Policies for VMMC in 14 priority countries of east and southern Africa

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WHO VMMC Workshop -- East and Southern Africa
Durban, South Africa
March 1, 2017
Overview

I. Global guidance related to VMMC policy

II. Online review of VMMC authorization in priority countries

III. Gaps in authorization of health workforce for VMMC

IV. Recommendations
WHO and UNAIDS Guidance on VMMC Policy

- **VMMC Framework 2016-21**
  - Strategic direction 2: Policies and services for greatest impact
  - Integrated, publicly financed, minimum health services package attracting males
  - Implies progress with universal primary health care in the 14 priority countries

- **2007 Recommendations**
  - “Health systems in developing countries are weak and there is a shortage of skilled health professionals.” Thus, the importance of strengthening systems & workforce.

- **2007 Guidance on Human Rights, Ethical and Legal Considerations**
  - Voluntary, Accessible, Acceptable, Quality, Safe, Non-discriminatory, and Private
  - Health workforce professional regulation (e.g., scopes of practice; codes)
  - Traditional religious practitioners (e.g., Eastern Cape Province law in RSA)
  - Age of Consent (ages 0-9, 10-17, 18+ and whether independent/joint)
Methods for Online Review


- Google searches for “country name” and “circumcision policy (guideline) (plan) (strategy)”, “task sharing policy”, “health package”. Also searched Ministry of Health websites.

- Searched legal database of African Regulatory Collaborative (ARC) Knowledge Gateway as well as Nursing Council websites

- Who is authorized to conduct VMMC in 14 priority countries?
<table>
<thead>
<tr>
<th>Country</th>
<th>Nurse Scope of Practice</th>
<th>VMMC Policy, Plan, Strategy</th>
<th>Task Sharing Policy</th>
<th>Minimum Health Services Package</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kenya</td>
<td>Not explicit</td>
<td>MD, CO, Nurse</td>
<td>Draft (MO, Nurse, Midwife, CO)</td>
<td>VMMC included (2014)</td>
</tr>
<tr>
<td>Lesotho</td>
<td>?</td>
<td>?</td>
<td>?</td>
<td>?</td>
</tr>
<tr>
<td>Malawi</td>
<td>Not explicit</td>
<td>MD, CO</td>
<td>?</td>
<td>VMMC NOT included (2004)</td>
</tr>
<tr>
<td>Mozambique</td>
<td>?</td>
<td>MD, Nurse</td>
<td>?</td>
<td>?</td>
</tr>
<tr>
<td>Namibia</td>
<td>Yes (WHO 2013); Revised since 1999?</td>
<td>MD, Nurse? Midwife?</td>
<td>?</td>
<td>?</td>
</tr>
<tr>
<td>Rwanda</td>
<td>Not explicit</td>
<td>MD, Nurse (WHO 2013)</td>
<td>?</td>
<td>VMMC included (2011); MD only</td>
</tr>
<tr>
<td>South Africa</td>
<td>Yes (WHO 2013); Per SANClast revised ’91</td>
<td>MD</td>
<td>?</td>
<td>?</td>
</tr>
<tr>
<td>Tanzania</td>
<td>Not explicit</td>
<td>MD, Nurse</td>
<td>MO, AMO, CO, CA, Nurse, NO, ANO</td>
<td>VMMC included (2013)</td>
</tr>
<tr>
<td>Zambia</td>
<td>?</td>
<td>MD, ML, CO, Nurse</td>
<td>?</td>
<td>VMMC included (various)</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td>Yes (WHO 2013)</td>
<td>MD, Nurses</td>
<td>MD, Nurse</td>
<td>?</td>
</tr>
</tbody>
</table>
Gaps and Highlights

- No clear policy authorizing Task Shifting (non-MD primary provider) in Ethiopia, Lesotho, Namibia, South Africa, Swaziland & Uganda

- Found no Nursing Scope of Practice that explicitly includes VMMC. However, all 7 found may implicitly authorize VMMC.

- 7 of 9 countries’ Minimum Health Service Package includes VMMC

- Tanzania Task Sharing Policy authorizes 7 cadres to perform VMMC
**Recommendations**

- Data are only from an online review conducted in February 2017. Additional sources available in-country should be consulted (e.g., job descriptions, schemes of service, scopes of practice for Non-Physician Clinicians such as clinical officers).

- If interested in Age of Consent, see our AIDS Law Brief for VMMC in Tanzania [https://globalhealth.washington.edu/pepfar-policy-monitoring](https://globalhealth.washington.edu/pepfar-policy-monitoring)

- Monitor VMMC policy passage and implementation across all priority countries

- **Countries should consider explicitly authorizing VMMC task sharing:**
  - Ethiopia, Lesotho, Namibia, South Africa, Swaziland, and Uganda
Thanks for your attention.

Questions or comments?

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