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## MCC News

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

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Provincial Director of Public Health and Sanitation Jackson Kioko observes as surgeons at the UNIM Research and Training Centre in Kisumu perform a male circumcision. Dr. Kioko toured the facility during the launch of the 2009 Rapid Results Initiative.

*Photo courtesy of FHI*

### **VMMC programme builds on successes of first year**

In November 2008, the Kenyan government launched an ambitious effort to expand access to safe, medical male circumcision for HIV prevention. By the end of December 2009, more than 90,000 men had sought and received male circumcision services.

Many of those men were circumcised during a Rapid Results Initiative (RRI) conducted in Nyanza Province at the end of 2009 to accelerate access to male circumcision services. From November 9 to December 20, some 35,000 men

received male circumcision services.

“During the RRI we learnt that proper planning with the Ministry of Public Health and Sanitation produces positive results,” explained George Odingo of EngenderHealth, research officer for the Male Circumcision Consortium. He added that the programme plans to apply those lessons in the coming year. EngenderHealth, for example, “will continue supporting activities similar to the RRI, beginning in February 2010.” he said.

### **Leading the way**

Kenya is one of 14 sub-Saharan countries that have expanded male circumcision programmes since groundbreaking randomised controlled trials (RCTs) conducted in Kisumu and in South Africa and Uganda revealed that the procedure reduced men’s chances of becoming infected with HIV by about 60 percent.

Some of the 14 countries have begun pilot programmes, while others are still in the planning stages. The World Health Organization’s **country implementation update** shows that Kenya’s Voluntary Medical Male Circumcision (VMMC) Programme is leading the way in implementation and has reached more clients than all the other programmes combined.

“Kenya was able to get off to a relatively quick start because we had a solid foundation to build on in Kisumu, where the research was conducted,” said Dr. Mores Loolpapit of Family Health International, senior manager for the Male Circumcision Consortium. “And we’ve been able to build on that foundation through strong leadership from the government and excellent collaboration among all the government’s partners.”

The government has facilitated this collaboration by establishing and leading a National Task Force on Male Circumcision that brings together all its partners in the VMMC programme. In Nyanza Province, where the VMMC initiative began, a provincial task force plays the same critical coordinating role, working closely with male circumcision steering committees in each district.

An important part of Kenya’s foundation for progress in VMMC is the University of Nairobi Illinois and Manitoba (UNIM) Research and Training Centre in Kisumu, where the Kenya RCT was conducted. The Male Circumcision Consortium, as one of the partners in the government’s VMMC programme, has supported the expansion of the centre, which works in partnership with the Nyanza Reproductive Health Society (NRHS).

NRHS, a local nongovernmental organisation, has trained 918 healthcare providers. This training prepares teams of health workers, who in turn train,

supervise, and support other providers of safe, voluntary male circumcision services.

The MCC is also conducting research in Nyanza Province to assess the impact of expanding access to male circumcision and to identify the most effective and efficient ways of delivering the service. Seven studies are underway, with results expected over the next three years.

“These studies will give us a wealth of information about the impact of expanding male circumcision services on HIV transmission and risk behavior,” said Dr. Loolpapit. “They will also guide us in identifying efficiencies in service delivery that can help us meet the rising demand for male circumcision.”

Finding more efficient ways to deliver the service—which includes HIV prevention counselling, voluntary HIV counselling and testing, and treatment of sexually transmitted infections—is essential if the programme is to meet its goal of providing voluntary medical male circumcision to more than 1 million men by 2013.

“The sooner we can provide male circumcision services to men who want to be circumcised, the more HIV infections we shall prevent,” said Dr Jackson Kioko, the Nyanza provincial director of public health and sanitation.

### **Kenyan national HIV/AIDS plan highlights male circumcision**

Voluntary medical male circumcision (VMMC) is one of the priorities the government has identified in the third Kenya National AIDS Strategic Plan (KNASP III) to help it achieve a 50 percent reduction in new HIV infections in the next four years.

The plan was launched on 12 January by Prime Minister Raila Odinga, who emphasized the importance of male circumcision in his speech. The prime minister said that he had urged members of his community to consider the procedure for its benefit in the preventing HIV infection.

Dr. Michel Sidibe, executive director of the Joint United Nations Programme on HIV/AIDS (UNAIDS), described voluntary adult male circumcision as a revolution in practice. “We see the beginnings of the revolution in parts of Kenya, where people are actively transforming social norms and practices to prevent HIV,” he said.

The KNASP guides the government’s HIV interventions over five years. This third plan runs from 2009/10 to 2012/13. The National AIDS Control Council

(NACC) prepares the document in consultation with various stakeholders.

NACC Chairman Mary Getui says that the KNASP III addresses the complexities of our sexuality, relationships, culture, beliefs and attitudes that influence the transmission of infections, reactions to infection and illness, and whether and how we support, stigmatise and discriminate against each other.

Compared to preceding strategic plans, the KNASP III puts greater emphasis on preventing new infections. About 166,000 Kenyans become infected with HIV every year.

The plan aims to halve the number of new HIV infections, lower AIDS- related deaths by 25 percent, reduce HIV- related illnesses, and lessen the impact of HIV on households and communities by 2013

### **How does male circumcision reduce the risk of HIV?**

The reduced risk of HIV infection in circumcised men may be partially explained by a decline in some types of bacteria on the surface of the penis, suggest results from Rakai, Uganda, published in *PLoS Medicine*.

Scientists analyzed penile swabs collected from 12 HIV-negative men before and 12 months after circumcision. The men were participating in one of the three randomised controlled trials that showed male circumcision's partially protective effect against heterosexually acquired HIV infection in men.

The analysis found a marked decrease in anaerobic (non-oxygen-requiring) bacteria. One theory is that this type of bacteria may activate immune system cells called Langerhans cells, which interact with HIV in two different ways. Langerhans cells defend against HIV when they are not activated, but help the virus infect the body once they become activated.

Together with the removal of the foreskin, which has a high concentration of these Langerhans cells, the decrease in anaerobic bacteria observed in this study may play a role in protecting circumcised men against HIV and other sexually transmitted infections.

### **Male circumcision in the news**

**Gates, the philanthropist, on lessons learned**

Cnet news, 24 January 2010

## **Kenya: The fringe benefits of male circumcision rollout**

*PlusNews*, 6 January 2010

### **Resources**

#### **Male Circumcision for HIV Prevention in High HIV Prevalence Settings: What Can Mathematical Modelling Contribute to Informed Decision Making?**

One HIV infection could be prevented for every five to 15 men circumcised in settings with high levels of HIV and low rates of male circumcision, concluded an expert review of six simulation models that estimate the impact of male circumcision on HIV. The review is summarised in a **video**.

**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.

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