Maseru's Most Masculine Clinic: Improving Men's Access to Health Care in Lesotho
Background: VMMC/ male clinic

- Scott hospital VMMC/Male clinic is a stand alone site, away from the main hospital, only male clinic in the country within a public hospital. VMMC site since 2014
- Anecdotal and DHS evidence points out that generally Basotho men do not go for healthcare services
- Funded by USAID, VMMC sites has been found to be a platform for men to access healthcare services, serving over 130,000 men
- Integrated services
- Program began July 2016, Populations served
  - adult males > 15 years of age
  - Female partners
Theory of Change

Program Inputs

- Community Interventions:
  - Community Sensitization
    - Radio shows
    - Satisfied Clients
    - Word of Mouth
  - Community ART Groups + other chronic conditions

- Facility Interventions:
  - Male priority health services
  - Male providers
  - Flexible hours, Mon-Sat
  - Provider knowledge, skills, attitudes for male conditions
  - Integrated services

Outputs

- Changed perceptions of quality care and health seeking by clients and providers

Outcomes

- Improved adherence to treatment and retention
- Increased health seeking
  - Intention and Agency improved
- Increased diagnosis of chronic conditions

Impact

- Reduced transmission of infectious diseases
- Improved health and well-being of Basotho population

Gender Norms
Socio-Cultural Norms
Behavioral Norms
Reduced Stigma
Client visits July 2016-January 2017
(not including VMMC)
All Clients tested for HIV in the male clinic, July 2016 to Jan 2017

Positive, 150, 14%

Negative, 926, 86%
150 men newly diagnosed with HIV from July 2016 to January 2017

New HIV Diagnoses of VMMC Clients by Age Range

- 20-24 years: 3.2%
- 25-29 years: 18.5%
- 30-49 years: 31.0%

New HIV Diagnoses of non-VMMC Clients by Age Range

- 20-24 years: 7.1%
- 25-29 years: 19.5%
- 30-49 years: 26.4%
- 50+ years: 8.9%
TB Cascade, July 2016 – January 2017

- Investigated (with symptoms): 352
- Diagnosed: 45
- Initiated on ATT in OPD TB Corner: 45
- Co-infection: 17
Visits by Chronic diagnosis

Commonly Seen Chronic Diseases

- HIV
- HTN
- DM
- arthritis
- asthma
- psych dx
- epilepsy
People receiving services for chronic diseases by HIV status, July 2016 – January 2017

epilepsy
psych dx
asthma
arthritis
DM
HTN

0 50 100 150 200

positive negative unknown

innovating to save lives
an affiliate of Johns Hopkins University
Reasons for acute visits among HIV positive and negative clients

- Allergies
- Gastrointestinal
- TB
- Sexually Transmitted Infection
- UTI
- Derm dx
- Headache
- Respiratory tract infection
- Trauma

Chart showing visits by month with categories color-coded.
Sexually transmitted infections are commonly diagnosed and treated.
“I'm free to explain all my diseases and to ask some questions to the male doctor”.

“Male doctors have secrets and are confidential unlike women doctors.”

“Yes, because we are free to raise our concerns... Ever since we were provided these services as men only, I feel very much satisfied.”
#whatworks

- Male-priority clinic increases attendance
- VMMC is a learning platform to address males need
- sociocultural and gender norms
- Co-morbidity is common
- Need to expand access to care for men living with chronic diseases beyond HIV
- Enhancing partner testing