VMMC COUNTRY SITUATION

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Initiatives
Presentation outline

• Background
• Strategies being implemented
• Key accomplishments
• Enabling environment
• Challenges
• Lessons learnt
• Key next steps
Background

• The overall prevalence of MC in Tanzania is estimated at 70%, yet rates vary across regions (26.4% in Kagera to 97.9% in Dar es Salaam).
• Some communities in Tanzania have male circumcision practiced as a tradition. These areas have higher MC prevalence.
• Situation analysis studies showed that
  - MC was acceptable even in non circumcising communities
  - Women were ready to support men to undergo a circumcision
  - Health facilities and workers were ready to support MC services as they use to perform it as normal procedure
In 2009, MoHSW in collaboration with PEPFAR support started MC in Tanzania in three regions (Mbeya, Iringa and Kagera), based on high HIV prevalence and low MC prevalence levels.

Initial partners included: Jhpiego (Iringa); ICAP (Kagera); and Mbeya Referral Hospital (Mbeya)

Since 2010, MC extended to more regions: Njombe, Tabora, Rukwa, Katavi, Simiyu, and Shinyanga with old and new partners
Strategy

• The National Strategy for Scaling up MC was developed in 2010 with the goal of contributing to the reduction of new HIV infections among men 10-49 years of age by increasing the prevalence of male circumcision to 80% in the regions identified as public priorities for MC for HIV prevention.
MC for HIV prevention is delivered as a minimum comprehensive package with:

- HIV testing and counselling
- Active exclusion of symptomatic Sexual Transmitted Infections (STIs) and treatment where necessary
- Promotion and provision of male condoms
- Counselling on risk reduction and safer sex
- MC surgical procedures
Achievements

Program Management Achievements
• Development of national MC strategy
• Appointment of national MC focal person
• Formulation of MC TWG

Training
• Created a cadre of national MC ToTs (12)
• Trained service providers in MC (400+)
Achievements cont...

**Implementation**

- 255,000 men have been circumcised through campaign, outreach and static sites by SAPR 2012 (March 2012)
- Task-shifting to nurses has greatly enhanced efficiency and cost-effectiveness
- Use of MOVE Model to allow for mass circumcisions
Achievements cont...

**Monitoring and Evaluation**

- Development of national M&E system (paper and electronic)

**Quality Assurance**

- Two EQAs (2011 and 2012), which included experts from MC stakeholders; for sustainability, to be adopted into QI initiative of HIV and AIDS Services already in place
Research

• SYMMACCS Study and DMPPT were completed and results disseminated
• Formative assessment conducted on barriers to reaching older men
• In progress: Quality of HTC in the context of MC programs
• In progress: RCT for reaching older men
• In progress: PrePex pilot in Tabora Region
Enabling Environment

- Strong URT buy-in and support (national, regional, and local levels)
- Strong partnership between USG and URT
- Circumcision is not foreign to most communities
- High demand, particularly among young men
- URT facilities and HR utilized for MC program
Challenges

• No URT funds allocated for MC Program
• Unreliable supply chain (RTK, MC kits, and other necessary commodities)
• Reaching older men with MC services
• Insufficient HR for delivery of MC services
  ✓ Mobility of MC trained staff compounds problem
Lessons learnt

• Strong partnership between USG and URT has been critical to MC scale up in Tanzania
• Task-shifting to trained nurses has alleviated some of the HR challenge and allowed for improved efficiency
• To date, disposable MC kits are more cost-effective than reuseable equipment
• Overtime pay to work outside normal work hours motivates staff
Key next steps

• Mobilize additional MC funds (both within URT and among development partners)
• Support new ways of reaching older men
• Improved coordination of national MC program
• Increased engagement of regional and district-level authorities (through annual plans)
• Strengthened data sharing between USG partners and URT
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