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Peer counselling as an intervention strategy to mitigate adolescent learners' pregnancies in rural primary schools in the Matabeleland North region of Zimbabwe

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Abstract - The research gap highlights a lack of empirical evidence on the effectiveness of peer counselling specifically tailored to address adolescent pregnancies in the context of rural primary schools in Matabeleland North, Zimbabwe. This study investigates peer counselling as an intervention strategy to mitigate the incidence of adolescent pregnancies among primary school learners in the rural Matabeleland North region of Zimbabwe. It employed a qualitative approach utilising a case study research design. Fifteen participants were purposively selected from three rural primary schools They were selected based on pertinent criteria, including gender representation, specialised expertise in adolescent health, geographical diversity, and educational backgrounds. They were two teachers (one male and one female), six learners (three boys and three girls), two counsellors (one male and one female), two parents (one male and one female), a member of parliament, a village head, a representative from the Ministry of Primary and Secondary Education, and a nurse. Two focus group discussions were used for data collection, one engaged with learners and the other involved adult stakeholders, including educators, counsellors, parents, and community leaders. Data were analysed through thematic analysis. The findings revealed that primary school learners relied on peer counselling as a crucial source of information, mitigating pregnancies regarding sexual health and contraceptive options. They highlighted the perceived accessibility and relatability of peer counsellors compared to traditional adult figures. This study advocates for incorporating structured peer counselling programs within the school curricula in Zimbabwe, specifically tailored to enhance adolescents' sexual health literacy and decision-making skills. It concludes that these initiatives should be culturally responsive and integrated within the socio-economic fabric of the community, thereby ensuring the sustainability and relevance of peer counselling interventions.

Keywords: Adolescent learners' pregnancies, Peer counselling, Primary school learners, Sexual education, Sexual health

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I. INTRODUCTION

¬HE pervasive issue of adolescent pregnancy within the rural precincts of Zimbabwe, particularly in Matabeleland North, necessitates an exhaustive exploration of the contributory dynamics and potential ameliorative strategies (Heymans et al., 2025). The adolescent learners in this article are aged between 10 and 11 and are at the primary school level. This research endeavour, to interrogate the multifaceted role of peer counselling as a mechanism to mitigate early pregnancies among vulnerable primary school learners in this region, characterised by socio-economic challenges and entrenched cultural practices. Recent statistics elucidate a pressing public health concern; approximately 6,000 adolescents from Matabeleland South found themselves pregnant within the confines of the preceding year, as per (Dube, 2020). The dire ramifications of such figures are most acutely felt in Beitbridge and Insiza districts, which bear the brunt of these incidents. Beitbridge has emerged as a focal point of adolescent pregnancy and early marriage, registering an alarming 31,248 cases of adolescent marriages, which substantially contribute to the societal dilemma (Chidakwa, 2023). The scope of this issue extends to a staggering 85,372 documented instances of female teenage marriages across the province, signalling an urgent imperative for intervention. As Chidarikire and Chikwati (2024) highlighted, Matabeleland North province recorded 5,700 instances of adolescents aged between 10 and 19 who required antenatal care in 2024.

However, we are currently exploring the role of peer counselling in dealing with early pregnancies among adolescent learners aged between 10 and 11 who are at the primary school level. The above figures underscore a broader narrative wherein socio-cultural norms and economic constraints converge to drive young girls into precocious parenthood. Notably, rural hotspots such as Chasvingo, Dite, Tongwe, and Lutumba in Beitbridge reveal alarming school drop-out rates among girls, many of whom engage in risky cross-border activities and nocturnal social gatherings that exacerbate their vulnerability to unplanned pregnancies (Dube, 2020). The prevalence of early child marriages in Insiza further exemplifies the intersection of cultural beliefs and limited educational access in perpetuating adolescent pregnancies. Areas such as Alpha in Ward 13 and Mpalawani in Ward 21 are notorious for their high rates of early marriages, compounded by the economic allure of artisanal mining activities that dominate the landscape (Saruchera & Chidarikire, 2024). These factors not only curtail academic opportunities for young girls but also entrench harmful practices that underscore gender disparity and health risks. The alarming statistics from Chikuvadze (2023) reveal that over 100,000 individuals out of approximately 750,000 in Matabeleland South are living with HIV, with girls aged 15 to 24 disproportionately affected, experiencing infection rates six times higher than their male counterparts. Adhena and Fikre (2023) illuminate the stark reality of females in the age bracket of 15-19 years, where the incidence rate for females stands at 4%, in stark contrast to their male counterparts at 0.6%. Such disparities necessitate a comprehensive health and educational framework to empower young females within these communities. Moreover, the findings from the Chipfakacha (2019) reveal that rural girls are twice as likely to marry before the age of 18 compared to their urban peers, indicating a multifaceted crisis that intertwines education, health, and socio-cultural factors. Among a sample of 99 girls aged 15 to 19 from Matabeleland South, an alarming 25.7% reported having experienced pregnancy, underscoring the urgency for effective interventions such as peer counselling to foster a supportive environment conducive to informed decision-making (Dube, 2020). Considering this context, this study aims to investigate the effectiveness of peer counselling programs in addressing the urgent concern of early pregnancies among Zimbabwe's rural primary school learners, positing that such initiatives can serve as pivotal mechanisms for change in a historically marginalised demographic.

II. LITERATURE REVIEW

The phenomenon of adolescent pregnancies remains a pressing issue globally, with significant variations in prevalence and intervention strategies across different regions (Girls Not Brides, 2019). In rural Zimbabwe, particularly in the Matabeleland North region, the incidence of adolescent pregnancies is alarmingly high, necessitating targeted interventions such as peer counselling. This study aims to explore the significance of peer counselling in mitigating adolescent pregnancies among primary school learners. This topic has garnered attention in various international contexts, including America, Britain, and South Africa. In the United States, peer counselling has been recognised as an effective strategy for addressing adolescent sexual health issues. Research indicates that peer-led programs can significantly reduce rates of teenage pregnancies by fostering open communication about sexual health and providing relatable role models for young people (Adhen & Fkre, 2023). These programs often incorporate comprehensive sexual education, which has been shown to empower adolescents with the knowledge necessary to make informed decisions regarding their sexual health (Cotza, 2023; Kanyopa & Mokhele-Makgalwa, 2024).

In contrast, Zimbabwe's approach to peer counselling is still evolving, with limited empirical evidence supporting its effectiveness in rural settings (Chidarikire, 2017). This study seeks to fill this gap by providing insights into how peer counselling can be tailored to rural Zimbabwean cultural and social dynamics. Similarly, in Britain, peer education initiatives have been implemented to combat rising rates of teenage pregnancies. The UK has seen a decline in adolescent pregnancies due to comprehensive sexual health education and the involvement of peers in delivering these messages (Dube, 2020). However, Zimbabwean socio-economic and cultural contexts differ markedly from those in Britain, where access to resources and healthcare is more robust. This disparity highlights the need for localised research that considers the unique challenges faced by rural Zimbabwean adolescents, particularly in the Matabeleland North region. In South Africa, peer counselling has also been employed as a strategy to address adolescent pregnancies, with studies indicating that peer-led interventions can lead to increased contraceptive use and reduced pregnancy rates among adolescents (Chitiyo, 2021). However, the effectiveness of these programs is often contingent upon the sociocultural acceptance of such initiatives, which can vary significantly within different communities. This study aims to investigate how peer counselling can be effectively integrated into the educational framework of rural Zimbabwe, considering local cultural norms and values that may influence its acceptance and success. Despite the wealth of research on peer counselling in various contexts, there remains a notable gap in the literature regarding its application in rural Zimbabwe, particularly among primary school learners. This study intends to address this gap by exploring the challenges and opportunities associated with implementing peer counselling programs in the Matabeleland North region.

III. OBJECTIVE OF THE STUDY

This study explores peer counselling as an intervention strategy to mitigate adolescent learners' pregnancies in rural primary schools in the Matabeleland North region of Zimbabwe. It determined the challenges of peer counselling programmes in addressing the adolescent learners' pregnancies in the Matabeleland North region of Zimbabwe.

IV. THEORETICAL FRAMEWORK

Social learning theory

Social learning theory, articulated by Albert Bandura in the 1960s, posits that individuals acquire new behaviours and information by observing others within a social context, thereby emphasising the role of imitation, modelling, and observational learning in behavioural development (Chidarikire & Chikwati, 2024). This theory highlights the interplay between cognitive, behavioural, and environmental influences, suggesting that learning is a social process markedly shaped by social interactions and the surrounding environment (Chideme-Munodawafa et al, 2020). In examining the significance of peer counselling in mitigating the incidence of adolescent pregnancies among primary school learners in the Matabeleland North region of rural Zimbabwe, it is prudent to apply the tenets of Social Learning Theory. The first key component, observational learning, suggests that adolescents are likely to emulate the behaviours and attitudes demonstrated by their peers. Through peer counselling initiatives, older or more experienced learners can model positive behaviours, such as sexual health literacy and responsible decision-making, thus fostering a learning culture among their younger counterparts (Chikuvadze, 2023). The second tenet, reciprocal determinism, maintains that personal, behavioural, and environmental factors are interdependent. In this context, the personal reflections and motivations of the counseled learners may lead to enhanced self-efficacy in resisting peer pressure related to early sexual activity. Concurrently, the environmental context of rural Zimbabwe, characterised by prevalent cultural norms and attitudes towards adolescent sexuality, can be positively reshaped through the peer counselors' influence, creating a supportive milieu for learners to discuss sexual health openly (Chinkondenji, 2022; Kanyopa & Mokhele-Makgalwa, 2024).

Relevance to this study

Moreover, the idea of reinforcement within Social Learning Theory underscores the importance of positive social reinforcement in behaviour change. As primary school learners engage with peer counsellors and witness their peers making informed choices regarding sexual health, the positive feedback and support from their social circles may further reinforce these desirable behaviours (Chiyota & Marishane, 2020). Encouraging a supportive environment through peer counselling heightens adolescents' awareness of the consequences of early pregnancies and equips them with the necessary skills to navigate reallife challenges and pressures (Chipfakacha, 2019). However, this theory offers a comprehensive framework through which the dynamics of peer counselling can be understood in the context of reducing adolescent pregnancies in Matabeleland North. Through fostering observational learning, reinforcing positive behaviours, and leveraging reciprocal determinism, peer counselling emerges as a vital intervention, cultivating resilience and informed decision-making in primary school learners grappling with the complexities of adolescent sexuality. The implications of this theoretical lens extend to policymaking, educational curricula, and community engagement, advocating for the integration of peer counselling programs that are attuned to the socio-cultural realities of rural Zimbabwe.

V. METHODS

Research approach and paradigm

This qualitative study endeavours to elucidate the significance of

peer counselling in mitigating the incidence of adolescent pregnancies among primary school learners within the rural context of the Matabeleland North region of Zimbabwe. This study employed an interpretive paradigm. A qualitative research approach allowed an indepth exploration of participants' lived experiences, perspectives, and social contexts related to the researched issue. The interpretive paradigm complemented the study by acknowledging that reality is socially constructed and best understood through the meanings individuals assign to their experiences. This approach enables researchers to capture the complexities and nuances of human behavior, emotions, and institutional dynamics.

Research design

This study is anchored in a case study approach, meticulously selected to facilitate an in-depth exploration of the phenomenon within its authentic context (Dube, 2020; Kanyopa & Hlalele, 2023). A case study gives voice to the learners, peer counsellors, teachers, and community members to evaluate the effectiveness, limitations, and reception of peer counselling. Further, this design allowed researchers to capture participants' experiences, attitudes, and perceptions on the researched issue.

Participants

Fifteen participants were purposively selected in this study. They were chosen based on salient criteria encompassing gender representation, expertise related to adolescent health, geographical location, and varying levels of education. This intentional selection strategy aimed to enrich the data collection by drawing on several perspectives. The composition of participants included two teachers (one male and one female), six learners (three boys and three girls) aged 10 to 11, two counsellors (one male and one female), two parents (one male and one female), one member of parliament, one village head, a representative from the Ministry of Primary and Secondary Education, and one nurse. This diverse participant pool facilitated multifaceted insights into the role and effectiveness of peer counselling in addressing adolescent pregnancies, allowing for a holistic understanding of the issue at hand (Adhen & Fikre, 2023).

Research site

The research was conducted at a primary council school in Ward 8 of Matebeleland North, strategically positioned at the heart of the locality, ensuring ease of access for all participants involved. The selection of this site emerged from a collaborative consensus between the researchers and the participants, reflecting a shared commitment to the study's objectives. Notably, the school benefits from an uninterrupted solar power supply, which proved essential for operating the projector and various electronic devices utilised throughout the research process. Additionally, the availability of clean tap and borehole water, coupled with well-tiled floors, underscores the school's commitment to maintaining a conducive learning environment. The school authorities graciously granted unrestricted access to classrooms and other facilities, fostering an atmosphere of cooperation that enriched the research experience.

Data collection tools

Data collection was executed through two separate focus group discussions: one consisting of young learners, and the other engaging adult stakeholders, including educators, counsellors, parents, and community leaders. This study used the following open-ended questions to encourage in-depth responses and facilitate a comprehensive understanding of the participants' experiences and perspectives: How effective is peer counselling as an intervention strategy in mitigating adolescent pregnancies among learners in rural schools? And what challenges do stakeholders face in implementing peer counselling programs aimed at reducing adolescent pregnancies in these settings? This dual structure was intentionally designed to foster an environment where young participants could freely articulate their thoughts and experiences, with minimal fear of judgment or reprisal from adult figures (Chidakwa & Hlalele, 2021). The focus group discussions were semi-structured, enabling a flexible approach to

responses while ensuring that critical themes pertinent to the study were thoroughly explored and addressed. Focus group discussions allow diverse perspectives and dynamic interactions, leading to richer insights than individual interviews (Dube, 2020).

Data analysis

The qualitative data generated from these discussions underwent thematic analysis, employing the systematic framework established by Clarke and Braun (2006). This process involves several key steps: familiarisation with the data, generating initial codes, thematic searching, reviewing potential themes, defining and naming themes, and finally, producing the report. In qualitative research, validity and trustworthiness are vital for ensuring credible findings (Saruchera & Chidarikire, 2024). Credibility is established through member checking, where participants review the results to confirm accuracy (Kanyopa & Mokhele-Makgalwa, 2024). Dependability is achieved by documenting the research process meticulously, allowing for consistent replication (Dube, 2020). Confirmability ensures interpretations are based on data rather than researcher bias, often supported by peer debriefing (Cotza, 2023). Reflexivity plays a crucial role, as researchers reflect on their potential biases throughout the study (Chitiyo, 2021). Triangulation, or using multiple data sources, strengthens the reliability of the findings (Chipfakacha, 2019). Finally, thick descriptions enrich the data, offering deeper insights into the participants' experiences and enhancing overall trustworthiness (Adhena & Fikre, 2023).

Ethical considerations

Ethical considerations include informed consent and confidentiality. Participants were informed about the study's purpose and that they could withdraw from the study at any stage (Chideme-Munodawafa et al., 2020). The researchers used Great Zimbabwe University ethical clearance permission number 234/2025, which was offered to Dr. Munyaradzi Chidarikire where he worked as a senior lecturer. In addition, the study was approved by the Ministry of Primary and Secondary Education in Zimbabwe and the District Department of Education. Through the school development committee (SDC) and Management, the school allowed the researchers to conduct their study. All the participants gave oral and verbal consent to participate in this study. The researchers secured ethical clearance through Great Zimbabwe University in Zimbabwe, specifically under permission number 234/2025, granted to the first author of this article, a senior lecturer at this University. This ethical endorsement was pivotal in ensuring the integrity and compliance of the research with established academic and ethical guidelines (Chidakwa, 2023). Moreover, the study received formal approval from the Ministry of Primary and Secondary Education in Zimbabwe, alongside authorisation from the District Department of Education. Such endorsements underscore the research's significance within the country's educational framework (Chidarikire et al, 2024). With the support of the SDC and the management, the school involved in the study facilitated the researchers' conducting the study. This collaboration was instrumental in fostering an environment conducive to academic inquiry (Chitiyo, 2021). Furthermore, the integrity of the research process was upheld as all participants provided informed consent, both orally and in written form, affirming their willingness to engage in the study (Adhena & Fikre, 2023).

VI. RESULTS

Biographic results *Table 1: Biographic results*

Participants	Age	Gender	Work Experie nce	Grade level	Function
Participant 1	45	Male	5 years	N/A	Member of Parliament
Participant 2 Participant 3	11 48	Female Male	N/A 7 years	7 N/A	Student Village Head
Participant 4	39	Male	10 Years	N/A	Teacher
Participant 5	15	Female	N/A	7	Learner

Participant 6	45	Male	8 years	N/A	Ministry of Primary and Secondary Education Official
Participant 7	39	Female	7 Years	N/A	Teacher
Participant 8	34	Female	6 Years	N/A	Nurse
Participant 9		Male	8 Years	N/A	Medical adviser
Participant 10	14	Female	N/A	6	Learner
Participant 11	37	Female	9 Years	N/A	School Matron
Participant 12	48	Male	8 Years	N/A	Counsellor
Participant 13	44	Female	10	N/A	Health Officer
			years		
Participant 14	38	Female	7 Years	N/A	Teacher
Participant 15	40	Male	6 Years	N/A	Parent

Peer counselling as an intervention strategy in mitigating learners' pregnancies

This study revealed that peer counselling has emerged as an intervention strategy to mitigate learners' pregnancies in rural primary schools. Vital tool within various communities, offering support and guidance through shared experiences. This theme explores the opportunities available to enhance the effectiveness of peer counselling programs. It examines the potential for developing training initiatives, improving communication techniques, and integrating technology to facilitate peer connections. Additionally, the theme highlights the importance of cultivating a supportive environment that encourages open dialogue and the sharing of resources. Through identifying and leveraging these opportunities, peer counselling can become an even more powerful resource for individuals seeking help and guidance.

Firstly, female learner commented that,

I believe that having more workshops and interactive sessions would help us better understand the importance of peer counselling. Also, involving parents in these sessions could create a more supportive environment for us to discuss our issues (Participant 2).

Secondly, the village head stated that,

"Community involvement is crucial. If we can engage local leaders and traditional healers in promoting these programs, it would help reduce the stigma around discussing adolescent pregnancies. We must create a culture where these conversations are normalised" (Participant 3).

Thirdly, a member of parliament explained that,

Legislative support can play a significant role in enhancing peer counselling programs. Through advocating for policies that allocate funding and resources to these initiatives, we can ensure that schools have the necessary tools to address adolescent pregnancies effectively (Participant 1).

Fourthly, the ministry of primary and secondary education official held that.

"We are exploring partnerships with Non-Governmental Organisations (NGOs) to provide training for peer counsellors. Through equipping them with the right skills and resources, we can enhance the effectiveness of these programs. Additionally, integrating sexual health education into the curriculum can complement peer counselling efforts" (Participant 6).

Lastly, the nurse further expounds that,

"Health professionals can collaborate with schools to provide workshops on reproductive health. Through offering medical insights and support, we can help demystify the issues surrounding adolescent pregnancies and empower learners to seek help through peer counselling" (Participant 8).

From the above verbatim statements by participants, the following are the discussion sections: The discussions reveal a multifaceted opportunity for enhancing the effectiveness of peer counselling programs to address adolescent pregnancies. Stakeholders contributed valuable insights that underscore the need for a comprehensive approach. A recurring theme among participants was the necessity for increased workshops and interactive sessions. A female learner articulated that such initiatives would deepen understanding of peer counselling and facilitate parental involvement, creating a supportive atmosphere conducive to discussing sensitive issues (Chidarikire, 2017; Kanyopa & Hlalele, 2023). Additionally, the Village Head emphasised the critical role of community involvement, suggesting that engaging

local leaders and traditional healers could help destigmatise discussions surrounding adolescent pregnancies. This perspective aligns with the community's cultural dynamics, suggesting that normalisation of these conversations is essential.

Furthermore, the Member of Parliament highlighted the importance of legislative support in enhancing peer counselling initiatives. Through advocating for policies that secure funding and resources, it becomes possible to equip schools with the necessary tools to address the complexities surrounding adolescent experiences effectively (Multiple Cluster Indicator Survey, 2019). The Ministry of Primary and Secondary Education Official pointed to exploring partnerships with NGOs to provide essential training for peer counsellors. This initiative aims to bolster the effectiveness of peer counselling through skill development while advocating for integrating sexual health education into school curricula (Heymans et al., 2025). Lastly, the contributions of health professionals, as noted by the Nurse, are vital; their collaboration with schools to facilitate workshops on reproductive health could dispel misconceptions surrounding adolescent pregnancies, empowering learners to seek help through peer counselling (Chidakwa, 2023).

Stakeholders' challenges in peer counselling programmes for mitigating learners' pregnancies in rural schools

This study indicated that peer counselling programmes could be a critical barrier that limits their effectiveness in educational settings. Participants, including a female teacher, a male learner, a counsellor, and a parent, provided insights into these obstacles, revealing issues such as inadequate training, skepticism regarding the legitimacy of peer counsellors, resource constraints, and communication gaps between schools and families. Through integrating Albert Bandura's Social Learning Theory, which emphasises the importance of observational learning and social context in behaviour development, the discussion can shed light on potential strategies to enhance peer counselling initiatives within schools. In response to the research question on challenges, the following are the views of the participants:

The female teacher stated that,

"One of the primary concerns we face in peer counselling programs is the lack of adequate training for teachers and learners. Many educators and peer counsellors are simply not equipped to handle sensitive issues, such as adolescent pregnancies, which are crucial to address. This inadequacy is further compounded by the stigma surrounding discussions of sexual health. As a result, learners often hesitate to engage fully in these programs because they feel uncomfortable" (Participant 7).

In addition, a female learner observed this.

"I believe many of us do not take peer counselling seriously. We often view peer counsellors more as friends just offering advice, rather than as credible figures who can provide real support. This perception diminishes the programme's effectiveness because learners do not see the value in what counsellors try to do" (Participant 10).

Furthermore, one counsellor was of the view that,

"Unfortunately, our programs often struggle with limited resources and a lack of administrative support, which leads to inadequate materials for our counselling efforts. Additionally, the high turnover rates among trained counsellors disrupt continuity and trust within the program, making it hard to establish a supportive environment for learners" (Participant 12).

Lastly, the parent noted that,

There is a significant communication gap between schools and families concerning available peer counselling resources. Many parents are just not aware of these programs. This lack of awareness, coupled with cultural beliefs that discourage open discussions about sexual health, really impairs the effectiveness of the counselling initiatives in place (Participant 15).

The findings from the participants reveal several interconnected challenges affecting the success of peer counselling programs. First and foremost, the female teacher highlighted a lack of adequate training for both teachers and learners as a primary concern, indicating that many educators and peer counsellors are insufficiently equipped to address sensitive issues such as adolescent pregnancies (Chidarikire, 2017; Kanyopa & Mokhele-Makgalwa, 2024). This inadequacy is compounded by the stigma surrounding discussions of sexual health, making learners

hesitant to engage fully in these programs. The female learner reinforced this point by expressing that many of us do not take peer counselling seriously, perceiving peer counsellors as friends offering advice rather than credible support figures (Dube, 2020). The counsellor added that programs often struggle with limited resources and administrative support, resulting in inadequate materials and high turnover rates among trained counsellors, which disrupts continuity and trust (Chitiyo, 2021). Finally, the parent pointed out a significant communication gap between schools and families, indicating that many parents are unaware of the available peer counselling resources. This lack of awareness, along with cultural beliefs that discourage open discussions about sexual health, further impairs the effectiveness of these programs (Dube, 2020).

VII. DISCUSSION

The challenges identified in the findings align closely with the principles of Bandura's Social Learning Theory, which asserts that learning occurs within a social context and is influenced by the behaviours and attitudes of role models (Cotza, 2023). The lack of adequate training for teachers and learners directly impacts their ability to serve as effective role models in peer counselling situations (Saruchera & Chidarikire, 2024). For instance, when educators lack the skills required to discuss sensitive topics, they cannot demonstrate appropriate communication behaviours for learners to emulate. Schools could benefit from structured professional development workshops that focus on enhancing counselling skills, thereby fostering an environment where learners understand the importance and legitimacy of peer counselling (Chikondenji, 2022). Moreover, the perception articulated by the female learner that many peers view counsellors as merely friends rather than authoritative figures illustrate a fundamental challenge in establishing trust and credibility (Chipfakacha, 2019). To combat this, educational initiatives could elevate the status of peer counsellors through recognition programs or peer-led informational campaigns that highlight the value of their contributions and expertise in addressing issues like adolescent pregnancies.

The counsellor's remarks regarding resource limitations further underscore the need for a sustainable operational framework (Chiyota & Marishane, 2020). Bandura's theory emphasises the reciprocal nature of learning, suggesting that the lack of resources can inhibit the effective modelling of supportive behaviours. Schools might explore partnerships with community organisations to secure additional materials and training, which could enhance the infrastructure of peer counselling programs (Girls Not Brides, 2019). Finally, the communication gaps noted by the parent indicate a critical area for intervention. Through fostering active engagement with families through informational sessions and community workshops on sexual health, schools can promote dialogue that informs parents and empowers them to support their children's involvement in counselling programs (Dube, 2020; Kanyopa & Hlalele, 2023).

The following findings are on enhancing peer counselling in mitigating early pregnancies among rural primary school learners. The insights gained align closely with the principles of Albert Bandura's Social Learning Theory, which posits that individuals learn behaviours and attitudes through observation, imitation, and modelling within a social context (Chidarikire & Chikwati, 2024). The call for more workshops and interactive sessions resonates strongly with Bandura's assertion that learners benefit from environments where they can observe effective peer interactions (Adhen & Fikre, 2023). Through actively engaging in these sessions, female learners absorb essential information and witness positive behavioural models. Including parents in these educational environments can enhance this effect, creating a supportive network that encourages open dialogue about adolescent issues, thus fostering a culture of learning that reinforces the value of peer counselling (Cotza, 2023). As stressed by the Village Head, community involvement is integral to creating a conducive environment for learning and discussion.

Bandura emphasises the importance of social models and their influence; when community leaders and traditional healers participate in normalising conversations about adolescent pregnancies, they provide observable behaviours for youth to emulate, thereby reducing stigma (Chikuvadze, 2023). This engagement helps to redefine social norms surrounding such discussions, promoting greater acceptance and participation by adolescents seeking support. The emphasis on legislative support reflects the environmental factors Bandura recognised as crucial in shaping learning outcomes (Dube, 2020). Governmental advocacy for policies that fund peer counselling can significantly enhance school resources, providing a structured framework where adolescents can learn and seek guidance (Chidarikire et al., 2024). This structural support elevates the legitimacy of peer counselling programs and signals to learners the importance of these initiatives in addressing their needs. As mentioned by the Ministry Official, training for peer counselors directly interfaces with Bandura's concept of self-efficacy, the belief in one's ability to succeed in specific situations (Chitiyo, 2021). Suppose teachers equip peer counsellors with the right skills and knowledge. In that case, this enhances their confidence and effectiveness in guiding their peers, fostering a more supportive and informed community (Chidarikire et al., 2024). Finally, the involvement of health professionals, as highlighted by the Nurse, reinforces the educational component of Bandura's theory. Workshops led by medical experts serve to reduce misconceptions about reproductive health and adolescent pregnancies, providing learners with accurate information they can trust (Chiyota & Marishane, 2020). This collaboration empowers learners to seek support and helps demystify adolescent health issues, encouraging open dialogue and peer support.

VIII. DISCUSSION

The investigation into the challenges faced by peer counselling programs in the Matabeleland North region of Zimbabwe highlights several critical barriers that hinder effective interventions in addressing adolescent pregnancies among primary school learners. Key challenges include a lack of awareness regarding the benefits of peer counselling, inadequate training for counsellors, cultural stigmas associated with teenage pregnancy, and insufficient financial and material resources. These factors create an environment where the potential of peer counselling as a supportive mechanism is not fully realised, leaving many adolescents without the guidance and resources they need. Conversely, exploring opportunities reveals a pathway towards enhancing the effectiveness of these programs. By fostering comprehensive training initiatives, engaging community stakeholders, and utilising technology to facilitate connections, peer counselling can become a robust strategy for addressing adolescent pregnancies. Stakeholders need to acknowledge these challenges and opportunities to promote healthier outcomes for youth in the region.

IX. RECOMMENDATIONS

Several recommendations are proposed for key stakeholders to address the challenges identified and leverage the available opportunities. The Ministry of Health should develop and implement targeted health education programs emphasising adolescent reproductive health and provide training for health service providers to support peer counselling initiatives. Further, the Ministry of Primary and Secondary Education is encouraged to launch awareness campaigns within schools that promote the vital role of peer counselling in preventing adolescent pregnancies, ensuring that sexual education is integrated into the curriculum. Again, Parents should be engaged through workshops that stress the importance of open communication regarding sexual health, thus fostering an environment where children feel supported. Also, NGOs can collaborate with peer counselling programs to provide necessary resources and community-based interventions that raise awareness of adolescent pregnancy.

Furthermore, learners should be empowered to engage in peer counselling actively, equipping them with training and resources to share knowledge within their communities.

On the other hand, Village heads play a crucial role in championing initiatives that promote peer counselling, helping to create discussion spaces that destigmatise adolescent pregnancies. Additionally, law enforcement agencies are called to ensure that protective measures for adolescents are upheld, safeguarding spaces where youth can seek guidance. More so, Members of Parliament should advocate for increased funding for educational programs addressing adolescent sexual health and supporting peer counselling. Lastly, researchers are encouraged to continue studying the impact of peer counselling on adolescent pregnancies and identify best practices to inform policy changes and program improvements.

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XII. CONFLICTS OF INTEREST

There are no conflicts of interest in this study.

REFERENCES

- Adhena, G., & Fikre, A. (2023). Teenage pregnancy matters in refugee setup: early pregnancy among adolescent girls in Kule refugee camp, Gambella, Ethiopia. *BMC Pregnancy and Childbirth*, 2(3), 23-45. https://doi.org/10.1186/s12884-023-06178-0
- Chidakwa, N. (2023). Drug abuse: A hindrance to optimal functioning of the rural learner's cognitive capabilities. *Research in Social Sciences and Technology, 8*(3), 155-175. https://doi.org/10.46303/ressat.2023.25
- Chidakwa, N., & Hlalele, D. J. (2021). The paradox of complex systems: Managing multiple vulnerabilities in Zimbabwean rural learning ecologies. *Vulnerable Child and Youth Studies*, 5(2), 1-13. https://doi.org/10.1080/17450128.2021.19253839
- Chidarikire, M. (2017). A peer counselling strategy for alleviating drug abuse in Zimbabwean rural learning ecologies (Unpublished PhD thesis), Bloemfontein: University of the Free State, South Africa.
- Chidarikire, M., & Chikwati, T. (2024). Unravelling causes and mitigating suicidal tendencies in male educators in Zimbabwe's rural regions: A comprehensive analysis. *Asian Journal of Education and Social Studies*, 50(5), 293-303. https://doi.org/10.9734/ajess/2024/v50i51363
- Chidarikire, M., Chidarikire, J. N., & Ingwani, V. (2024). Unravelling ramifications of female exclusion as school heads on advancing women in leadership roles: Case of Masvingo urban schools, Zimbabwe. *International Journal of Research*, 11(6), 202–222. https://doi.org/10.5281/zenodo.1252488211
- Chideme-Munodawafa, A., Manyana, S. B., & Collins, A. E. (2020). HIV/AIDS in rural communities. *Journal of Education*, 2 (2), 1–12. https://doi.org/10.53555/hsn.v1i8.78012
- Chikuvadze, P. (2023). Gender-related policy guidelines' impact on rural female learners' participation in sciences at advanced level. *Futurity Education*, 3(1), 150–165. https://doi.org/10.57125/FED/2022.10.11.1113
- Chinkondenji, P. (2022). Schoolgirl pregnancy, drop-out or pushout? an Ubuntucentric re-construction of the education for learner mothers in Malawi. *Gender and Education*, 34, 738-753. https://doi.org/10.1080/09540253.2022.206192214
- Chipfakacha, R. (2019). Education and the Development Agenda: An Analysis of Factors Influencing Primary School Learners' Outcomes in Hwange and Binga Districts, Zimbabwe. Africanus: Journal of

- Development Studies, 4(9), 1-26. https://doi.org/10.25159/2663-6522/652615
- Chitiyo, A. (2021). Special and inclusive education in Southern Africa. *Journal of Special Education Preparation*, 1(1), 55-66. https://doi.org/10.33043/JOSEP.1.1.55-66
- Chiyota, N., & Marishane, R. N. (2020). Re-entry Policy Implementation challenges and support systems for teenage mothers in Zambian primary schools. *The Education Systems of Africa*, 2, 1–14. https://doi.org/10.1007/978-3-030-43042-9_44-117
- Cotza, V. (2023). Rethinking education: A case study in the field of popular and second-chance schools. In Conference Name: 15th International Conference on Education and New Learning Technologies, (pp. 6391–6401). Palm-Spain. https://doi.org/10.21125/edulearn.2023.1690
- Dube, B. (2020). Rural online learning in the context of COVID-19 in South Africa: Evoking an inclusive education approach. *Multidisciplinary Journal of Educational Research*, 10(3), 135-157. https://doi.org/10.17583/remie.2020.560722
- Girls Not Brides. (2019). Addressing child marriage through education: What the evidence shows. Retrieved from https://www.girlsnotbrides.org/learning-resources/resource-centre/addressing-child-marriage-education-evidence-shows/#resource-downloads
- Heymans, Y., Hornsby, R., & Pool, J. (2025). Enhancing emotional self-regulation through peer counselling: Insights from health science students. *African Journal of Health Professions Education*, 17(2), 1860-1878. https://doi.org/10.7196/AJHPE.2025.v17i2.1878
- Kanyopa, T. J., & Hlalele, D. J. (2023). The Understanding of Learner Integration in a Selected Ex-Model C School. *e-BANGI Journal*, 20(4). https://doi.org/10.17576/ebangi.2023.2004.20
- Kanyopa, T. J., & Mokhele-Makgalwa, M. (2024). The Understanding of Psychological Challenges Facing South African School Learners In the 21st Century: A Visual Explanatory Approach. e-BANGI Journal, 21(2), 270-284. https://doi.org/10.17576/ebangi.2024.2102.23
- Saruchera, M. & Chidarikire, M. (2024). Promoting Inclusive Policies to Support Pregnant Grade 6 Adolescent Learners in Zimbabwe: Implications and Solutions. *Educational Administration: Theory and Practice*, 30(11), 578–592. https://doi.org/10.53555/kuey.v30i11.8237

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