

Community Participation Propels Project



Boniface Oduor, a boda boda operator from Lumumba estate in Kisumu, asks a question at a sensitisation meeting on voluntary medical male circumcision and prevention of mother-to-child transmission of HIV.

The important role that the community has played in voluntary medical male circumcision (VMMC) for HIV prevention—and the need for even greater involvement as the VMMC programme enters its second year of implementation in Nyanza Province—were recurring themes during a recent stakeholders’ meeting in Kisumu.

The 22 March meeting was the third major stakeholder’s forum organised by the Nyanza Provincial Task Force on Male Circumcision. It was held at the Tom Mboya Labour College Hall to update community members on the progress of the VMMC programme since its launch in November 2008.

About 100 community members participated in the meeting, including youth, women, elders, religious leaders, representatives of community groups, and journalists.

Dr. Jackson Kioko, provincial director of public health and sanitation, acknowledged the contributions of

these groups, noting that community participation produces tangible results. All of the groups represented at the meeting helped make it possible for the programme to reach more than 90,000 men in Nyanza with VMMC services by the end of 2009.

Most notably, communities helped the Rapid Results Initiative exceed expectations. Provincial health officials and their partners launched the initiative on 9 December 2009, hoping to reach 30,000 men. Over the next 30 days, some 35,000 men sought and received VMMC services.

“Community participation is an indispensable resource in achieving desired health outcomes and overall development,” Dr. Kioko said.

Community voices

Several members of the community also spoke at the meeting, recounting their experiences with VMMC services and making recommendations to help the programme in the future.

Peter Osano, who is deaf, suggested that nurses and doctors be trained in the use of sign language to enable deaf people to receive satisfactory VMMC services.

Osano said he was pleased at the inclusion of deaf people and others who have not been able to participate fully in HIV prevention efforts. “Deaf people are also affected by the HIV virus,” he said through an interpreter. “I am happy to be part of this meeting today. This shows that our role in the fight against the spread of the virus is being realised.”

Some speakers emphasised that the VMMC programme does not benefit men only, but also women. The programme offers counselling and other HIV prevention services to the female partners of its male clients. And women play a vital role in male circumcision for HIV prevention, from encouragement, to post-circumcision support and sexual abstinence during healing, to a couple’s mutual commitment to safe sex after circumcision.

Beatrice Akinyi, a women’s group representative, described how she had encouraged her husband to seek male circumcision services and had supported him after the operation. “I ensured that my husband ate well during the healing period,” she said. “We also abstained from sex until he healed completely.”

Prior to the launch of the VMMC programme, two major stakeholders’ meetings brought together leaders of the Luo community, who endorsed the programme for HIV prevention in the community. Prime Minister Hon. Raila Odinga presided over the second meeting on 22 September 2008.

Soon after the launch of the programme, the government created both the national and provincial task forces, composed of government officials and development partners who coordinate VMMC activities.

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Community participation propels project

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Plans are underway to hold more forums with different stakeholders in the province to enhance awareness of VMMC for HIV prevention, stimulate sustained demand, and encourage community participation in the programme.

Some of the groups that will be engaged are the boda-boda and fishermen, through fishermen's health initiatives. Sporting activities will also be initiated to promote the uptake of VMMC services.

Recently Dr. Kioko announced that the Luo Council of Elders will be part of the district steering committees on VMMC, since the elders are the custodians of culture. These steering committees, composed of the district health management teams, development partners, and selected stakeholders, were formed by the provincial task force on male circumcision to coordinate VMMC at the district level.

With all these stakeholders' involved, Minister of Medical Services Hon. Prof. Anyang' Nyong'o hopes that about one million men will be offered VMMC services in the next four years. "Nyanza is to reach about 430,000 men aged between the ages of 15 to 49 with the VMMC services," he said in a speech read on his behalf at the meeting by the Kisumu Town West Member of Parliament, John Olago Aluoch. "This means that extra effort needs to be made."

Community Participation Critical in Public Health Programmes



Dr. Jackson Kioko

I welcome you to the second edition of our quarterly newsletter.

As we enter the second year of the implementation of the voluntary medical male circumcision (VMMC) programme in Nyanza, I commend all the stakeholders involved in the excellent progress the programme has made.

The number of men who have chosen to protect their lives and those of their partners by being circumcised has been on a steady increase.

It is encouraging to note that medical circumcision is not just a surgical procedure, but is offered as part of a comprehensive package of HIV prevention services. These services include important health education, HIV counselling and testing, the provision of condoms, and screening and treatment for sexually transmitted diseases. Individuals are also referred to other services they may need, such as care and treatment of HIV.

This means that the programme benefits not just men, but also their partners and families. It also means that everybody has to be involved.

Since the programme was launched in November 2008, we have achieved much, addressed many challenges, and most of all, learnt valuable lessons. A critical lesson is that for this programme and any other

public health initiative to succeed, the community must fully participate.

Community members have a responsibility to address the health issues that affect them. Any meaningful change will start at this level. The health care system and workers are there to support the community.

We have been engaged in various sensitisation forums with different groups, and these interactions have contributed greatly to the development of better strategies for implementing the programme.

The community is composed of different stakeholders who have specific roles to play. And the first step in encouraging society's participation is to engage families.

Families play a critical role in VMMC. Men should involve their partners in making the decision about whether to become circumcised. I encourage women to accompany their men to the clinics, so that they can take advantage of this opportunity to access critical health information and make informed decisions. I also urge parents to be involved, and to encourage their sons who have decided to become circumcised.

As for the health system, we are equipped to provide VMMC services according to the highest safety standards. Medical circumcisions are provided in public health facilities and other identified outreach facilities. Individuals should seek services only from these facilities to ensure safety.

The government is monitoring the quality of VMMC services very keenly and will punish anyone who attempts to take advantage of the demand for male circumcision to offer unsafe services.

Together, we can ensure that the people of Nyanza have access to comprehensive HIV prevention services that include safe and voluntary medical male circumcision. ■

Dr. Jackson Kioko, Provincial Director of Public Health and Sanitation

VMMC in Nyanza: Programme Highlights

- 1 Over 100,000 men have been circumcised in Nyanza Province since beginning of the programme in November 2008.
- 2 Voluntary medical male circumcision (VMMC) can be accessed in more than 100 health centres and at selected outreach sites in 11 districts in Nyanza.
- 3 Over 900 health care providers have been trained to offer safe male circumcision services.
- 4 VMMC is offered as a comprehensive package with other HIV prevention services: counselling about HIV prevention, diagnosis and treatment of sexually transmitted infections, and HIV counselling and testing.
- 5 A provincial task force coordinates the implementation of the VMMC programme in Nyanza, while male circumcision steering committees coordinate the programme at the district level.

Male Circumcision in a Comprehensive HIV Prevention Package

Male circumcision is the latest addition to the proven strategies that people can use to protect themselves from HIV infection. Three conclusive studies, conducted in Kenya, Uganda, and South Africa, showed that male circumcision reduces a man's chances of getting infected with HIV by about 60 percent.

This means that becoming circumcised can dramatically reduce a man's risk of HIV infection, but it also means that male circumcision does not provide complete protection against the virus.

That is why it is critical to ensure that male circumcision is perceived as an addition to—and not a replacement for—other effective HIV prevention measures. To ensure that they are protected against HIV infection, circumcised men and their partners must continue to practice the “ABCs” of safe sex: abstinence, being faithful to one uninfected partner, and correct and consistent use of condoms.

And that is why health services in Kenya and other countries are offering male circumcision not as a stand-alone surgical procedure, but as an integral part of a comprehensive package of HIV prevention services.

This approach follows the recommendation of the World Health Organization. The WHO's *Male Circumcision Quality Assurance: a Guide to Enhancing the Safety and Quality of Services* states that a minimum package of HIV prevention services should be offered, and that male circumcision is not just the surgical procedure.

The minimum package recommended by WHO includes HIV testing and counselling, screening for sexually transmitted infections and treatment where required, counselling and education on risk reduction and safer sex, and provision and promotion of condoms before the male circumcision procedure is performed as described in the WHO/Jhpiego *Manual for Male Circumcision under Local Anaesthesia*.

Kenya's VMMC programme

The Kenyan voluntary medical male circumcision (VMMC) programme has adapted the WHO standards, ensuring that every site provides at least the minimum package of services.

The VMMC programme is being implemented in over 100 public health facilities, outreach facilities, and mobile facilities in Nyanza Province.

Joshua Osoo of the Nyanza Reproductive Health Society, who is head of counselling at the Universities of Nairobi, Illinois and Manitoba (UNIM) Research and Training Centre in Kisumu,



Titus Okoth, a counselor with APHIA Nyanza, discusses male circumcision for HIV prevention with a client at Kenya Acorn Community Hospital in Ndhiwa District.

says that it is standard to provide a package of HIV prevention services before the surgery. He takes us through the process from the moment a client enters the facility seeking male circumcision.

“The client is taken through a counselling session, where he is given information on reproductive health services, education on risk reduction, and basic information about male circumcision,” Osoo explained. “This is done in both the group counselling and individual counselling.”

The counsellor also informs each client about HIV counselling and testing, and gives him (and his partner, if she is present) the option of receiving this service. Clients who decide to get tested receive pre- and post-test counselling.

The client receives the test results during a post-test counselling session. After counselling, he is screened for sexually transmitted infections (STIs). Clients who have STIs are not eligible for circumcision until the infection has been treated successfully. Clients are also encouraged to bring in their partners for STI screening and treatment.

During the STI screening, the client's weight and blood pressure are also checked. Eligible clients then proceed to the surgical theatre.

The minor operation lasts between 15 and 45 minutes. Afterwards, the client rests in the recovery room for about 30 minutes. During this time, he receives additional counselling in risk reduction, individually or with his partner, and instructions on wound care and the importance of abstaining from sex until the wound has healed.

After resting, the client is released to go home and advised to follow the instructions. He is also given a hotline number that he can call if he experiences any unexpected or uncomfortable side effects. Clients return to the clinic after seven days for a check-up. ■

PARTNERS

The following members of the Nyanza Provincial Task Force (PTF) on Male Circumcision are partners in the national voluntary medical male circumcision (VMMC) programme, which is funded by the Government of Kenya, the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), the United States Agency for International Development (USAID), and the Bill & Melinda Gates Foundation.

Additional partners who collaborate with Nyanza task force as part of their support to the national programme include the Communication for Change (C-Change) Project, which is implemented by the Academy for Educational Development, the United Nations Children's Fund, and Population Services International.

APHIA II NYANZA

Through integrated communication, advocacy, and mobilisation activities, the AIDS, Population and Health Integrated Assistance (APHIA II) Project supports VMMC in 20 sites in Nyando, Rachuonyo, Rongo, and Homa Bay districts.

APHIA II is implemented in Nyanza by a consortium of partners: the Academy for Educational Development, the Christian Health Association of Kenya, EngenderHealth, the Program for Appropriate Technologies in Health, and the Inter Diocesan Christian Community Service. The project works with the ministries of public health and sanitation and medical services to promote the adoption of healthier behaviors by Nyanza residents.

Catholic Medical Mission Board

The Catholic Medical Mission Board (CMMB), a US-based Catholic charity focused exclusively on global healthcare, has implemented VMMC in Nyanza since June 2008 in collaboration with faith-based hospitals.

The CMMB supports the provision of VMMC services by supplying surgical equipment and instruments, training service providers, and providing technical assistance and supportive supervision to the partnering facilities. It works with faith-based hospitals in Karungu, Migori, Tabaka, Asumbi, Kendu Bay, Nyabondo, Kisumu, Chiga, Maseno, Lwak (Asembo), and Nyangoma.

In addition to providing the comprehensive HIV prevention package with VMMC, the CMMB also takes a family-centred approach, offering reproductive health education, information on HIV/AIDS, and life skills to adolescents.

Partners in VMMC for HIV prevention

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Centres for Disease Control and Prevention (CDC)

The Centres for Disease Control and Prevention (CDC) provides funding to several implementing partners, including Family AIDS Care and Education Services, CMMB, Impact Research and Development Organisation, and the Nyanza Reproductive Health Society, to carry out male circumcision activities. The CDC also provides technical and programmatic guidance to the government and its partners to ensure that they implement best practices based on the available scientific evidence and the international guidelines from the World Health Organization, the Joint United Nations Programme on HIV/AIDS (UNAIDS), and PEPFAR.

CDC is a member of both the national and provincial MC task forces and of several national task force subcommittees that develop and review policy and guidelines. The CDC played a major role in producing the revised *National Guidance on Male Circumcision for HIV Prevention*, adapting the clinical manual, developing the MC strategic plan and communications strategy, and adapting the PEPFAR indicators for national VMMC monitoring and evaluation (M&E) tools.

EngenderHealth

EngenderHealth is a partner in the Male Circumcision Consortium (MCC), with extensive experience in reproductive health and HIV/AIDS services for both men and women.

The organisation's specific role in VMMC implementation in Nyanza Province is conducting operations research through the sites supported by APHIA II Nyanza for HIV interventions in Homa Bay, Rongo, Rachuonyo, and Nyando districts. EngenderHealth is also incorporating male circumcision into the wide range of approaches, tools, and curricula that it has developed for men's reproductive health.

This work builds on EngenderHealth's experience in operations research on the introduction of technologies and its core expertise in supporting the roll-out and scale-up of new surgical reproductive health services.

FACES

Family AIDS Care and Education Services (FACES) supports the provision of male circumcision for HIV prevention, along with provider-initiated HIV counselling and testing, at public health facilities and through mobile outreach services. Currently FACES offers these services at three sites in Migori District and two sites in Rongo District.

FACES, a collaboration between the Kenya Medical Research Institute and the University of California at San Francisco, is a nongovernmental organisation that provides treatment, care, and support to people living with HIV and their families, conducts research on HIV, and offers HIV prevention and family planning services.

Impact Research and Development Organization

Impact Research and Development Organization (IRDO) provides programmatic oversight and

administers funding for the Nyanza Reproductive Health Society (NRHS), which is charged with implementing VMMC services in Nyanza

IRDO provides this support as the prime partner in the CDC Male Sexual Health Program (MSHPP). Under the MSHPP, NRHS delivers services and builds the capacity of government and mission health facilities to provide VMMC by training staff and providing equipment and supplies in the target districts.

IRDO also provides VMMC services at four Tuungane youth centres, which are located in Suba, Nyando, Kisumu East, and Bondo districts. Its community monitors in Suba District have followed up to 1000 VMMC clients.

Male Circumcision Consortium

The Male Circumcision Consortium (MCC) aims to reduce the number of new HIV infections in Kenya and save lives by improving and expanding the provision of safe, voluntary male circumcision services.

The MCC, composed of Family Health International, EngenderHealth, and the University of Illinois at Chicago, works with the Nyanza Reproductive Health Society to support the Government of Kenya and other local partners to develop and implement a national male circumcision strategy. It is also expanding the male circumcision research and training centre in Kisumu to train more providers in VMMC.

MCC research is underway to assess the impact of VMMC on HIV transmission and risk behaviours, to monitor clinical outcomes, and to identify the best ways to deliver VMMC services in different settings.

In Nyanza, the MCC supports the offices of the provincial directors of public health and sanitation and of medical services, who coordinate provision of male circumcision services. It supports activities in Kisumu East, Kisumu West, Nyando, Homa Bay, Rachuonyo, and Rongo districts.

Nyanza Reproductive Health Society

The Nyanza Reproductive Health Society (NRHS) has been instrumental in the expansion of male circumcision services in Kenya by building on its experience with the randomised controlled trial of VMMC in Kisumu, its close relationships with provincial and national Ministry of Health agencies, and the capacity at the Universities of Nairobi, Illinois, and Manitoba (UNIM) clinic.

The NRHS' role in the VMMC programme in Nyanza is to build the capacity of service providers and to deliver safe, VMMC services for HIV prevention.

In addition to its training activities, the NRHS has 18 mobile VMMC teams that directly provide comprehensive male circumcision services in smaller health facilities and within communities. By the end of February 2010, these mobile teams, in collaboration with the Ministry of Health staff trained and supported by NRHS, had performed over 54,000 circumcisions.

news briefs

Luo Council of Elders to join district steering committees

The Luo Council of Elders will be part of the male circumcision district steering committees, Dr. Jackson Kioko, provincial director of public health and sanitation, said during a 2 March sensitisation meeting in Kisumu with the council and Nyanza's provincial task force on male circumcision. The district steering committees coordinate the voluntary medical male circumcision programme in their respective districts. Each steering committee is composed of the district health management team, development partners, and selected stakeholders.

Road shows sensitise communities on male circumcision

Nyanza Provincial Commissioner Francis Mutie launched a road show that sensitised communities on voluntary medical male circumcision and the prevention of mother-to-child transmission of HIV, visiting towns in 11 Nyanza districts from 9 - 14 March. Conducted by the Ministry of Public Health and Sanitation, in conjunction with the Nyanza Provincial Task Force on Male Circumcision and UNICEF, the road show travelled to Siaya, Kisumu West, Rarieda, Bondo, Kisumu East, Nyando, Nyakach, Rachuonyo, Rongo, Migori, and Ndhiwa before concluding in Homa Bay.

Zimbabwean team visits Nyanza's VMMC programme

A team of officials from Zimbabwe's Ministry of Health and partners in the Zimbabwean male circumcision programme were in Nyanza for a learning visit on 22-23 February. Zimbabwe is currently piloting male circumcision and will roll out the services later in the year. One of the vital lessons the team members said they learnt during the visit was the importance of partnerships, mobilisation, and proper planning to ensure programme success. Among the sites visited were the Nyanza Reproductive Health Society, the Tuungane Youth Project, and the Catholic Medical Mission Board.

Enhanced recruitment strategy aims to increase demand for circumcision

EngenderHealth/Male Circumcision Consortium, one of the government's partners in the voluntary medical male circumcision programme, is conducting an enhanced recruitment strategy to increase demand for male circumcision services and build on the lessons of the successful Rapid Results Initiative (RRI) held in November and December 2009.

Photos courtesy of Family Health International (pages 1 and 2) and APHIA II Nyanza (page 3)