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MCC News

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

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After her husband's circumcision, Martha became an advocate for voluntary medical male circumcision.

Photo by Silas Achar/FHI

Circumcision benefits me too: Martha's story

When a friend told her about the voluntary medical male circumcision services being offered along with other HIV prevention services at a nearby health centre, Martha was interested. She felt that this would be good for her husband.

But Martha waited three weeks before raising the subject with her husband. She was worried about how he might react. She also wondered whether what she had been told was entirely true.

Martha was surprised to learn that her husband had thought about going for "the cut." "He told me that he had heard about circumcision and was thinking of going,

but he was afraid about how I would react," she said. "He thought that I would not be happy with it!"

They decided to go to Tuungane Youth Centre in Kisumu the following day to find out more about the procedure. But even then, Martha was worried. Despite feeling that that this was good for her husband, she wondered about the implications of the procedure. She had not heard about any of her friends whose husband had gone for the procedure.

Martha had heard of the traditional male circumcision ceremonies conducted by neighbouring communities and knew that complications during those ceremonies had resulted in some deaths. This worried her, "I was afraid that my man could die," she said.

Another concern was the recovery period and the financial burden that it might impose. Would her husband need a special diet? And how they could afford special food when her husband, a driver, was recovering from the surgery and unable to work?

At the centre, a counsellor explained to them the benefits and risks of circumcision. They were told that circumcision does not offer full protection, but it does reduce a man's chances of getting infected with HIV and it also reduces men's and women's risk of contracting some of the other sexually transmitted infections.

The couple learned that circumcision was being offered as part of comprehensive package of HIV prevention strategies that included abstaining from sex or being faithful to one partner, using condoms correctly and consistently, and knowing one's HIV status. The Tuungane Youth Centre is one of more than 124 health care facilities in Nyanza where providers have been trained to offer this package of services as part of the Government of Kenya's voluntary medical male circumcision programmed.

The counsellor assured Martha that circumcision was being conducted by properly trained health workers in a safe environment. She was also told that no special diet is needed during the recovery period.

Taking the test

Martha and her husband had been married for four years but did not know their HIV status. They were given the opportunity to get tested for HIV, and they agreed.

When the results came back, the couple learned that one of them was HIV-positive. This startled them at first. But they were further counselled and advised on how to take precautions against transmitting the virus. They were also referred to a local HIV treatment centre for follow-up counselling and health care services.

Martha is now a strong advocate of medical male circumcision. She has even taken her three boys for circumcision, and has also convinced some of her friends to follow her example. She tells them that despite being circumcised, an individual is not immune from HIV and has to take care.

The decision for a man to be circumcised must be made by both partners, Martha adds. This is important because of the counselling that is offered to couples and because a man's partner must support him by abstaining from sex until the wound from his circumcision has healed.

Martha does not regret talking to her husband about being circumcised. She doubts whether she and her husband would have sought HIV testing if he had not gone to the centre for the circumcision. "I am now more informed than I was," she said.

Finding out their status has strengthened, not strained, their marriage. "We are taking good care of each other," Martha explained.

Cost of male circumcision prevents wider use in Uganda

The cost of medical male circumcision prevents it from being more widely adopted for HIV prevention in Uganda, according to a study conducted in four of the country's districts by researchers from the Makerere University School of Public Health and the Ministry of Health, with technical support from Family Health International.

Uganda's *Daily Monitor* reports that most respondents to the household survey conducted as part of the study thought medical male circumcision should be either free or available at a cost of no more than 5,000 Ugandan shillings, or about \$US 2.40. Providers who were interviewed for the study said that the cost of medical male circumcision ranged from 15,000 to 300,000 Ugandan shillings (US \$7.28 to \$145).

In Kenya, male circumcision is available for free through the government's voluntary medical male circumcision programme. The government is making this investment to improve access to safe and voluntary male circumcision services as part of an effort to halve the rate of HIV infection among Kenyans by 2012.

Male circumcision in the news

Nurses set to join circumcision team Nairobi Star, 4 August 2009

South Africa: male circumcision should be the in thing *PlusNews*, 14 August 2009

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Male Circumcision: Abstracts from the 5th IAS conference

Male circumcision for HIV prevention was a key topic of discussion at the Fifth International AIDS Society Conference on HIV Pathogenesis, Treatment and Prevention in Cape Town, South Africa, 19-22 July 2009. More than 30 **abstracts** about male circumcision were accepted for oral presentations or poster sessions at the conference, which drew more than 5,800 participants from 123 countries.

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), the University of Illinois at Chicago, and EngenderHealth 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.