



Namibia:
**where are we in
implementing MC
activities?**
**What are the operational
research needs?**

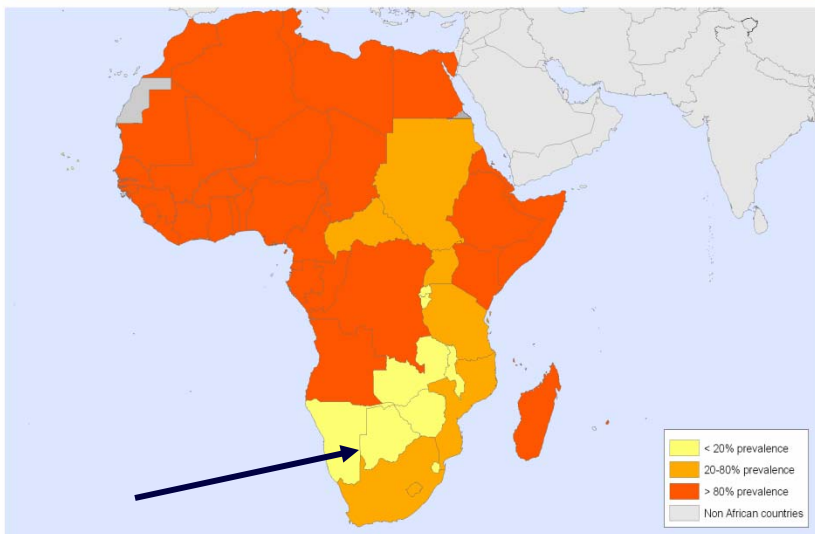
Mbayi KANGUDIE MD, MPH



Namibia



Male circumcision prevalence at country level for Africa, as of December 2006

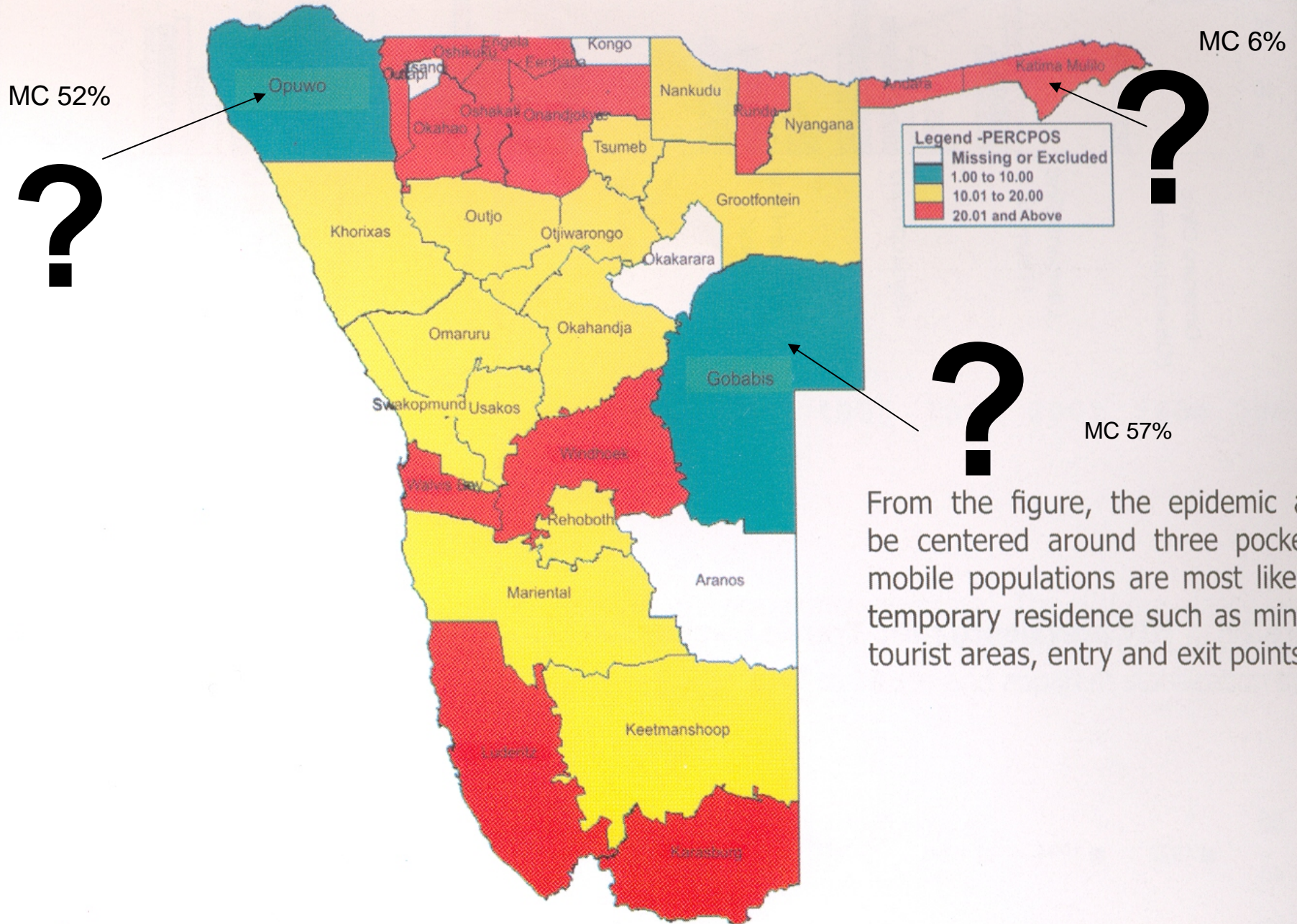


 **World Health Organization**
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Data Source: DHS and Other Publications
Map Production: Public Health Mapping and GIS
Communicable Diseases (CD), World Health Organization
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- **Population: 2 million**
- **HIV prevalence: 17.8% (ANC 2008)**
- **204, 000 PLHIV**
- **High grade generalized epidemic**
- **MC prevalence: 21%**
- **>52% done traditionally (3 mth-6 yrs): no rite of passage**

Namibia 2006 ANC sentinel survey





MC activities Timeline



2007

2007

2008

2009

2009

MoHSS support

President support

KAP survey in the military

MC questionnaire into VCT

KAP survey amongst teachers

Monday, 30 July 2007

NATIONAL

NEW ERA

5

Circumcision Arouses Interest in Namibia

By Petronella Sibeene

WINDHOEK – Recent research reports claiming that male circumcision reduced the risk of HIV/AIDS infection by up to 60 percent, have started receiving serious attention from the health sector in Namibia.

Namibian HIV Clinicians Society President, Dr Bernard Haufiku, said in light of research findings in some countries suggesting that male circumcision is one of the most effective methods of reducing infection, relevant stakeholders in Namibia have started networking so as to find a way to address this issue.

"It is a big issue with high cost

implications, but we (Clinician society) feel circumcision should be recommended once resources are available. It should be recommended and should be done under hygienic conditions," he said.

Despite reports that male circumcision reduces the HIV transmission rate, Haufiku called on Namibians to continue applying the traditional ABC HIV prevention principle.

He said although there is scientific evidence that circumcized men have 60 percent less chance of contracting the HIV virus as compared to uncircumcized males, studies have not yet shown the direct benefit for women.

"The behavioural change messages of prevention packed in the

traditional ABC (Abstain, Be faithful, Condomize) are still very valid, and circumcision is just an "add on" intervention. Our ABC message can actually include another C to become ABCC," he said.

"Circumcision" Haufiku added "is not a magic bullet, nor is it a licence to unprotected sex or any risky behaviour."

While national strategies to scale routine offer for male circumcision for all Namibians are yet to be decided, Haufiku said health care workers and Medical Aid Funds should not deny individuals the right to have access to circumcision where it is available and safe.

Last week Wednesday, medical experts met in the capital to discuss

the new development in the search for a reduction to the spreading of HIV virus.

A surgeon from Zambia, Dr Kasonda Bowa, said countries such as Kenya, Uganda and South Africa have pilot-tested the new development, and it was found that male circumcision is one method that can be used in reducing HIV along with condoms.

Although male circumcision does not prevent one from becoming 100 percent infected, there is a 61 percent reduction, he said.

Male circumcision in Namibia is not practised by all tribes. It is mostly done in the Kunene and Omaheke Regions where the Ova-herero people originate.

The same regions have recorded low HIV infections, which shows that male circumcision is one of the methods to be used in reducing the infection rate, said Ministry of Health and Social Services official, Sandra Gowases.

Statistics show that 15 000 Namibians die of HIV/AIDS every year, and with an infection rate of 19,7 percent, it is one of the hardest-hit countries in sub-Saharan Africa.

The 2006 National Sentinel Survey Report also shows that overall, HIV prevalence from the 2006 survey was 19.9 percent, representing an increase of 0.02 percent compared to 2004 which recorded a prevalence rate of 19.7 percent.



Health Minister Dr Richard Kamwi

Govt to mull male circumcision

• BRIGITTE WEIDLICH

HEALTH issues seem to dominate in Parliament this session, with blood pressure and cholesterol levels being a topic of discussion during the first day and male circumcision surfacing yesterday.

After studies were made public in March that male circumcision trials reduced the risk of HIV infection from women to men by 60 percent in several African countries, Namibia was also considering this as a preventative measure. Health Minister Dr Richard Kamwi told the National Assembly.

Delivering a ministerial statement on the topic, Kamwi said Government health services in Namibia were presently not geared to cater for male circumcision on a large scale. The small surgical operation entails cutting a part of the foreskin covering the penis.

"We will carry out an assessment to determine shortcomings and needs and address them properly before we embark on this new service," Kamwi stated.

"It is also important to ensure that circumcised men do not develop a false sense of security, that could cause them to engage in high-risk (sexual) behaviour," the Health Minister cautioned.

Nora Schimming-Chase of the Congress of Democrats (CoD) proposed that all male babies born in clinics could be circumcised. Safety and Security Minister Peter Tshechama urged that during public awareness campaigns, the difference between circumcision and castration (removing the testicles) should be well articulated.

"There was a man who went to the doctor asking to be circumcised, but his English was not so good and he confused the two terms. He asked for a castration, but he only wanted a

ENGRAVE YOUR NAME

IN THE HISTORY OF



THE NAMIBIAN

Govt supports circumcision as anti-HIV tool

• ABSALOM SHOMBE

Circumcision safe all year round

OPUWO – The Principal Medical Officer of the Opuwo State Hospital, Peter Bwalya, has called on inhabitants of the Kunene Region to bring their sons to the hospital throughout the year for circumcision.

want their kids to be circumcised and due to the limited time available, some kids have to be turned away.

“As we are trying to give time to all patients, we have allocated the whole day every Thursday for theatre, and people

MALE CIRCUMCISION: MORE FORESIGHT WITH LESS FORESKIN

■ VIKTORIA NANGO

BETWEEN now and 2025, 80 000 HIV infections could be avoided by Namibian men and women if an

However, others were concerned about the potential risks of male circumcision. Many respondents felt that Government should make a recommendation for educating the population

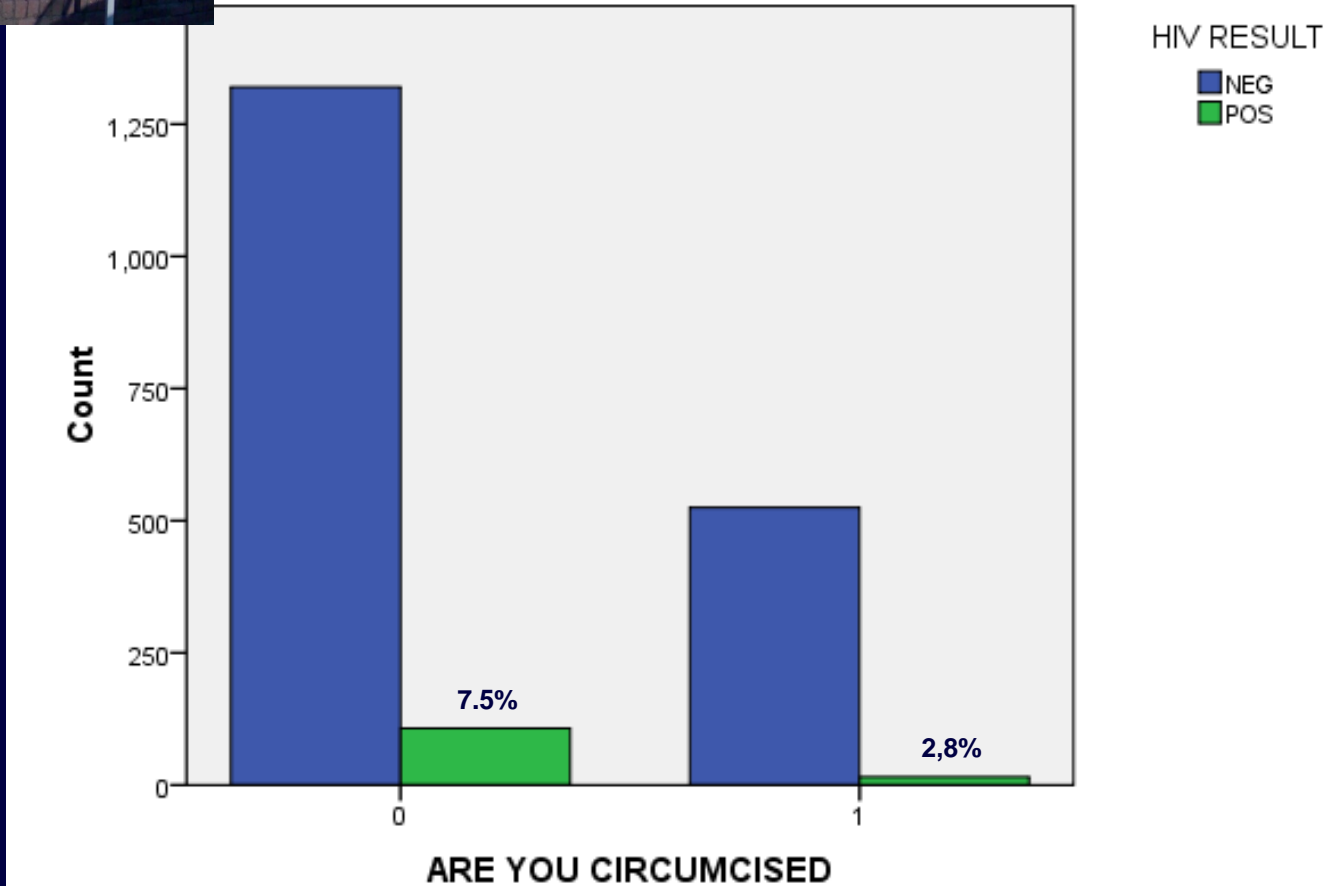


Results (MC in VCT settings)



- **Prevalence of MC: 27.4%**
- **Acceptability amongst uncircumcised: 53%**
- **For those saying no:**
 - 68% because of tradition
 - 14% fear of pain
 - 6% don't believe in it

HIV prevalence in the VCT: MC vs non MC

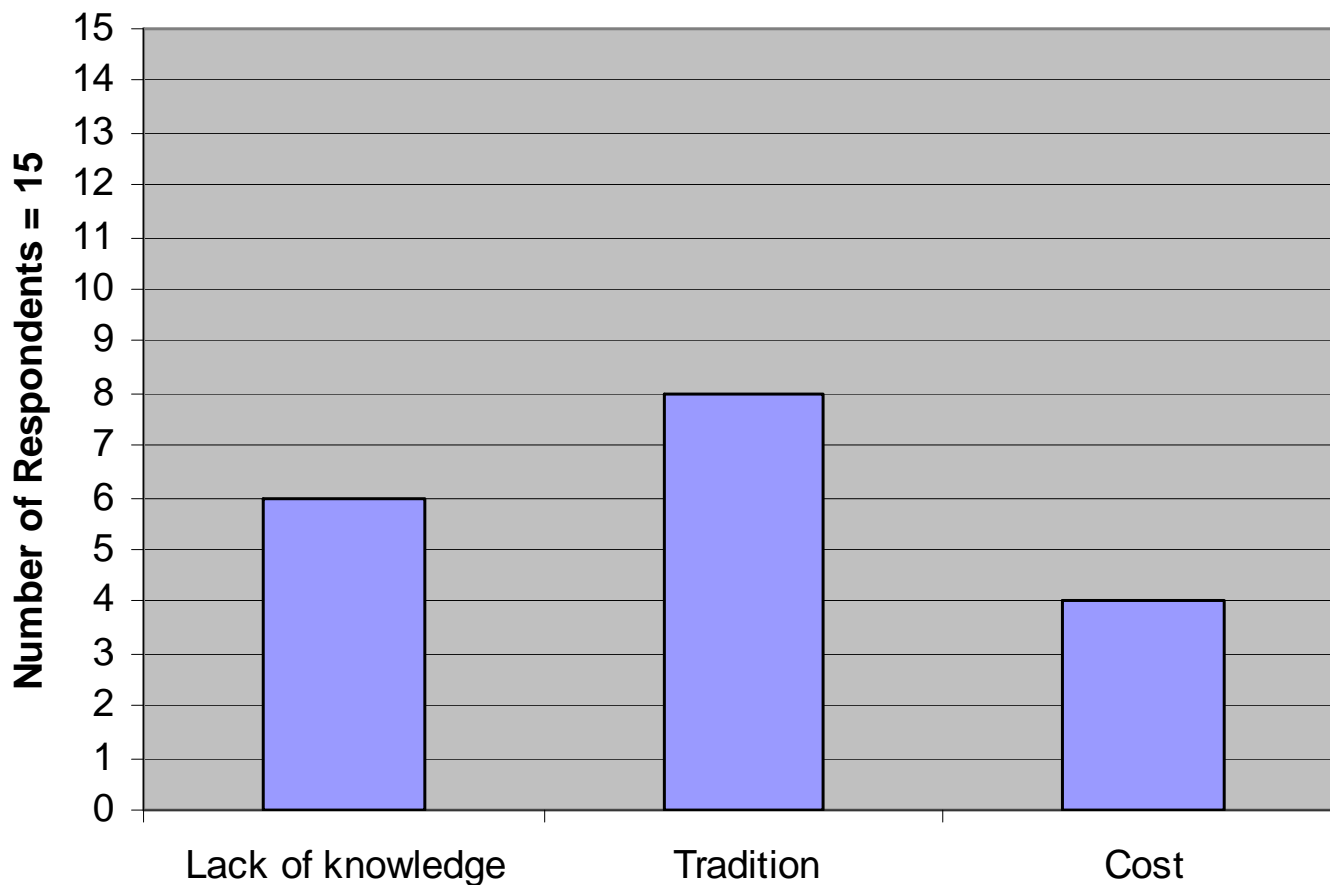




Acceptability of MC: Policy Makers Findings



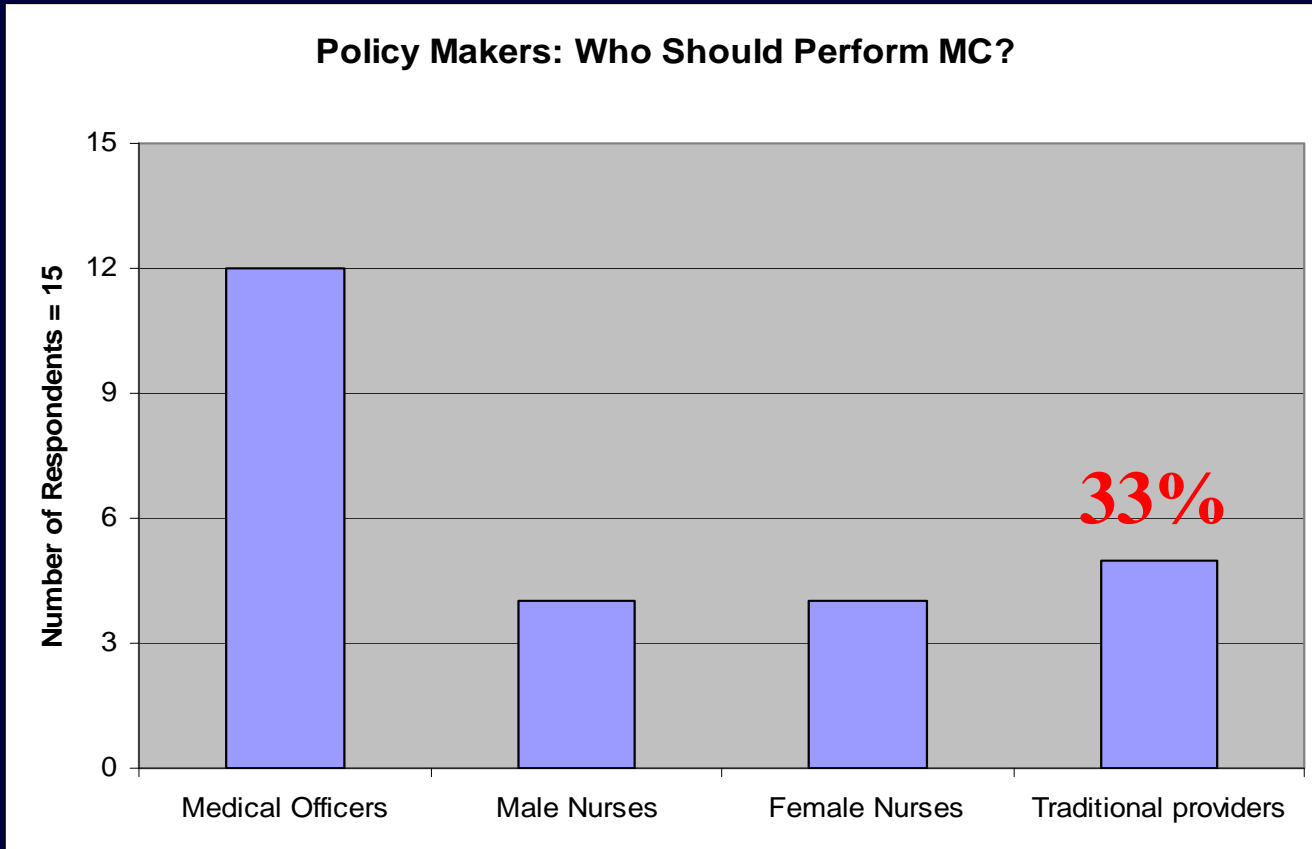
Factors Affecting Acceptability





Who Should Provide MC? Policy Makers Findings

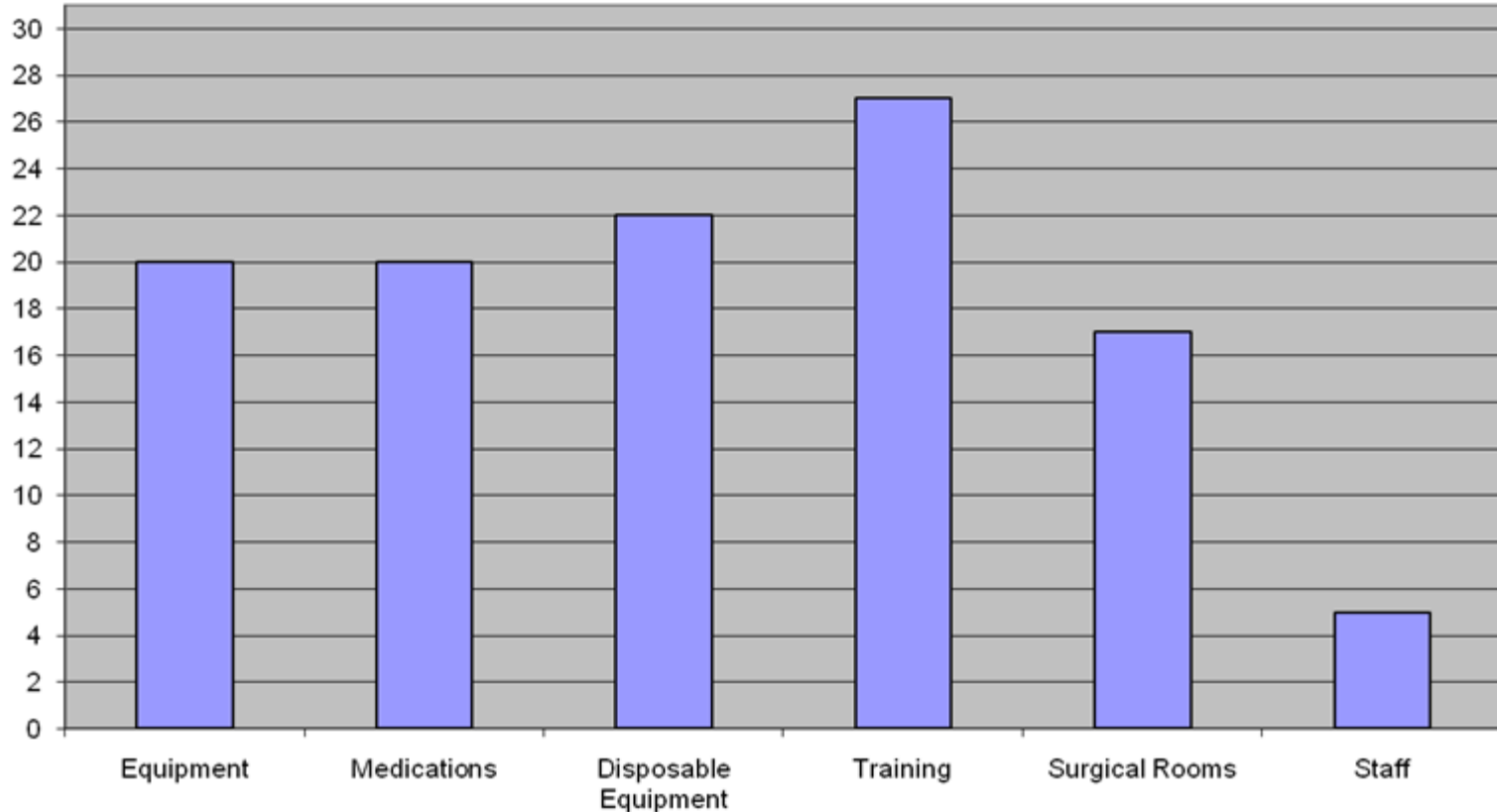
What will be the role of nurses and traditional providers?
Implications for existing standard operating procedures





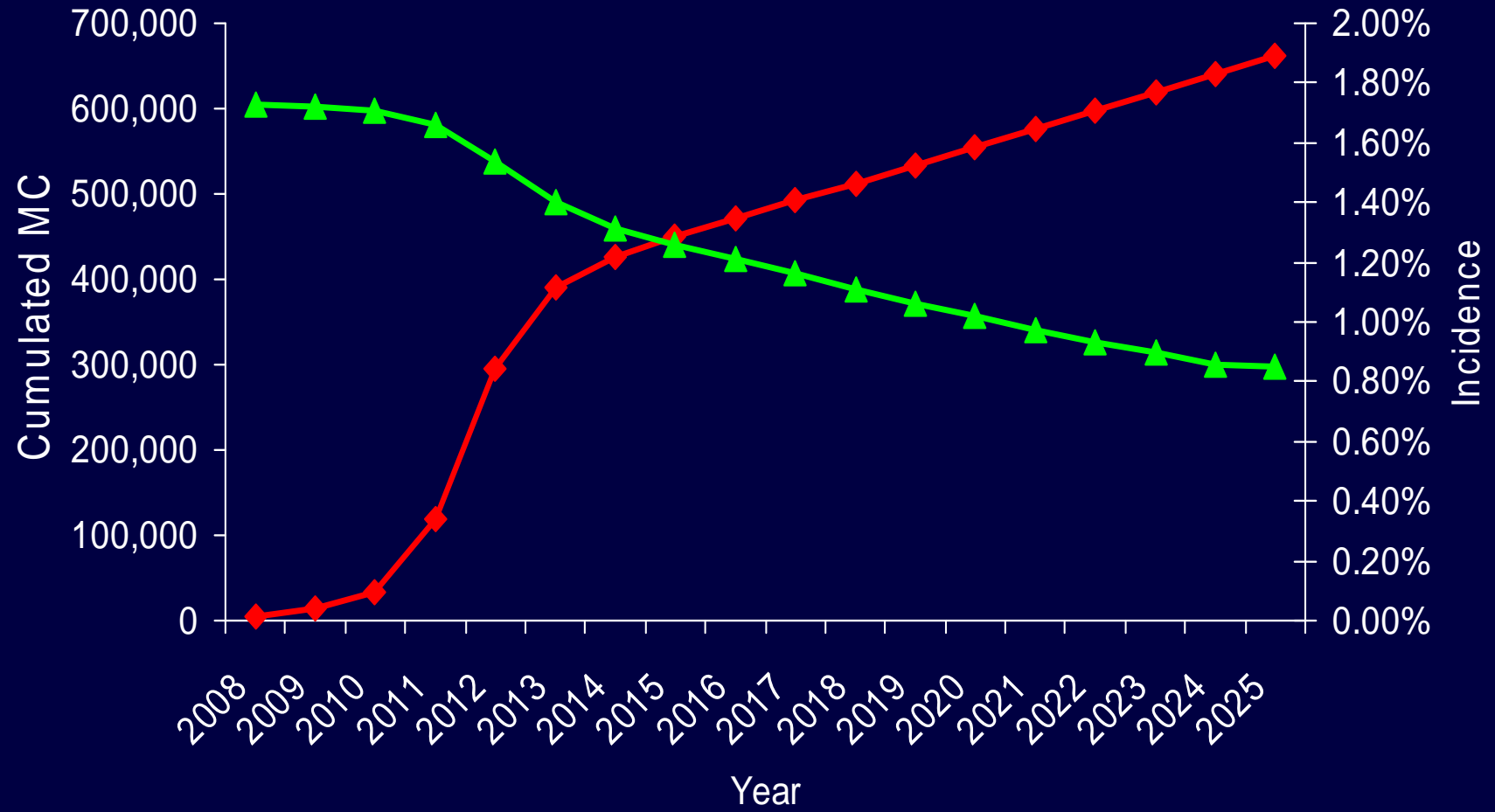
Needs of Facilities for MC scale-up : Providers Findings

What Do Facilities Need to Introduce or Scale-up MC?





Increased number of MC performed is accompanied by decreased HIV incidence



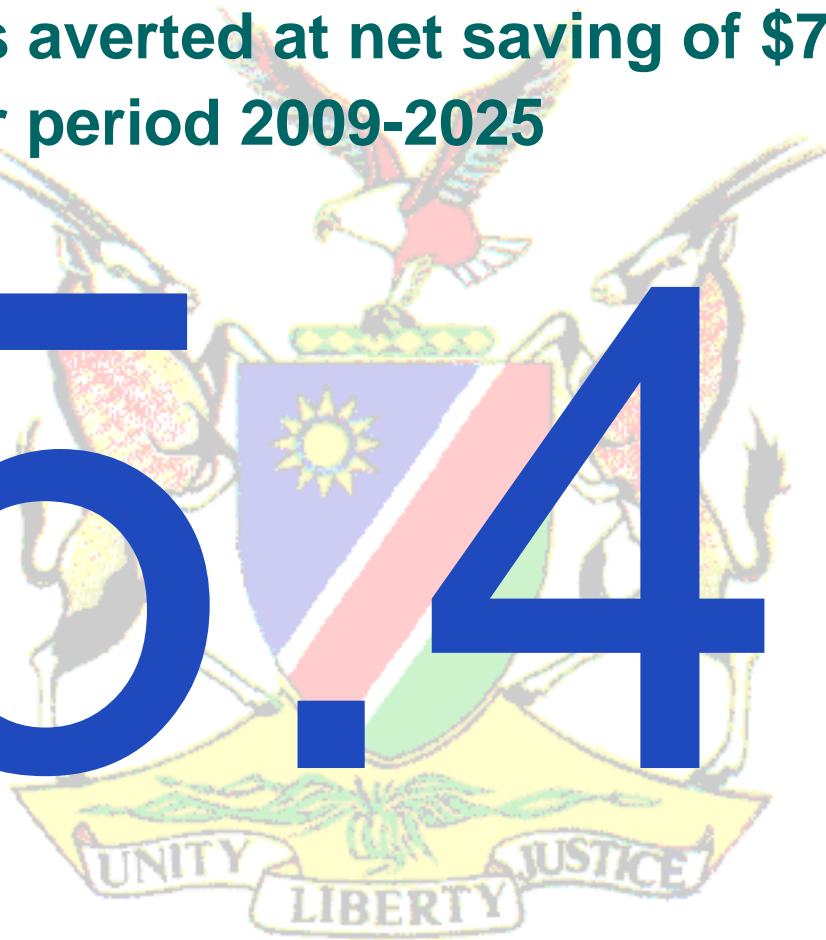
◆ Cumulated MC performed with Scale-up ▲ Incidence with MC intervention

Total savings in Billions of Namibian Dollars



77,000 infections averted at net saving of \$70,035 per infection averted for period 2009-2025

\$5.4b



INTRHEALTH
INTERNATIONAL

Discounted Value expressed in Constant 2007 Namibian dollars



Communications strategy development



Demand



Supply



Ma
Circu
What it means for Namibia's
men & women.



Client leaflet





OR needs

- **Limited research capacity (IRB, research agenda): TA needed to jump start**
- **VCT studies: expand, multicenter, education, information and referral, factors associated with acceptability, track prevalence over time and compare to DHS**
- **Traditional MC: determinants of acceptability, rules of engagement, active surveillance of AEs**

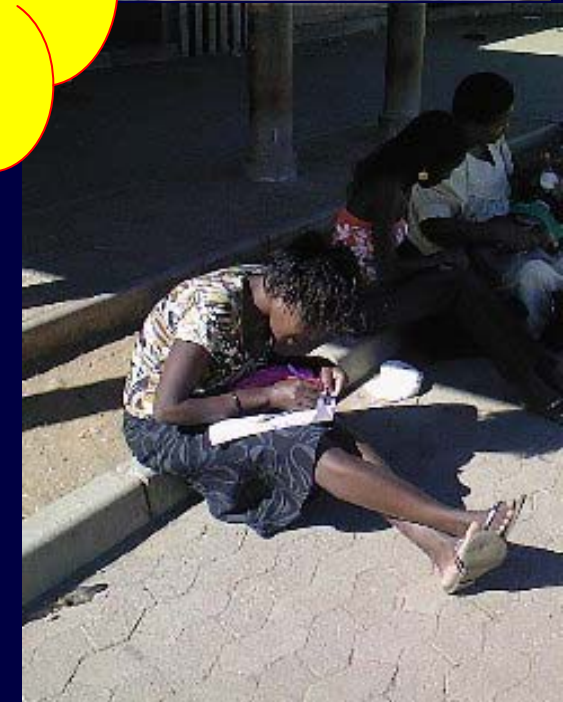


Traditional procedure





No matter what we think, we can not leave them behind





OR needs (2)

- **Health facilities: M&E system, document complications rate**
- **Private sector (~20% of population): cost efficiency studies**
- **Risk compensation: track different circumcised groups**
- **Demand creation strategies: use evidence informed social marketing with local data**



Thank you

