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MCC News

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

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Anastasia Agutu speaks to her fellow advocates for voluntary medical male circumcision in Nyanza's Uriri District.

Photo by Silas Achar/FHI 360

Women champion voluntary medical male circumcision

Awuor* hesitated before standing up to speak to the group of about 20 women who had gathered for their regular monthly meeting at the Uriri Market Centre.

She recounted how she had learnt about voluntary medical male circumcision (VMMC) and its benefits for both men and women at one of the group's meetings. Afterwards, she talked to her husband about these benefits, and after a while he agreed to get circumcised.

“Since that time, I have not had the sexually transmitted infections that we used to experience,” she said. “He is also encouraging his fellow men to go.”

After Awuor had broken the ice, five more women rose to tell their stories. From

their shared experiences, it is clear that these women, who are part of a women's group in Uriri District, have become strong advocates for an intervention that promises to significantly reduce HIV infections and confer other health benefits to the community.

Sharing experiences

Building this increased awareness of the benefits of VMMC among women in the district and supporting their successful efforts to encourage men to go for circumcision "is my mission to this community," said Anastasia Agutu.

Agutu is the leader of a group of women "champions" in Uriri District who receive education about VMMC from the Impact Research and Development Organization (IRDO) so they can inform their husbands and encourage them to get circumcised. Like Awuor, she says her experience led her to advocate for VMMC.

Agutu decided not to keep the benefits of VMMC to herself, "because there are many women who suffer from some sexually transmitted infections in silence, yet some of these can be sorted out if their men get circumcised."

The champions are married women. In addition to talking to their own partners about VMMC, they also help other women encourage their husbands to get circumcised.

The champions are enthusiastic about VMMC because they believe it benefits women as well as men, Agutu reported. The benefits she cited include women's reduced exposure to HIV infection in men and their decreased risk of contracting the virus that can cause cervical cancer.

Involving women

IRDO, a local nongovernmental organization that helps implement the government's VMMC programme in Nyanza, began training women champions in 2010. Director Kawango Agot says her organization adopted this strategy because women must be involved meaningfully in the implementation of the VMMC programme.

"The focus has largely remained on men," she said. "It is men who come for VMMC services and receive all the prevention messages and instructions, to the exclusion of their partners."

IRDO educates the women champions about VMMC and empowers them to become more involved in the VMMC process. Once their male partners agree to be circumcised, the women accompany them to the health centres. There each couple receives health education and counselling together, and both partners are

offered the opportunity to get tested for HIV.

Both are also screened for sexually transmitted infections and are treated if necessary. This means that men *and* women benefit from the comprehensive HIV prevention services provided along with VMMC, Agutu explained.

Reaching older men

In Uriri, as in other districts in Nyanza, men who are older than 18 years have been slow to access VMMC services. Agutu believes that the women champions, who are often in stable relationships with men in this age group, have the potential to encourage many of them to go for male circumcision.

Since April 2011, more than 200 men older than 18 have been circumcised through the efforts of Agutu and the other women champions in Uriri. She notes that encouraging the men takes patience and persistence. Nevertheless, each month the champions bring in 30 to 50 men for VMMC services.

Agutu is working to expand the champions' network so it can reach even more men. "We cannot just help ourselves alone," she said. "Cervical cancer affects us as women, so we must talk to our fellow women."

*Awuor's true name has been changed in this article to protect her privacy.

Study points to ways reach adult men

Preliminary results of a study carried out in two districts of Nyanza Province suggest ways to encourage more men ages 18 to 35 to become circumcised.

The study was conducted in Rachuonyo and Kisumu East districts by researchers from FHI 360, with support from the Male Circumcision Consortium, to identify barriers to voluntary medical male circumcision (VMMC) and help develop interventions to increase its uptake among men ages 18 to 35 years.

Men in this age group can benefit most from the partial protection VMMC offers against HIV infection, because they are most likely to be sexually active. Of the 395,000 men who have received VMMC services through the government's programme since October 2008, however, it is estimated that less than half were 18 years or older. Uptake is particularly low among men older than 25.

"The uptake of VMMC among men over age 25 has been slower than ideal, and during the past year the VMMC programme has made special efforts to reach this group," said Dr. Jackson Kioko, Nyanza provincial director of public health and sanitation, in a 17 February speech.

Dr. Kioko spoke at a meeting in Kisumu that brought together members of the national and provincial task forces on male circumcision and other partners in the implementation of VMMC programme to discuss the study results to date and consider interventions to address the barriers identified by the research.

The primary barriers were concerns about losing income during the recovery period after male circumcision, pain during and after the surgery, and sexual partners' potential objections to the requirement for sexual abstinence during the healing period.

Meeting participants noted that many of these barriers to male circumcision are based on misconceptions about VMMC. "For example, the uncircumcised men fear pain, but the circumcised men in the study reported that pain was manageable and not long-lasting," said Dr. Emily Evens, a scientist at FHI 360 and lead researcher for the study.

Some participants also confused the length of the full healing period (six weeks) with that of the recovery period, which typically keeps men away from work for one to three days.

The interventions considered include educating men to dispel these misconceptions, working with employers to ensure that men can take time off work, and integrating VMMC with other health services to ensure that women receive information about the procedure and related HIV prevention services.

A report with the final results of the study and recommended interventions to reach men ages 18 to 35 will be released later this year.

Dr. Ojwang' Lusi, provincial director of medical services, noted that reaching men in this age group will be critical to achieving the VMMC programme's goal of preventing millions of new HIV infections and saving lives by circumcising hundreds of thousands of men over five years. "More innovative effort is needed to reach this critical group that has been slow to accept VMMC," he said.

Male circumcision in the news

Rwanda: Over 20,000 circumcised since October

The New Times, 18 February

Uganda health experts' assessment of male circumcision

Daily Monitor, 4 February

Resources

Joint Strategic Action Framework to Accelerate the Scale-up of Voluntary Medical Male Circumcision for HIV Prevention in Eastern and Southern Africa

This document articulates a five-year framework to guide accelerated scale-up of VMMC for HIV prevention in selected priority countries in eastern and southern Africa. It was developed for use by ministries of health and their partners through contributions from national programmes, the Bill & Melinda Gates Foundation, the US President's Emergency Plan for AIDS Relief (PEPFAR), UNAIDS, the World Bank, and the World Health Organization.

Voluntary Medical Male Circumcision Communication Materials Adaptation Guide

This publication, produced by the Communication for Change (C-Change) Project, offers comprehensive guidance on communication for VMMC programmes scaling up services in new settings. It outlines a 10-step, participatory process for adapting materials to make them appealing and relevant to new audiences.

The **Male Circumcision Consortium (MCC)** works with the Government of Kenya other partners—including the US President's Emergency Plan for AIDS Relief (PEPFAR), which supports service delivery—to prevent HIV and save lives by expanding access to safe and voluntary male circumcision services. FHI 360 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@fhi360.org; also, please indicate whether you want to continue receiving this e-newsletter regularly.