Safe male circumcision for HIV prevention

BACKGROUND

Male circumcision has been found to reduce the risk of HIV infection among men by as much as 60%. Between 2007 and 2010, HCP supported the Ministry of Health’s AIDS Control Programme (ACP) to educate leaders, health workers, and the public about male circumcision and its link to HIV prevention. This effort included public debates, radio and television talk shows, educational materials for health workers and their clients, and education and counselling through a national Health Hotline.

In September 2010, the government of Uganda launched a policy to provide safe male circumcision (SMC) as an essential health service. The policy seeks to increase the number of circumcised men by educating the population about safe male circumcision, increasing the number of health facilities that provide circumcision services and equipping health providers with the skills they need to conduct the procedure. Currently, HCP is assisting the Ministry to disseminate the SMC Policy and Communication Strategy, and to develop a mass communication campaign to increase uptake of SMC services among men 15 – 49 years old. To assess progress on public education about SMC and HIV, and to inform future communication, the HCP 2010 Survey included several questions on male circumcision.

MAJOR FINDINGS

As many as 44% of respondents had heard or seen messages on safe male circumcision in the 12 months preceding the survey. Radio was the most common source of this information, reported by 82% of those respondents who heard or saw messages, followed by community members (17%), health workers (12%) and newspapers (9%). The majority of those who had seen or heard messages about SMC resided in urban areas of Uganda and had a secondary education or higher.

Thirty-eight percent of respondents who were exposed to an SMC message reported taking action as a result. The actions they reported are summarized in the graph to the right.

Overall, most respondents reported positive attitudes towards circumcision. 71% believed that circumcision was not harmful to a man’s health/well being. 73% of respondents believed that circumcision was beneficial to a man’s health. Of these, 62% believed that it reduced chances of getting HIV while 46% believed that it prevented getting other sexually transmitted diseases. 37% of respondents knew of a facility that provides medical male circumcision services.

Male respondents were asked if they have been circumcised. Overall, 20.5% of all men had been circumcised at the time of the survey. Some 84% of these were circumcised as babies. The highest proportion circumcised was from the Central region (28%), followed by the Western and Northern regions (19%) and the Eastern region (16%).
About 45% of uncircumcised males intended to get circumcised in the future. Most of them said their main reason for getting circumcised is to reduce their chances of getting HIV (75%) or other sexually transmitted infections (40%), while 11% intend to get circumcised for cultural reasons. Unmarried men were more likely than married or divorced/widowed men to intend to get circumcised.

Men who had been exposed to safe male circumcision messages in the past year were more than twice as likely as those not exposed to intend to get circumcised.

**Distribution of respondents intending to circumcise by exposure to safe male circumcision messages and marital status**

![Graph showing distribution of respondents intending to circumcise by exposure to safe male circumcision messages and marital status.](image)

Younger, more educated, urban respondents were also more likely to intend to get circumcised than their older, less educated, rural counterparts.

**Distribution of respondents intending to circumcise by age, education and residence**

![Graph showing distribution of respondents intending to circumcise by age, education and residence.](image)

Men who did not intend to get circumcised reported that they either saw no need to circumcise (43%), or were worried about pain associated with the procedure (24%).

**SUMMARY AND CONCLUSIONS**

These findings point to a high level of acceptance and intention among men to go for safe male circumcision. The findings also show that communication about safe male circumcision influences the intent to circumcise. Older, married men are less likely to intend to get circumcised, despite their increased risk of HIV. There is need to intensify efforts in future to convince these men to get circumcised. There is also a need to inform more men about where SMC services are available.

Findings from this survey are not generalizable beyond the districts surveyed, and do not prove causation. All data, unless referenced, are from the HCP 2010 Survey Report.