Developing a Country – wide Monitoring and evaluation system for VMMC

Uganda presentation at the Joint PEPFAR-WHO Meeting on VMMC
25-28th Sept 2012 Johannesburg, South Africa

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Outline of presentation

- **BACKGROUND**
  - Uganda VMMC statistics
  - VMMC Program Implementation mile stones

- **VMMC Operational Centre**
  - History and objectives
  - Data collection fields
  - Results so far
  - Challenges
Uganda

Population\(^1\): 35,873,000

Estimated HIV+ adults& children\(^2\):
1,390,000

Adult HIV Prevalence:
- 6.4% (2004/5) \(^3\)
- 7.3% (2011) \(^4\)

\(\text{VMMC} = \text{SMC in Uganda}\)

<table>
<thead>
<tr>
<th>VMMC</th>
<th>2012</th>
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<tbody>
<tr>
<td>% Coverage</td>
<td>26%</td>
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<tr>
<td>Results(^5)</td>
<td>149,400</td>
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<tr>
<td>National Need(^6)</td>
<td>4,245,184</td>
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\(^1\)U.S. Census Bureau International Data Base 2012 mid-year population.
\(^2\)Estimate MOH Uganda (2012).
\(^4\)Uganda AIDS indicator Survey, 2011
Male Circumcision by Region

Percent of men age 15-49 who are circumcised

Uganda 26%

Kampala 35%

Mid Western 30%

South Western 10%

West Nile 28%

Mid Northern 2%

North East 7%

Central 1 29%

Central 2 26%

Mid Eastern 53%

East Central 42%
VMMC Program Implementation Milestones

- **National Task Force** on SMC established 2009

- **Uganda SMC Policy** launched in January, 2010

- National **Communication Strategy** for SMC launched 2010

- **Minimum Standards of Procedure** for SMC launched Feb, 2011

- **SMC Strategic Plan** launched March, 2011
Sample Posters

**GET CIRCUMCISED TODAY**

- It is FREE, safe, it reduces risk of getting HIV by 60%, And it improves genital cleanliness, But remain faithful and use a condom

**HUSBANDS PROTECT YOUR HOMES FROM HIV; Get Circumcised Today**

- CIRCUMCISION is FREE, Safe, It reduces risk of HIV infection by 60% and Improves genital cleanliness. But remain faithful and use a condom

SERVICES ARE AVAILABLE AT KCCA'S KISENYI HEALTH CENTRE
Monday to Friday from 8:00am to 5:00pm
Still Pending:

- **Need to accelerate** the scale up of VMMC to meet National need: 4,245,184 by 2015

- **Need for regular monitoring** system to capture all circumcision done across the country: VMMC Operational Center
History:
• Started as Pilot in June 2012
• Currently targeting 90 VMMC sites in Uganda
• Funded by PEPFAR through CDC.
• Plans under way to institutionalize the system nationally and transition it to MOH-Uganda
• Data is collected by daily phone calls to sites and feed into a computer data base

Objectives:
• To register all facilities in Uganda carrying out VMMC (static and mobile)
• To register all VMMC implementing partners in Uganda and their funders.
• To record the number of men circumcised within a 24-hour period
• To record the number of VMMC adverse events reported in a 24-hour period
• To record any serious challenges experienced by facilities/IP
• Create a map of Uganda showing the daily status of the VMMC scale up
Operational Center - Database screen shot
Data fields collected

Total VMMCs by facility and partner

VMMCs by site type

VMMCs by Age

Occurrence of AEs

Challenges

Partner | Facility | Total Circumcised
---|---|---

Static | Mobile

No. by age group (in Yrs)

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<tr>
<th>&lt; 13</th>
<th>13-25</th>
<th>26-49</th>
<th>&gt; 49</th>
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AEs

Admin | Mobilization | Logistical | Others
### Results - site specific daily totals

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<th>Partner</th>
<th>Facility</th>
<th>Total Circumised</th>
<th>No. by site type</th>
<th>No. by age group (in yrs)</th>
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<th>Challenges</th>
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<td>Mobile</td>
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<td>1017</td>
<td>447</td>
<td>570</td>
<td>24</td>
<td>844</td>
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Results - summarized daily totals

SMC Operational Centre
Men circumcised daily at sites in Uganda

- Total number
- Number by site type

Static sites
Mobile sites

Graph showing daily totals of men circumcised at sites in Uganda.
Results - Monthly Trend Data

SMC Operational Centre
Men circumcised monthly at sites in Uganda

Note the Change before (996 in June) Vs after (20,449 in August)
Results - Daily Map with results
Currently few VMMC sites (from one funding partner) report into the system.

Given the scale up numbers and in the absence of a national reporting system, the need to report and monitor is essential.

Data is currently being collected by use of daily phone calls.

- Plans under way to use other data collection methods

Need to improve reporting with a web-based system.

Plan is to institutionalize this system nationally and transition it to MOH.
Acknowledgements

- Centres for Diseases Control and Prevention, Uganda
- Ministry of Health, Uganda
- Infectious Diseases Institute, Makerere University, Uganda
- Presidential Emergency Plan For HIV/AIDS
Thank you