

Case study 2: Using satisfied clients to bring older men to VMMC services in Chikwawa District, Malawi

Setting

Chikwawa District in the Southern Region, Malawi (October 2017 to December 2018).

Challenges

Historically, uptake of VMMC in the Chikwawa District was low. Only 21 168 clients sought VMMC services in the district in the four years between October 2013 and September 2017. Of these, only 34.2% were 15–29 years of age, the priority age group for VMMC in Malawi. The demand creation approaches in the district were not effective in bringing older men into services, whereas programme experiences from Mozambique and the United Republic of Tanzania at the time suggested that using satisfied clients as peer community mobilizers (CMs) was effective in increasing demand for VMMC, particularly in reaching the older age groups.

Barriers

Men in the Chikwawa District feared experiencing pain during the VMMC procedure, had concerns about abstinence during wound healing and believed that HIV testing was mandatory. Some perceived VMMC to be an intervention for young adolescents.

Initiatives taken

- USAID supported two assessments of demand creation in Malawi: i) A 2016 rapid assessment confirmed the barriers stated above. ii) A June 2017 assessment aimed to identify key gaps and challenges and recommend areas for improvement in generating demand. Discussions with CMs revealed that there were gaps in their training, facilitation, equipment and supervision. Demand creation teams were not considering satisfied clients for recruitment as CMs. Men who have undergone VMMC have first-hand information and personal experience with the service.
- AIDSFree Malawi trained CMs on interpersonal communication (IPC) for VMMC demand creation. They equipped them with a bicycle to facilitate easy movement within their catchment area, identification cards and branded t-shirts to help the community to identify them easily and also help boost CMs' credibility in the community as trusted sources of VMMC information. They were provided with social and behaviour change communication materials addressing the common myths, misconceptions and frequently asked questions about VMMC, as well as job aids to support IPC with community members and clients.

- Three community mobilization and communication assistants (CMCAs) provided regular supportive supervision visits to CMs and monitored the quality of CMs' demand creation communications.
- CMs received a fixed monthly income in addition to a performance-related payment shared equally, every two weeks, among two or three CMs from neighbouring catchment areas. This compensation arrangement ensured retention of the CMs.
- Key implementers of this initiative were AIDSFree Malawi in conjunction with the Chikwawa District Health Education Office and the Chikwawa District VMMC Coordinator's Office. The traditional leaders within the district collaborated by enabling the CMs to operate smoothly within their communities.

Results

- A team of 40 CMs was recruited, trained and retained. More than half were satisfied clients.
- The percentage of those seeking VMMC who were ages 15–29 increased from 34.2% in FY17 to 71.3% in FY18 (Fig. 1).
- Overall, uptake of VMMC in the district also increased. The district achieved its highest number of VMMC clients in one year (18 173 clients against a 20 000 target), which was also the highest achievement against its targets (90.9%) in five years.

Lessons learnt

- Use of satisfied clients as CMs is very effective for VMMC IPC. Their personal experience gives them first-hand knowledge of the basic information they need to communicate. They inspire more trust from their peers and are most suited to address men's common fears around managing pain and remaining abstinent during healing.
- Selection of mobilizers: The profiles of the CMs are an important determinant of who they can influence.
- Training and equipping community mobilizers helped them communicate with men in the priority age group.

Fig. 1. The percentage of VMMC clients who were 15–29 years of age in the Chikwawa District in FY18, by month