

# Building South Africa's capacity to resume & scale-up VMMC services during the COVID-19 pandemic



#PEE076 | Option 2 | Track E18 | Adjoa Kwarteng<sup>1</sup>, Lisa Mulenga<sup>1</sup>, Bridget Dube<sup>1</sup>, Collen Bonnecwe<sup>2</sup>, Dayanund Loykissoonlal<sup>2</sup>  
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## Background

In March 2020, the National Department of Health (NDoH) took an informed decision to temporarily suspend the Voluntary Medical Male Circumcision (VMMC) program in response to rising COVID-19 infections, the ensuing strain on the public health system and the presidentially-mandated hard lockdown.

However, the suspension of VMMC services threatened to erode significant efforts made to prioritize HIV prevention in a high-burden country such as South Africa.



To lift the suspension, NDoH first needed to provide clear guidance on how to resume safe VMMC services according to the "new normal". NDoH requested support from the MMC SUSTAIN team to jointly plan and deliver a high-quality, high-volume VMMC program during a pandemic.



## Intervention

We drafted and helped disseminate a **Phased VMMC Implementation Plan** informed by:

1. COVID-19 surveillance data
2. Global best practices
3. Consultations with key stakeholders such as WHO, CDC, and VMMC Implementing Partners

This included an outline of key measures that districts must adopt before resuming VMMC services. Districts were encouraged to customize the plan with Implementing Partners to foster collaboration.

Additionally, we integrated COVID-19 indicators into an existing VMMC site assessment tool and advocated the use of district Continuous Quality Improvement (CQI) teams, trained in occupational safety and COVID-19 prevention and management, to assess site readiness and conduct routine quality checks. We then assisted select districts to devise and roll-out strategies to propel program scale-up.

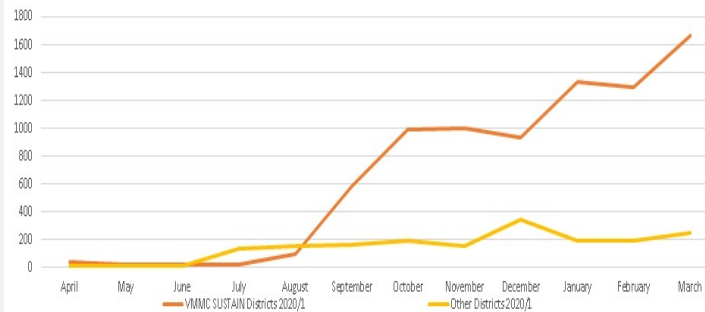
The above-described methods and tools could be replicated in other regions and/or provinces to maintain high-quality HIV prevention services during public health emergencies.



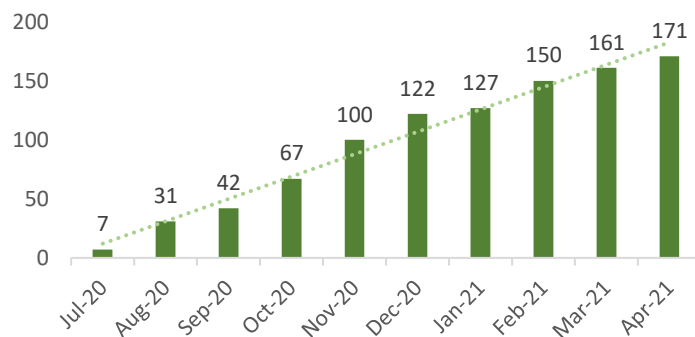
## Results

Functional CQI teams played a prominent role in districts' ability to assess sites and resume VMMC services once VMMC service suspension was lifted in July 2020. This resulted in a 24-fold increase in COVID-19 protocol-compliant VMMC sites re-opening in MMC SUSTAIN-supported districts, which translated to 750% more VMMCs, compared to the national average, by March 2021.

Average performance of VMMC SUSTAIN districts vs. Other districts



Active VMMC sites in MMC SUSTAIN districts since service resumption



## Lessons Learnt

District DoH, when equipped with relevant tools, guidelines, and technical assistance, are capable of customizing national plans to work within their unique context. Our approach underscores the need to centralise responsibility for planning, assessing and monitoring the COVID-19 response. CQI teams are well-placed resources to unlock districts' ability to assure service quality amid a pandemic.

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