

# Male Circumcision in Zambia

*Working with traditional  
leaders*



*JOINT PEPFAR-WHO Meeting on accelerating  
VMMC scale up*

*Johannesburg, September 28<sup>th</sup>, 2012*

*Dr. Daniel Makawa,  
National MC Coordinator*





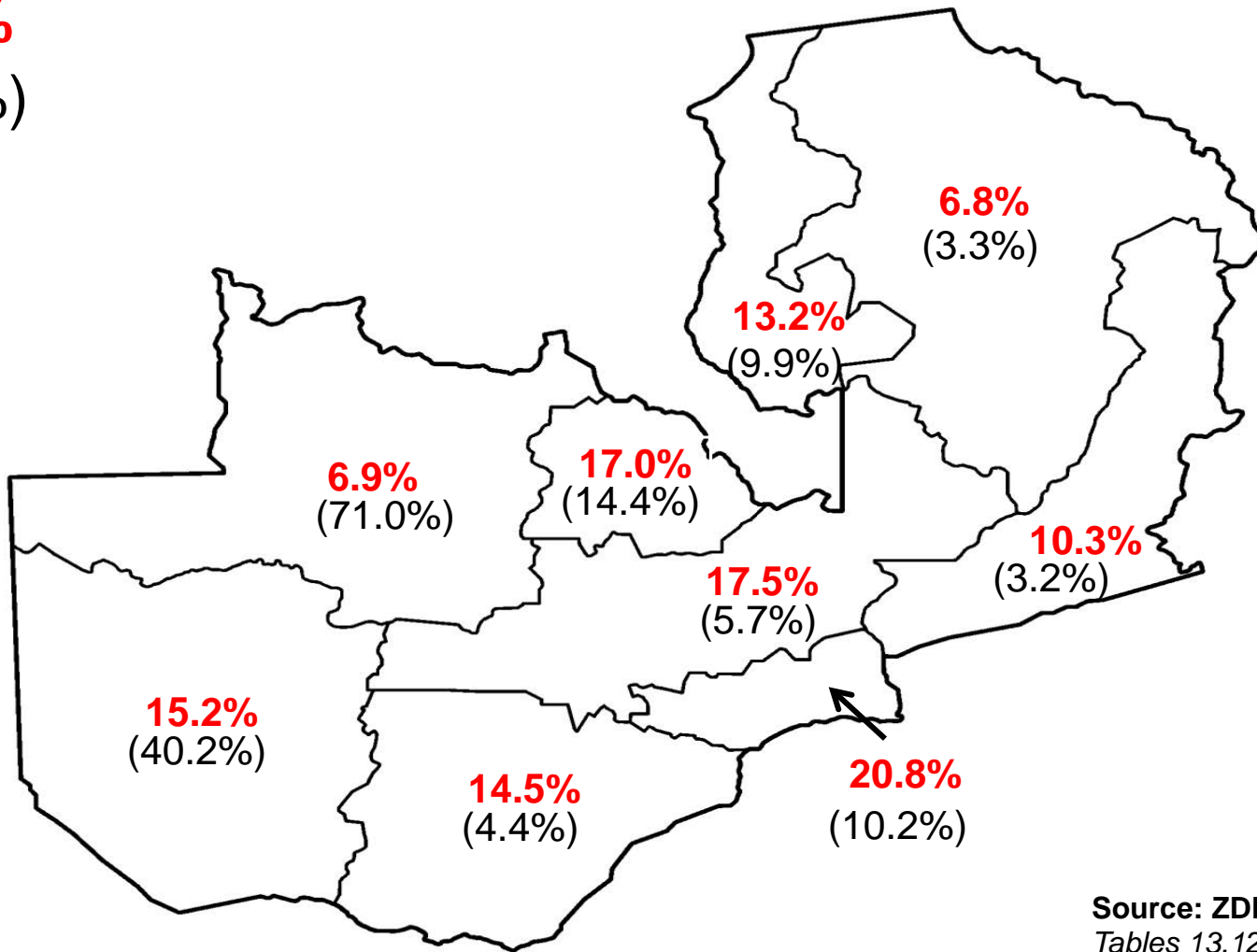
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- In order to achieve universal coverage of VMMC, Zambia needs to reach 1.9 million males by 2015.
- All but two provinces in Zambia are dominated by non-circumcising tribes.
- This has led to low uptake of male circumcision in key provinces despite significant financial investment.
- As such, our ongoing efforts to work with traditional leaders are becoming more strategic with interventions tailored to the varying concerns of different tribes.



# MC Prevalence by Province

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**HIV %**  
(MC %)



Source: ZDHS 2007 GRZ  
Tables 13.12 and 14.5





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## **Challenges being faced in high and low MC Provinces:**

### **North-Western Province**

**MC Prevalence: 71%**

**HIV Prevalence: 6.9%**

- Traditionally circumcising tribes
- Senior Chief has actively engaged with the MoH with the goal of gaining recognition of traditional circumcision

### **Eastern Province**

**MC Prevalence: 3.2%**

**HIV Prevalence: 10.3%**

- Traditionally non-circumcising tribes
- Strong aversion to circumcision due to historical conflict with the circumcising Yao tribe





- Traditional beliefs
- Ignorance
- Different cultural groupings with varying opinions
- Myths and misconceptions
- Tribal inclination
- Costs



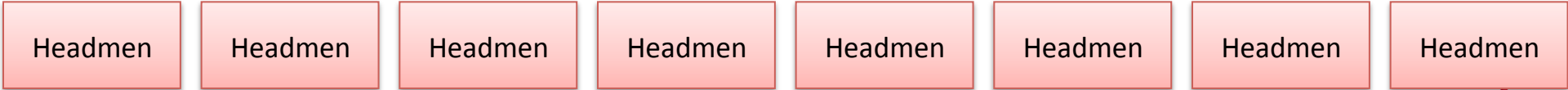
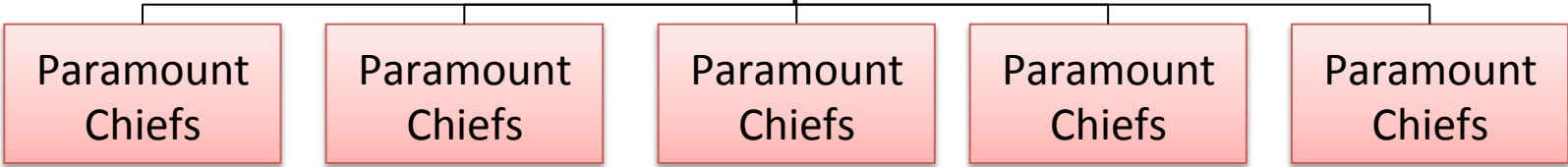
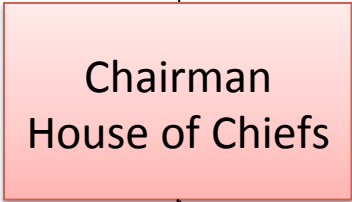
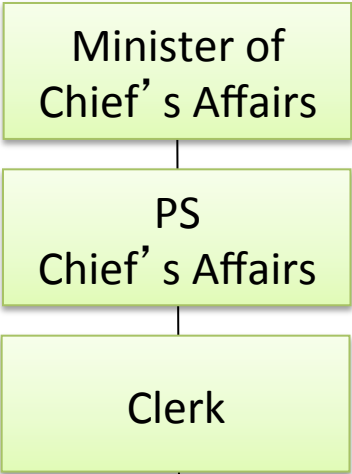
- Lack of knowledge/information on VMMC
- Stigma of the circumcised
- Distances to health centers are long and inconvenient
- Lack of traditional leadership in VMMC activities
- Fear of the risks of VMMC (physical as well as reduced sexual pleasure)





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## **Role of Traditional Leaders in MC**

- Be champions of MC
- Dispel myths and break existing barriers
- Act as link between traditional structures and health institutions

## **Actions Traditional leaders can take**

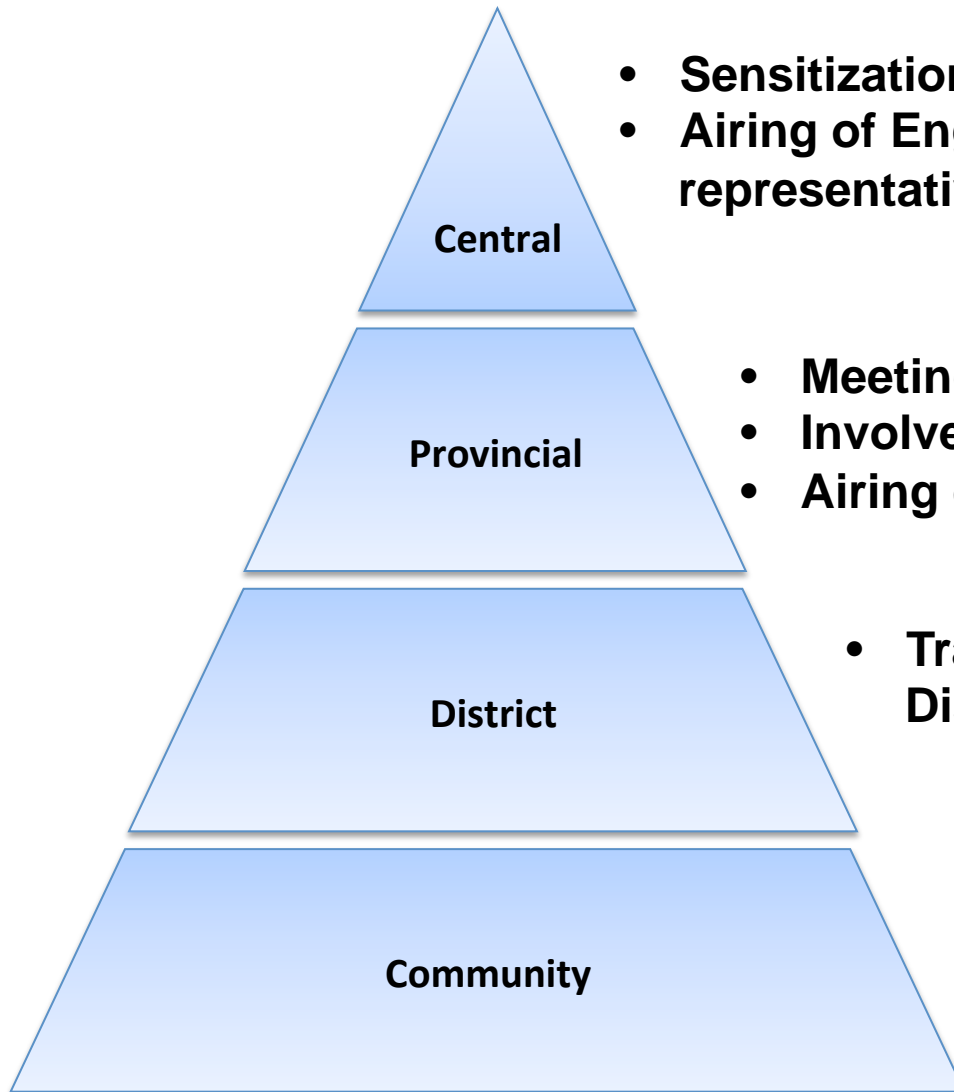
- Undergo MC
- Establish MC taskforce
- Identify gate-keepers
- Incorporate chiefs in HIV prevention activities
- Harmonization of GRZ/ stakeholders activities







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- **Sensitization of House of Chiefs**
- **Airing of English TV adverts by national representatives**

- **Meeting with Paramount Chiefs**
- **Involvement in Traditional Ceremonies**
- **Airing of statements on radio in local language**

- **Traditional Leaders encouraged to attend District Aids Task Force**

- **Field staff coordinate community sensitizations with local Indunas**
- **Support traditional MC ceremonies with VMMC services**





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- Decentralize implementation
- Increased funding to the local entities
- Restructure interventions/strengthen NAC to include chiefs on taskforces i.e. NAC
- Integrate Chiefs into MC activity planning in their areas





PEPAP



**Chief Mazimawe,  
Chairperson House of Chiefs**

← **National VMMC Advert in  
English**



← **Local Language recording  
in Eastern Province**





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**Headman Nkole and National MC  
Coordinator Dr. Daniel Makawa on a local  
radio call-in show in Northern Province**





“We can say that male circumcision is not part of our culture but there is no culture in Zambia that is against male circumcision. We can make this practice a cultural norm until it becomes part of our culture”

***Chief Chikanta (Deputy Chair of the House of Chiefs)***





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“We can achieve these numbers in a shorter period than the one that you have set. Out of the 286 chiefs in Zambia, we can split that figure (the target) into 4000 per chief. If you give me 4000, I will ask my headmen to give me 15 men per village and I will give you the 4000 easily.”

***His Royal Highness Chief Chikanta (Deputy Chair of the House of Chiefs)***





“I may be a woman...but I can contribute by leading the way and mobilizing the chieftdom so that we can encourage our men to be circumcised...”

***Her Royal Highness Chieftainess Nkomesha Mukamambo II***







**Zikomo!**  
**Thank-you!**

