy and non-reporting is significant and impacts strongly on adolescents' educational and psychological functioning. Participants reported shame, guilt, isolation, resulting in dropping out of school and experiencing intense psychological distress such as depression, anxiety, and suicidal thoughts. This is in line with the research conducted by Echezarraga et al. (2024), which concluded that sexual violence victims may suffer from severe psychological suffering. Even though the rape goes unreported, it raises the negative impact on victims' lives that they

are not receiving the psychological support and medical care they need. The educational implications of rape related pregnancy were also great, with the participants stating that the shame and stigma caused them to drop out of school. These results align with the findings of Marongedza et al. (2023) that during pregnancy there is a significant reason for girls dropping out of schools in rural Zimbabwe. Adolescents who fall pregnant as a result of sexual violence face a double burden that is often overwhelming, not only because of trauma that the violence instilled on them but the stigma attached to such disappointful pregnancies. The results from this theme suggest that both rape related pregnancies and not reporting have a profound detrimental effect on adolescents' educational and psychological outcomes. The traumatic experiences, feelings of shame, and stigma contribute to school dropout, significant psychological distress and social isolation (Saruchera & Chidarikire, 2024). Not reporting adds on to the negative effects of what happened to the victims who are unable to receive the necessary support.

5.3 Theme 3: Solutions for Supporting Victims and Encouraging Reporting

This theme explores the solutions that can be implemented to support adolescents who have experienced rape-related pregnancies and to encourage reporting. The theme encompasses family-level, school-level, and policy-level interventions that address the barriers to reporting and provide support for victims. The participants responded:

Participant Learner Rumbidzai, Age 16 was of the view:

I think we need more places where we can go and talk to someone we trust. We need people who will listen to us without judging us. We also need to be taught about our rights and how to report. I did not know where to go or who to talk to. If I had known, maybe I would have reported.

Furthermore, Participant Ministry of Primary and Secondary Education Official Mrs. Ncube, Age 52 observed that,

The Ministry of Primary and Secondary Education has policies that support the protection of children from sexual violence. We have reporting mechanisms, but many children do not know about them or do not trust them. We need to create more child-friendly reporting mechanisms and we need to work with communities to reduce stigma and create supportive environments.

Lastly, Participant Counsellor Mr. Sibanda, Age 48 narrated that,

We need to train teachers and other adults to recognise the signs of sexual violence and to respond appropriately. We need to create a culture in which children feel safe to disclose their experiences. We also need to provide psychological support for victims, including counselling and other mental health services.

Findings show that solutions for supporting rape-related pregnancies and for increasing the reporting of such pregnancies involve creating a system for children to report with confidence, creating sensitisation campaigns in communities, and developing training programmes for adults working with children. The findings in this work are in line with those of Chiyota (2020) who reported that the deterrent effect of reporting mechanisms must lie with their accessibility and trustworthiness. The accounts of the participants highlight the need for victims to have access to adults that will listen without taking judgments, and give them proper support. The results also underscore the need for education initiatives and awareness-raising campaigns, not only for young people but also for the wider community

(Kanyopa et al, 2024). Adolescents must be aware of their rights, know who to report to when experiencing sexual violence and communities must be made aware about the issue and promote a culture of supporting community members. Teachers or other adults who serve as role models, having sexual violence adolescents first approach them, play a very important role in creating safe space environments (Saruchera & Chidarikire, 2024). Psychological support (counselling and mental health services) also plays a key role in supporting victims to rebuild from what they have been through. The findings for this theme suggest that solutions supporting victims of rape related pregnancies and such that encourage reporting might include having reporting systems in place that are confidential to adolescents, community based sensitisation programmes, adult training and ensuring psychological support is used (Ganga, 2020). The results suggest that multi-level strategies are needed to tackle both the personal, familial, community, and institutional barriers to reporting.

6. Conclusion

This was a qualitative study which examined the experiences of young people who had been whose pregnant as a result of rape, but did not report because of fear of adults in the rural communities of Zimbabwe. The results show that rape related pregnancies stem from sexual violence by known perpetrators and the unprotectedness of adolescents in circumstances where they did not have protective environments. Often, the barriers to reporting involve fear of blame, stigmatisation, retribution and not trusting adults, or formal reporting systems. Rape-related pregnancy and non-reporting have a telling impact on the lives of the victims such as dropouts in school, psychological pain and emotional disturbance and social isolation. Potential solutions for supporting victims and facilitating reports involve having adolescent-friendly and confidential reporting systems, community-based sensitisation initiatives, adult victim support and training, and psychological support. Ecological Systems Theory offers a useful lens into the various context levels of influences on reporting and support for rape-related pregnancy. The study is a worthwhile addition to the body of literature on adolescent pregnancy, sexual violence in Zimbabwe and can inform policy and practice.

7. Recommendations

7.1 Recommendations for Learners

Adolescents should be educated about their rights and the reporting mechanisms available to them, empowering them to disclose experiences of sexual violence. More so, peer support groups should be established in schools to provide emotional support and practical advice for victims of sexual violence. Lastly, adolescents should be encouraged to identify trusted adults with whom they can share their experiences and seek support.

7.2 Recommendations for Teachers

Teachers should be trained to recognise the signs of sexual violence and to respond appropriately, including providing support and referrals for victims. More so, schools should develop clear policies on the treatment of victims of sexual violence, including provisions for confidentiality and support. Lastly, teachers should be encouraged to serve as trusted adults for learners, creating safe and supportive environments in which adolescents feel able to disclose their experiences.

7.3 Recommendations for Parents

Parents should be encouraged to maintain open and trusting relationships with their children, creating conditions in which adolescents feel safe to disclose experiences of sexual violence. On the other hand, parents should be educated about the signs of sexual violence and how to respond appropriately if their child discloses such experiences. Lastly, parents should be supported to respond to their children's disclosures with empathy and support, rather than blame or punishment.

7.4 Recommendations for the Ministry of Primary and Secondary Education of Primary and Secondary Education

The Ministry of Primary and Secondary Education should develop and implement child-friendly reporting mechanisms for sexual violence, ensuring that adolescents have access to confidential and trusted reporting channels. Additionally, the Ministry of Primary and Secondary Education should invest in community-based sensitisation programmes that address the stigma associated with sexual violence and encourage reporting. Lastly, the Ministry of Primary and Secondary Education should develop comprehensive training programmes for teachers and other adults who work with children, equipping them with the skills to recognise and respond to sexual violence.

7.5 Recommendations for Counsellors

Counsellors should provide psychological support for victims of sexual violence, including individual and group counselling. In addition, counsellors should work with schools and communities to create supportive environments for victims and to reduce stigma. Lastly, Counsellors should advocate for the rights of victims and the provision of appropriate support services.

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