Creating Demand for Voluntary Medical Male Circumcision Services

Rationale for the Studies
Creating sustained demand for voluntary medical male circumcision (VMMC) is difficult but essential to the success of scale-up. Studies from Zimbabwe, by Population Services International (PSI) Zimbabwe; Kenya, by the President’s Emergency Plan for AIDS Relief (PEPFAR) through USAID’s Research to Prevention project; and Tanzania, by PEPFAR through USAID’s Maternal and Child Health Integrated Program (MCHIP), examined what is influencing uptake of VMMC services in each respective country.

Key Findings

- Formative research to guide the design of service delivery modalities that meet specific needs, desires, and values of diverse communities and specific age groups of prospective VMMC clients should be an integral part of VMMC programming.
- Demand creation messages and approaches need to be tailored for specific age groups, reflecting the unique motivators and barriers to VMMC uptake by demographic group.
- Positioning VMMC as a lifestyle choice with health benefits beyond HIV prevention might increase VMMC acceptance among older men over 25 years of age and women who are recognized as key influencers, as demonstrated in Zimbabwe.
- Service delivery modality and intensity through campaigns is also important to generate demand, especially for services among younger age groups such as adolescents. In both Zimbabwe and Tanzania, high numbers of adolescents aged 10-19 years access services during school holiday campaigns. VMMC programs need to explore underlying cultural preferences and barriers to effectively target older clients who remain difficult to recruit.
- The barriers to VMMC demand in Kenya among older men include age-related stigma associated with VMMC and the perception that older men are inherently at low risk for HIV.

Implications for the Future
As programs scale up, it is essential to understand and tailor both demand creation interventions and service delivery models to specific age groups of clients and involve women as influencers in men’s VMMC decision-making. Studies suggest the importance of broadly framed messaging beyond HIV prevention, including such VMMC appeals as improved hygiene, aesthetics, partner preference, peer group norms, leadership, and modernity.