

Voluntary Medical Male Circumcision

Creating an AIDS-Free Generation

In 2016, 1.8 million people were newly infected with HIV. Of these, 1.2 million lived in sub-Saharan Africa.¹ Preventing new HIV infections is vital to achieving epidemic control. Since the early 2000s, strong and consistent scientific evidence has supported inclusion of voluntary medical male circumcision (VMMC) as a component of HIV prevention programs. VMMC is a safe, minor procedure that reduces the risk of female-to-male HIV transmission by 70%.² Unlike other HIV prevention strategies—treatment as prevention, oral pre-exposure prophylaxis, and condoms—VMMC has a vaccine-like durability: a brief interaction with the health system yields a lifetime of partial protection against HIV and other pathogens, including HPV and syphilis. In 2007, the World Health Organization (WHO) and Joint United Nations Programme on HIV/AIDS issued recommendations that supported promotion of VMMC, particularly in settings with high HIV prevalence and low male circumcision levels where the public health benefits would be maximized.

Cost and impact modeling studies show that rapidly scaling up VMMC to 80% of men of reproductive age would avert millions of new HIV infections and save billions of US dollars in care and treatment costs by 2025.³

Since 2003, Jhpiego has emerged as one of the few international organizations with the knowledge and experience to support, strengthen, and scale up VMMC services while ensuring safety and quality. By the end of 2017, more than 3 million males had accessed VMMC through Jhpiego-supported services across 12 VMMC focus countries in East and Southern Africa.

With the generous support of the President's Emergency Plan for AIDS Relief, Jhpiego collaborates with ministries of health and defense force health systems to scale up VMMC as part of a comprehensive package of HIV prevention services. Central to Jhpiego's success is the ability to introduce and quickly scale up evidence-based innovations by fostering acceptance and demand; offering convenient, respectful, and high-quality services; and leveraging data management systems that assist key stakeholders with decision-making.



Young boys and men are counseled before being circumcised in a health center in Maputo, Mozambique. Photo: Kate Holt/Jhpiego

Jhpiego is a key player in the global dialogue on VMMC, publishing training packages and manuals that serve as international reference materials on VMMC and early infant male circumcision (EIMC). Jhpiego is also a leader in VMMC training, serving as a trainer for implementing partners in Botswana, Ethiopia, Kenya, Malawi, Mozambique, Namibia, Rwanda, Tanzania, and Zambia.

Highlights from Jhpiego's VMMC Portfolio

VMMC Package of Services

- VMMC services provide an opportunity to counsel, screen, treat, and/or refer men, who rarely access health services.
- Jhpiego's VMMC programs offer a comprehensive WHO-recommended health care package that includes:
 - Offer of HIV testing services and linkage to care and treatment
 - Age-appropriate counseling on VMMC and HIV risk reduction
 - Provision of condoms
 - Screening and treatment for sexually transmitted infections
 - VMMC procedure
 - Post-operative clinical and counseling support



Jhpiego-Supported VMMCs Through September 30, 2018

Namibia = 20,262

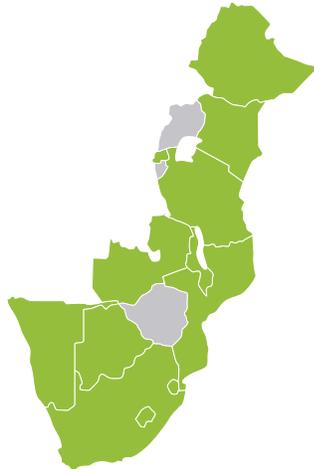
Botswana = 43,669

South Africa = 85,420

Lesotho = 176,275

Swaziland = 19,465*
**Program ended in 2011*

TOTAL = 3,727,818



Ethiopia = 90,633

Kenya = 194,843*
**Program ended in December 2016*

Rwanda = 313,988

Malawi = 275,530

Mozambique = 1,233,396

Tanzania = 873,057

Zambia = 401,280

Mozambique

- Jhpiego works closely with the Ministry of Health. Since 2009, Jhpiego has been the lead VMMC implementer in Mozambique working with the US Agency for International Development, the US Centers for Disease Control and Prevention, and the US Department of Defense.
- As of September 2018, the program had provided comprehensive VMMC for HIV prevention services to more than 1 million men and boys in five provinces with high HIV prevalence.
- Mozambique's VMMC program was one of Jhpiego's four pioneer programs that implemented pilot studies on the use of circumcision devices for VMMC. The program also developed an electronic client registry that provides daily data on adverse events, follow-up visits, and sociodemographic data. This real-time data capture has helped the VMMC program to analyze and apply data for decision-making to provide high-quality health service delivery.

Tanzania

- Jhpiego has supported the Ministry of Health and Social Welfare to scale up VMMC services in Tanzania since 2009. As of September 2018, nearly 875,000 men and boys had received VMMC in regions supported by Jhpiego.
- The health care cost savings from Jhpiego's VMMC programs in Tanzania have been estimated at \$68.2 million.
- Through the AIDSFree Project (2014–2019), Jhpiego provides comprehensive prevention services that enhance VMMC and EIMC services in Iringa, Njombe, Tabora, Morogoro, and Singida regions. From October 2015 to September 2018, Jhpiego provided VMMC to 487,604 men and boys, HIV testing services to 377,286 (77%) of VMMC clients, and linked 1,030 of those testing positive to HIV care and treatment.
- To reach men who had not received VMMC, in 2012, Jhpiego Tanzania introduced the use of Quantum GIS (geographic information system) to strategically deploy mobile VMMC services to underserved rural communities. The program used GIS to overlay population data with coordinates of health facilities to identify areas in Iringa, Njombe, and Tabora with a high concentration of potential clients. Based on the success of this approach, Jhpiego is expanding use of GIS to VMMC programs in Malawi and Namibia.

References

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2. Lei JH, Liu LR, Wei Q, et al. 2015. Circumcision status and risk of HIV acquisition during heterosexual intercourse for both males and females: A metaanalysis. *PLoS ONE* 10(5): e0125436. doi: 10.1371/journal.pone.0125436.
3. Njeuhmeli E, Forsythe S, Reed J, et al. 2011. Voluntary medical male circumcision: Modeling the impact and cost of expanding male circumcision for HIV prevention in Eastern and Southern Africa. *PLOS Med* 8(11): e1001132. doi:10.1371/journal.pmed.1001132.