Case study 9: Implementing soccer galas as a demand creation strategy to meet age pivot for the VMMC programme in Masvingo Province, Zimbabwe

Setting
Soccer gala held at Mtimwi Secondary School, Zaka District, Masvingo Province, Zimbabwe (14 November 2018).

Challenges
Analysis of programme data showed an average 50% enrolment of the primary target group of males 15–29 years of age. This was below the 65% target. There was low uptake of VMMC among adult men and out-of-school boys (15–29 years of age) in the district.

Barriers
Perception – Cultural and religious views that the VMMC programme is for young boys.
Reach – Older boys and adult men shunning VMMC service delivery points, even with transportation provided.

Initiatives taken
1) Bringing VMMC to soccer fields creates an effective platform for engagement and service delivery. Community engagement entailed involving traditional, political and religious leaders, their communities, soccer teams’ representatives and schools in order to obtain their buy-in. This involved collaboration with the Ministry of Health and Child Care, the International Training and Education Center for Health (I-TECH) and its implementing partners’ consortium of local NGOs (ZAZIC) and local community structures. Other collaborators were the Ministries of Sport, Arts and Recreation; Home Affairs; Primary and Secondary Education; local government/traditional leaders (local chief and headmen); the local school, which provided sports fields; and the local church, which provided entertainment.
2) Two caravans, four tents, VMMC consumables and three vehicles to ferry circumcised clients home were mobilized for the gala. Enough staff (12 VMMC clinicians, four counsellors, three HIV testing nurses, two VIAC1 nurses) were provided to manage each station in the service provision chain from community mobilization, registration, HIV testing services (HTS), pre-op counselling, performance of the procedure, post-op counselling and cervical cancer screening for women. There were 10 highly conspicuous mobilizers in their brightly coloured bibs.
3) Service delivery was conducted at a nearby clinic and in the caravans stationed within the sports field. Ten beds were concurrently used for patients.
4) Eight soccer teams played knock-out matches, with winners walking away with soccer kits and soccer balls. Four women’s soccer teams also participated, making the gala a true family event.

Results
• Women got cervical cancer screening in a caravan, where 34 adult women were screened.
• At the HIV testing tent, more than 250 clients were tested for HIV.
• Client data were recorded on routine VMMC documents, including the VMMC register and the client information form.
• A total of 187 clients were circumcised at the gala.
• 91% of the circumcised clients were in the age group 15 to 29 years – a commendable achievement.
• Details of the age disaggregation of circumcised clients are shown in the chart below.

Lessons learnt
1) When the entire community is involved, it becomes easier to reach and convince men and out-of-school boys to get circumcised.
2) When communities are allowed to own and take the lead in local programmes and interventions, the yields from those programmes increase.
3) Using soccer as an enticement helped to keep large numbers of people focused together on the same activity. This resulted in increases in both reach and uptake of VMMC.
4) Integrating services that are related and provided in one place brings together the majority of family members who benefit together from the health messages and services.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Number circumcised</td>
<td>9</td>
<td>83</td>
<td>55</td>
<td>32</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

1 Visual inspection with acetic acid and camera for cervical cancer detection.