

News

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MCC News

An e-newsletter about male circumcision for HIV prevention in Kenya

In this issue:

Clergyman Preaches
Benefits of Male
Circumcision

Rapid Results Initiative Surpasses Goal

Male Circumcision in the News

Resources



Pastor Joel Odondi addresses the crowd during the launch of the 2010 Rapid Results Initiative. Photo by Beatrice Oyugi/FHI

Clergyman preaches benefits of male circumcision

Joel Odondi was a college student 13 years ago when he first heard about the benefits of male circumcision. At the time, getting "the cut" was unheard of in Luo Nyanza.

"Some of my college mates from my home of origin threatened to disown me if I got circumcised," he remembers.

After moving to Kisumu in 2005 to work as a youth pastor at AIC Arina Church,

Pastor Odondi learned much more about the procedure. The randomised controlled trial of male circumcision for HIV prevention was under way at the Universities of Nairobi, Illinois, and Manitoba (UNIM) Research and Training Centre in Kisumu, and male circumcision had become a topic of discussion in Nyanza Province.

In September 2008, Pastor Odondi attended a public meeting where he heard Kenya's prime minister, the Hon. Raila Odinga, recommend that his constituents consider male circumcision for HIV prevention. Other speakers at the meeting described the benefits of the procedure and the scientific evidence for its role in HIV prevention.

The pastor was more convinced than ever of the health and hygiene benefits of male circumcision. He was impressed that in addition to reducing men's risk of HIV infection, the procedure also helps protect the female partners of circumcised men from human papillomavirus, which can cause cervical cancer. A few months later, he decided to go for the "cut."

Pastor Odondi says that he made several bookings at the clinic but postponed them because he mistakenly thought the six-week healing period would keep him away from his work for too long.

After his circumcision, Rev. Odondi was surprised to find that he felt little pain and could go right back to work. Three days later, he gave a sermon for the students and staff of two secondary schools in Kisumu.

The pastor says his girlfriend played a big role in convincing him to get circumcised. She also spoke to a friend's wife, who persuaded her husband to go for the "cut."

Ever since Pastor Odondi got circumcised, he has been talking to his congregants, fellow pastors, relatives, and friends about the benefits of the procedure. As a youth pastor, he believes it is his responsibility to help young people make informed choices about protecting their health. "I relay the messages through sermons, youth seminars, and the young adults' fellowship," he said. "We have a membership of 600 people."

Arina AIC Church also has an HIV response task force, which has helped the minister spread the message about male circumcision and HIV prevention.

Pastor Odondi advises men and women that male circumcision does not offer complete protection against HIV and that it reduces—but does not eliminate—a man's chances of becoming infected with the virus. He also emphasises to both men and women that unprotected sex with a circumcised man is not safe sex. He is

committed to sustaining his fight against HIV, and his motto is: "It can be done, must be done. If it is not done, then we are done. Fear fear itself."

Rapid results initiative surpasses goal

The 2010 Rapid Results Initiative (RRI) has already exceeded its goal of reaching 41,000 men and boys in Nyanza Province with voluntary medical male circumcision (VMMC) services over 30 working days.

At least 41,079 men and boys had been circumcised by the 20th day of the initiative.

The RRI is a campaign to increase access to VMMC services and promote their use during the school holidays, when demand for these services tends to increase. Ministries of health (MOH) staff and partner organizations are offering these services at more than 170 health facilities and outreach sites, such as schools and social halls, in 11 districts of Nyanza Province.

All VMMC clients receive comprehensive HIV prevention services, which include the male circumcision procedure, risk-reduction counselling, condoms, screening and treatment for sexually transmitted infections, and the offer of HIV counselling and testing.

During the first RRI in November-December 2009, 36,000 men and boys were circumcised over 30 days.

These rapid results initiatives play a critical role in the VMMC programme's efforts to circumcise 426,500 men and boys in Nyanza by 2013. Doing so would prevent an estimated 900,000 HIV infections among men and women over 20 years.

The Nyanza Provincial Task Force on Male Circumcision will hold a briefing during the second week of January 2011 to share the results of the 2010 RRI.

Male circumcision in the news

Male circumcision in the general population of Kisumu, Kenya: Beliefs about protection, risk behaviors, HIV and STIs *PLoS One*, 18 December 2010

Circumcision may not curb gay HIV transmission Reuters Health, 7 December 2010

Resources

Medical Male Circumcision as HIV Prevention. Follow the Evidence: The Case for Aggressive Scale-up

In this report from the Center for Global Health Policy, leading infectious disease scientists present the case for expanding access to medical male circumcision in countries with low rates of male circumcision, high HIV prevalence, and predominantly heterosexual epidemics. They summarise the evidence about the effectiveness, acceptability, and cost-effectiveness of male circumcision for HIV prevention, highlight recent successes, and call for more funding and rapid action to achieve the greatest possible impact on the HIV epidemic.

Making Medical Male Circumcision Work for Women

This new report documents women's perspectives on male circumcision for HIV prevention. Published by AVAC and the ATHENA Network's Women's HIV Prevention Tracking Project (WHiPT), it is based on interviews and focus group discussions with about 500 women in HIV-affected communities in Kenya, Namibia, South Africa, Swaziland, and Uganda.

The Male Circumcision Consortium (MCC) works with the Government of Kenya and other partners to prevent HIV and save lives by expanding access to safe and voluntary male circumcision services. Family Health International (FHI), EngenderHealth, and the University of Illinois at Chicago, working with the Nyanza Reproductive Health Society, are partners in the Consortium, which is funded by a grant to FHI from the Bill & Melinda Gates Foundation.

Please send questions or comments to Silas Achar at: mccinfo@fhi.org; also, please indicate whether you want to continue receiving this e-newsletter regularly.