



News

November 2011
Issue 32

MCC News

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

In this issue:

Study Finds Men and Women Understand Partial Protection

Rapid Results Initiative Aims to Reach 70,000

Male Circumcision in the News

Resources



A mobiliser discusses voluntary medical male circumcision with students. His T-shirt reminds them that the procedure reduces men's risk of HIV infection by 60 percent.

Photo by Tom Otieno

Study finds men and women understand partial protection

You should not just be loose just because you're circumcised... You should therefore see how to protect yourself when having sex.

This is how an 18-year-old man from Siaya District described the need for couples to practice safe sex after a man becomes circumcised, because male circumcision does not provide men complete protection against HIV infection.

The young man was one of the 44 men and 20 women interviewed in Siaya and Kisumu East for the Communicating Partial Protection Study in Nyanza Province.

Conducted by researchers from FHI 360's Behavioral and Social Sciences group for the Male Circumcision Consortium, this study will help enhance messages to encourage men and women to use condoms and other HIV-prevention measures for additional protection after male circumcision.

Men and women in the study demonstrated a sound understanding of partial protection from HIV infection. However, circumcised men were better able to explain partial protection compared to women or uncircumcised men, pointing to the importance of the counselling provided to male circumcision clients and the need for greater outreach to women.

“Not a certificate”

The men interviewed for the study were recruited through health clinics and community mobilisers who work with the voluntary medical male circumcision (VMMC) programme in Nyanza. More than half of the men were unmarried, and their average age was 25. All of the men had either been circumcised in the past six months or planned to get circumcised in the next three months.

Every man interviewed had heard that male circumcision provides partial protection against HIV infection. Most said that being circumcised reduces a man's chances of becoming infected with HIV by 50 percent to 60 percent.

The men explained partial protection as the need to continue using other HIV protective measures, such as condoms or faithfulness; with numbers, such as a 60-percent or not 100-percent protection; and through the perceived mechanism of HIV protection. The circumcised men, who had received counselling about partial protection and HIV risk reduction as part of the VMMC package of services, were better able to articulate the meaning of the concept.

Most of the men said that their personal risk of HIV had been high or very high in the past and gave an average risk score of 7.5 out of 10, with 10 being very high risk. The average risk score given for after VMMC was 2.9 — a decrease of 61 percent.

“Participants made consistent — and perhaps even accurate — assessments of their individual HIV risk,” notes Dr. Kelly L'Engle of FHI 360, the study's principal investigator.

Most of the uncircumcised men said they would not change their behaviour after the procedure but would continue taking protective measures. “No, I will not change,” said one 23-year-old man from Siaya, “because getting circumcised is not a certificate that you will not get infected.”

Reaching women a priority

The 20 women interviewed for the study were also recruited through health clinics and community mobilisers, and their average age was 25. Fifteen of the women were married. Half of the women had circumcised partners, and half had uncircumcised partners. Another 44 women whose partners had been circumcised in the past six months participated in focus group discussions.

All of the women interviewed had heard that male circumcision provides partial protection against HIV, and the majority said that the procedure reduces men's risk of HIV by 60 percent. When asked to rate the reduction in men's risk of HIV infection after circumcision on a four-point scale (not at all, a little, a moderate amount, a lot), most of the women rated it as "a little" decrease, followed by "a moderate amount" of reduction.

The most common explanations of partial protection given during the in-depth interviews were that male circumcision reduces a man's chances of getting HIV, provides "a little" or "some" protection, or is not "fully" protective, and that "you can still get HIV."

Women who could not describe partial protection did not seem to hold misconceptions about it but, like the uncircumcised men, were less sure of its meaning. However, after the 44 women in the focus groups were exposed to messages about partial protection, they understood these messages well and could explain partial protection and 60-percent risk reduction. These findings suggest that VMMC communications could more effectively target and reach women.

Some women in the focus groups thought that discussions about HIV prevention after VMMC were unnecessary in a trusting relationship. Only one of the four focus groups raised the possibility that partial protection and other HIV-protective measures would be discussed before the man went for the "cut."

The researchers called on VMMC programmes to recognize the role women can play in encouraging men to get circumcised and adopt safer sexual behaviours. "Programmes should capitalize on the communication already taking place between partners regarding male circumcision," said investigator Michele Lanham of FHI 360. "In particular, couples should be encouraged to discuss *before* circumcision their plan for protecting themselves after VMMC."

Rapid Results Initiative aims to reach 70,000

The 2011 Rapid Results Initiative (RRI) — an intensive effort to meet the anticipated high demand for voluntary medical male circumcision (VMMC) services during the upcoming school holidays—is under way in 17 districts of Nyanza Province.

By increasing access to the services and promoting their use, the government and its partners aim to reach about 70,000 men and boys in Kenya with VMMC and related HIV prevention services by 23 December.

This third annual RRI campaign will also be conducted in parts of Nairobi, Rift Valley and Western provinces. But the campaign will be most extensive in Nyanza, where the government and its partners are mobilising all health care providers trained in VMMC services so that they can reach 52,000 new clients in that province alone.

During the first RRI in 2009, more than 37,000 men and boys in Nyanza Province were circumcised over 30 working days. Last year's campaign reached more than 50,000 men and boys in Nyanza and almost 5,000 in Nairobi Province.

The partners collaborating with the ministries of health to implement the 2011 RRI in Nyanza are the Nyanza Reproductive Health Society (NRHS), IMPACT Research and Development Organization, APHIAplus Western, Family AIDS Care and Education Services and the Male Circumcision Consortium (which consists of FHI 360 and the University of Illinois at Chicago, working with NRHS). Service delivery is supported by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR).

Male circumcision in the news

52,000 men targeted for cut

The People, 15 November

Circumcision rate in Nyanza up, says study

Nairobi Star, 2 November

Resources

Voluntary Medical Male Circumcision for HIV Prevention: The Cost, Impact and Challenges of Accelerated Scale-up in Southern and Eastern Africa

This is a sponsored collection of nine articles that together show that voluntary medical male circumcision is a cost-effective HIV prevention measure in eastern and southern Africa. It was published in *PLoS Medicine* and *PLoS ONE* in conjunction with the Joint United Nations Programme on HIV/AIDS and the U.S. President's Emergency Plan for AIDS Relief.

The Clearinghouse on Male Circumcision for HIV Prevention

Developed by the World Health Organization, AVAC, and FHI 360, this Web site is a comprehensive source of information and resources about male circumcision for HIV prevention.

The Male Circumcision Consortium (MCC) works with the Government of Kenya and 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, 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.