



SCALING UP VOLUNTARY MEDICAL MALE CIRCUMCISION SERVICES IN TANZANIA'S KAGERA REGION

PROJECT SUMMARY

From 2009 to 2015, with support from the Centers for Disease Control and Prevention through PEPFAR, ICAP provided technical assistance to support the implementation and scale-up of voluntary medical male circumcision (VMMC) services in Tanzania's Kagera Region.

In partnership with Tanzania's Ministry of Health and Social Welfare (MOHSW), ICAP built the capacity of ten health facilities in Kagera Region to deliver high-quality VMMC services and, to further increase access, supported ongoing mobile campaigns to 20 Lake Victoria islands. This resulted in over 110,000 men and boys undergoing VMMC, providing them with life-long partial protection against HIV. In addition, through its participation in the National Technical Working Group on Male Circumcision, ICAP contributed to national-level VMMC policies, a VMMC training package for health workers, standardized monitoring and evaluation tools, and the development of relevant information, education, and communication materials.



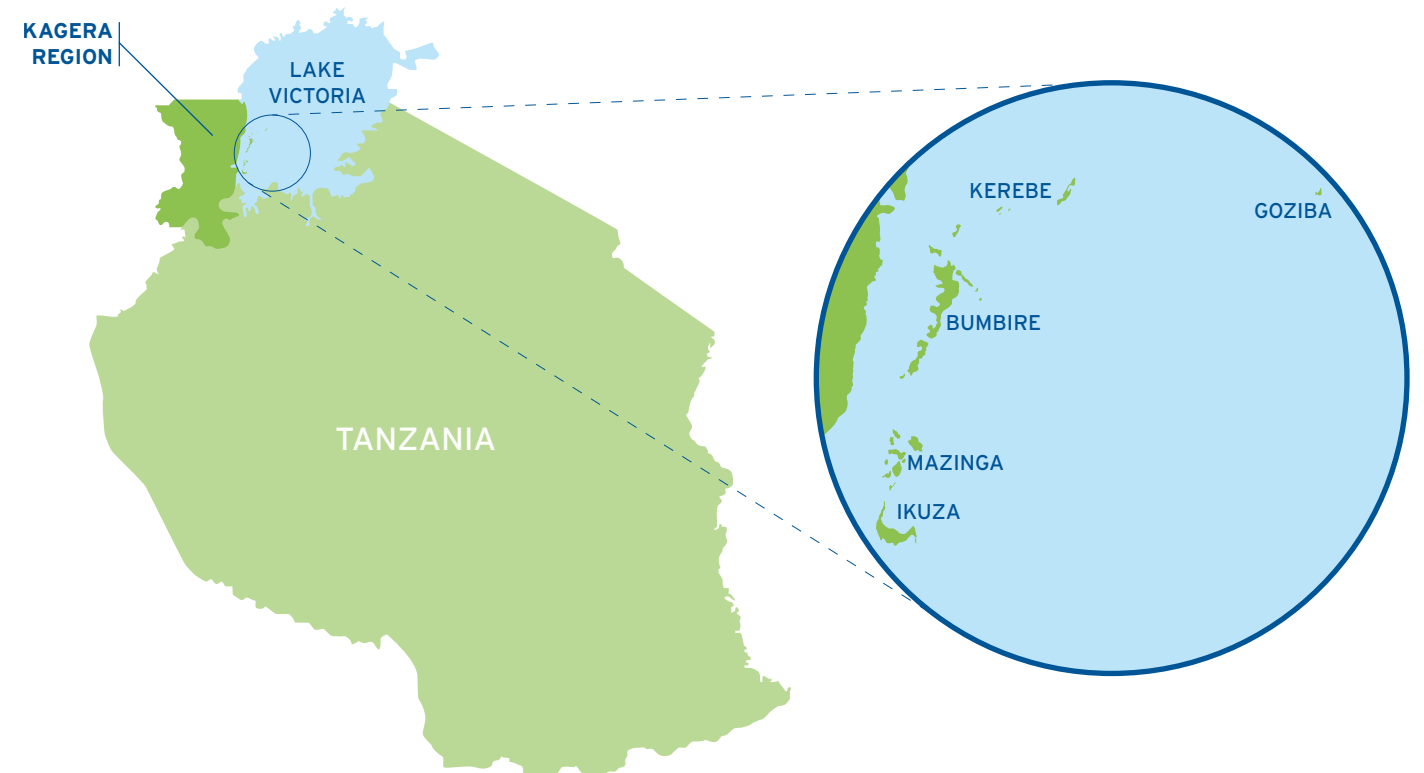


BACKGROUND

After three randomized controlled trials found that male circumcision reduces the risk of heterosexually-acquired HIV infection in men by approximately 60 percent, the World Health Organization recommended VMMC as an important strategy for HIV prevention, particularly in countries with high HIV prevalence and low levels of male circumcision.

In 2009, ICAP and Tanzania's MOHSW launched a project to support the implementation and scale-up of free, high-quality VMMC services in Tanzania's Kagera Region. HIV prevalence in Kagera Region at project initiation was approximately 3.4 percent and only an estimated 26 percent of men aged 15-49 had been circumcised, compared to 67 percent nationwide.

Figure 1
Tanzania's Kagera Region and the Victoria Islands Supported by ICAP to Initiate VMMC Services.



WHAT WAS ACHIEVED

As a result of the support ICAP provided to local partners in Tanzania between 2009 and 2015,

- A total of **141** health workers were trained to conduct VMMC procedures.
- A total of **117,286** adults and adolescents underwent VMMC.

- Over **78,580 (67 percent)** of the circumcisions were conducted through mobile campaigns.
- Over **1,000** men were newly diagnosed with HIV and referred to care as a result of the widely accepted routine HIV counseling and testing integrated into the VMMC program.

One out of seven of the 786,310 voluntary medical male circumcisions conducted in Tanzania between 2010—when the Government of Tanzania began its male circumcision program—and 2015 was supported by ICAP.

CORE PROJECT APPROACHES

Building on a strong track record of working hand-in-hand with the MOHSW since 2004 to rapidly scale up HIV care and treatment services in Kagera and three other regions of Tanzania, ICAP utilized the following approaches to support the implementation and scale-up of VMMC services:

Building the Foundation: National VMMC Policy and Materials Development

- Through active participation in the National Technical Working Group on Male Circumcision, ICAP helped create a foundation for a high-quality and standardized male circumcision program in Tanzania by contributing to the development of a national male circumcision strategic plan, operational guidelines, standards of care, and a monitoring and evaluation framework.

Creating Demand for VMMC

- To generate demand for VMMC services within communities, ICAP supported innovative drama groups and performances, radio announcements, and sensitization meetings with key community, religious, and political leaders.

Developing a Comprehensive VMMC Training Package

- ICAP collaborated with local and international partners, including the MOHSW and JHPIEGO, to develop and refine a VMMC training package that includes job aids for health workers; tools to monitor and evaluate VMMC services; and information, education, and communication materials to increase patient and community awareness of male circumcision services.



Bringing VMMC Services to Communities

- To demonstrate the feasibility of integrating VMMC services as an HIV prevention intervention within existing facilities, ICAP worked with the MOHSW to develop and implement a **demonstration project** at Kagera Regional Hospital, which launched free VMMC services as part of a comprehensive HIV prevention strategy in 2009.
- ICAP then supported the **expansion of services** to nine other health facilities in Kagera Region, including four hospitals and five health centers.
- Prior to the launch of VMMC services at each facility, ICAP supported the **training of health workers** using the comprehensive VMMC training package. In addition, ICAP supported the **training of regional trainers** and, to meet ongoing VMMC training needs, equipped Kagera Regional Hospital to serve as a regional VMMC training center.
- To **expand access to the islands of Lake Victoria**—where HIV prevalence is estimated to be 10 - 20 percent and there is a highly mobile population of 25,000 fisherman—ICAP supported the initiation of mobile VMMC services to 20 islands in Kagera’s Muleba District. Health workers from the facilities already capacitated to deliver VMMC services began conducting the campaigns in 2010, using a combination of existing health infrastructure on the islands and mobile hospital tents. ICAP also launched an HIV outreach boat in early 2015, dedicated to transporting health workers to the hard-to-reach islands.
- ICAP supported a **VMMC refresher training** for providers at all health facilities with male circumcision clinics to reinforce their knowledge, strengthen management of emergency cases, and support patient safety and service quality.

Linking Circumcision to HIV Prevention, Care, and Treatment

- HIV testing and counseling services were fully integrated into the VMMC program, and all clients testing positive were linked to HIV care and treatment services through on-site peer escorting—or, in the case of mobile campaigns, via referrals to partner clinics and hospitals.
- To address the challenge of very low linkage rates on the islands of Lake Victoria, ICAP collaborated with the Muleba Council Health Management Team to initiate mobile HIV care and treatment and prevention of mother-to-child transmission of HIV services, allowing for more direct linkage of VMMC clients. The boat donated by ICAP has greatly facilitated transport of health teams to the hard-to-reach islands.

Assuring Service Quality

- ICAP staff experienced in VMMC service provision closely monitored each campaign to ensure service quality and provide ongoing supportive supervision.
- ICAP worked hand-in-hand with health workers and district managers to conduct monthly reviews of adverse event rates and patient outcomes, the rate at which patients were returning for follow-up care, and HIV testing and counseling coverage among VMMC clients.



LESSONS LEARNED

- Mobile VMMC campaigns, when accompanied with appropriate community sensitization activities, are an effective way to reach large numbers of men and boys with VMMC services in a short period of time.
- VMMC services provide an entry-point for offering HIV counseling and testing—and for linking clients who test positive to HIV care and treatment services.
- Ensuring that patients receive follow-up care 48 hours and seven days following surgery is a challenge, particularly if the service was provided during a mobile campaign. Measures implemented by ICAP to address this challenge include: providing patients with sufficient medication to continue home-based antibiotic treatment, placing peer educators at the service delivery exit to reinforce messages related to adherence and follow-up, sending SMS reminders to patients, building wound and management capacity of health workers at health facilities closer to the homes of VMMC patients, and providing these facilities with a register to document VMMC follow-up visits.



THE WAY FORWARD

HIV prevalence in Tanzania currently stands at just over 5 percent and nearly 80,000 people are newly infected in the country each year. VMMC, a one-time intervention that provides men with life-long partial protection against HIV, is an important component of a comprehensive HIV prevention package of services and will need to be scaled up further in Tanzania.

ICAP has now transitioned oversight of VMMC services in Kagera Region to a local Tanzanian implementing partner, Management and Development for Health, but will continue to advocate for VMMC scale-up through its work at the national level. In addition, ICAP is currently completing a study to assess the feasibility and acceptability of scaling up early infant male circumcision services in the country, particularly in traditionally non-circumcising communities.



ABOUT ICAP

ICAP was founded in 2003 at Columbia University's Mailman School of Public Health. Now a global leader in HIV and health systems strengthening, ICAP provides technical assistance and implementation support to governments and non-governmental organizations in more than 21 countries. ICAP has supported work at more than 4,328 health facilities around the world. More than 2.3 million people have received HIV care through ICAP-supported programs and over 1.4 million have begun antiretroviral therapy.

Online at icap.columbia.edu

Photography by Jake Price

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