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PEPFAR
U.S. President's Emergency Plan for AIDS Relief

AIDS Free
Strengthening High Impact Interventions
for an AIDS-free Generation

Training for Community Mobilization for VMMC

Trainer's Slide Deck

This presentation is made possible by the generous support of the American people through PEPFAR with USAID under the Cooperative Agreement Strengthening High Impact Interventions for an AIDS-free Generation, number AID-OAA-A-14-00046. The information provided does not necessarily reflect the views of USAID, PEPFAR, or the U.S. Government.



Training Objectives

- ☐ To increase participants' knowledge of VMMC for HIV prevention**
- ☐ To familiarise participants with VMMC communication strategies, tools, and effective interpersonal communication**
- ☐ To build participants' skills and confidence in promoting VMMC in their communities and effectively mobilizing men for services**



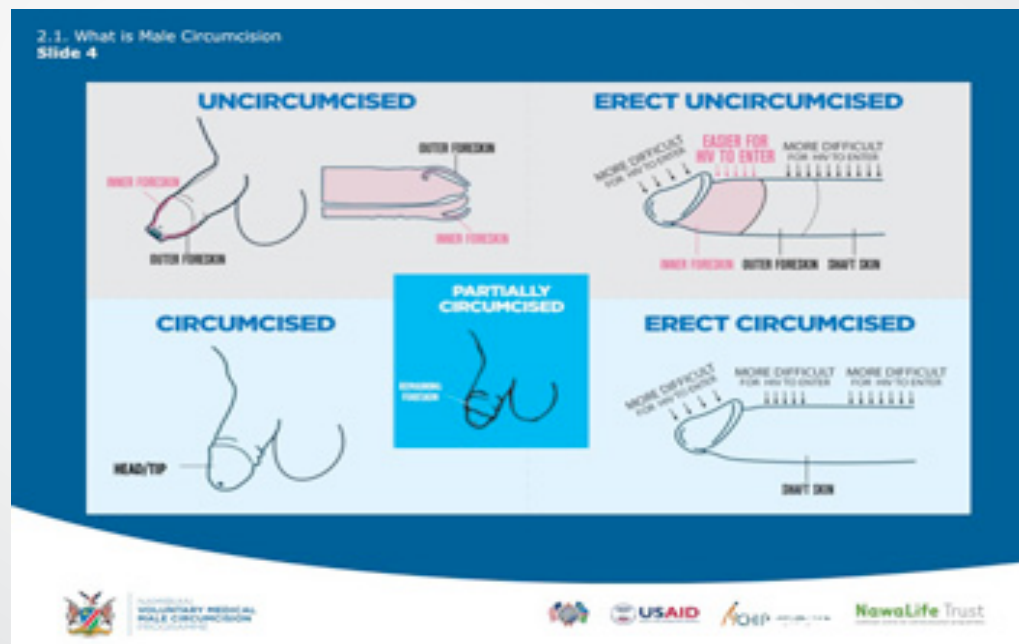
Pretest Questions

1. What is the difference between traditional circumcision and medical male circumcision?
2. Name two ways men benefit from VMMC.
3. What are some other HIV prevention methods apart from VMMC?
4. How is pain managed during the circumcision procedure?
5. Is it true that men should only get circumcised in the winter season? Why or why not?
6. Where are some good places to go if you are trying to mobilize adolescents and men ages 15 years and above for services?



What is Male Circumcision?

- Male circumcision = surgical removal of the foreskin, the thin layer of skin covering the penis



Medical vs. Traditional MC

Traditional Circumcision	Voluntary Medical Male Circumcision
Conducted by traditional circumcisers, e.g. trusted elders with no formal training	Done by trained medical personnel, such as qualified nurses and doctors
No anaesthetic used, painful	Medicines use to reduce and manage pain
Greater risk of severe complications, such as injury, bleeding, even death.	Examination before surgery and close monitoring and after-care reduces risks
Done with knives, blades, scissors, often not sterile	Sterilised medical equipment avoids risks of infection
Done in village/bush/traditional place, sometimes together with others	Performed in facility, privacy and confidentiality offered
Kept away from females	Female health workers may be present
Often compulsory in one's culture	Free informed choice
Can be costly, mostly in winter	Free of charge, all year around
Little preparation	Full counselling provided



VMMC Is Voluntary!

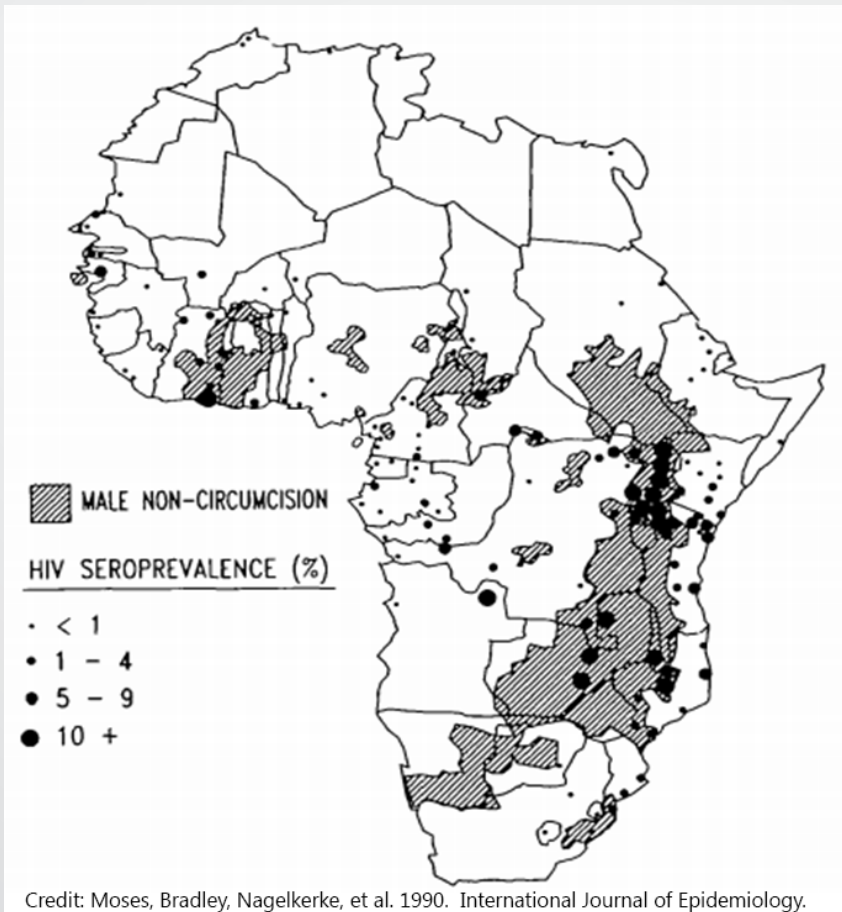
“VMMC will in all cases be voluntary, based on informed consent and assent (for minors), and carried out under safe conditions.

This principle must be respected, including as it relates to access to information and the quality of counseling and care...”

—*Joint Strategic Action Framework to Accelerate Scale Up of VMMC, UNAIDS and WHO*



MC and HIV: Early Observational Studies



Country	% men circumcized	% HIV seroprevalence
Somalia	100	0.0
Ethiopia	95.0	0.0
Zimbabwe	89.0	3.2
Kenya	85.0	2.6
Tanzania	49.0	3.6
Uganda	9.0	20
Malawi	4.6	9.5
Rwanda	0.0	20.1



The Evidence: Randomized Controlled Trials

3.2. How MC reduces HIV risk

Slide 8

3 countries, 3 trials, 1 finding



- **Rakai, Uganda:**
- 55% HIV infections among those circumcised
- **Kisumu, Kenya:**
- 60% HIV
- **Orange Farm, SA:**
- 76% HIV
- **Total – 58% HIV**

"Africa topography map with borders" by Bamse - self-made, using GMT. Licensed under Creative Commons.

Sources: Auvert et al. (2005) Bailey et al. (2007) Gray et al. (2007) Byakika-Tuzime (2008)



Department of Health and Welfare
South Africa



USAID



AOP

NowaLife Trust



RCTs: Follow-Ups

Male Circumcision Rate

Rise of circumcision rate from 12% to 53% over 10 years (Orange Farm)



HIV Prevalence Rate

- 19% lower for men in the community
- 16.9% lower for women with circumcised partners (Orange Farm)



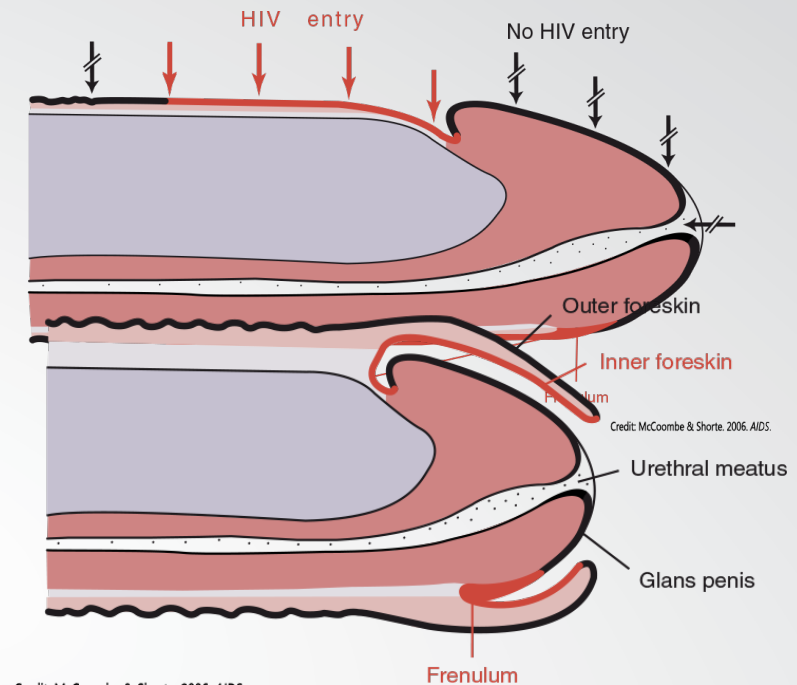
So How Does Circumcision Reduce HIV Infection Risk?

✓ Inner foreskin has high concentration of cells efficient in HIV uptake

✓ Inner foreskin prone to tearing and bleeding

✓ Presence of ulcerative STI

✓ Microbial environment causes inflammation



Credit: McCoombe & Shorte. 2006. AIDS.



What are the Other Benefits of VMMC?

- Many circumcised men report easier to maintain personal hygiene of the penis
- Reduces chance of urinary tract infections for children
- Prevents against bacterial infection on the head of the penis and the skin of the foreskin
- It solves foreskin problems, e.g., swelling behind the head of the penis, foreskin that cannot pull back (phimosis)
- Reduces the risk of other STIs like syphilis and herpes
- Reduces the chance of cancer of the penis



What are the Benefits of VMMC for Women?

- Now have evidence that male circumcision is associated with decreased risk in women for:
 - Cervical cancer
 - Cervical dysplasia
 - Herpes simplex virus type 2 (the main cause of genital herpes)
 - Chlamydia
 - Syphilis
 - Human papillomavirus, or HPV, which causes cervical cancer and genital warts.



VMMC: Limitations

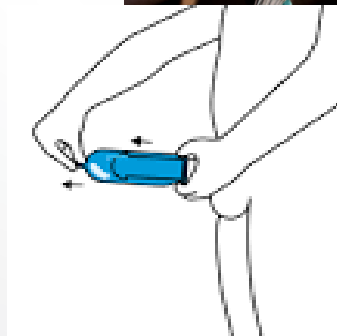
- VMMC does **not**:
 - Completely eliminate risk of female-to-male HIV transmission. Safer sex practices remain essential, including condoms and partner reduction.
 - Directly protect female partners against HIV transmission.
 - Reduce transmission from HIV-positive men.
- Findings are **inconclusive** regarding whether procedure reduces HIV transmission among men who have sex with men.



VMMC as Part of Comprehensive Package

Other elements of combination prevention include:

- ✓ HIV testing and counseling
- ✓ Index testing
- ✓ Access to PrEP for HIV-negative people
- ✓ Immediate access to ART for people living with HIV
- ✓ Male and female condoms
- ✓ PMTCT



How Can VMMC Link with Other HIV Programs?

- HIV-negative men
 - HIV testing services (HTS) → VMMC
 - VMMC → Condoms
- STI-positive men
 - VMMC → STI treatment
- Youth coming for VMMC
 - VMMC → Adolescent reproductive health services
- HIV-positive men
 - VMMC → Care and treatment



Country Progress to Date

- [fill in snapshot of your country's progress in VMMC to date, achievements versus targets]



Guiding Principles

[Example taken from Kenya Natl VMMC Strategy]

1. Ensure that VMMC services are provided safely, respecting the rights of clients and without stigma or discrimination for circumcising and non-circumcising communities.
2. Ensure people-centered MC is integrated with adolescent, maternal, neonatal, child and male RH services, HIV treatment and care, vaccination and other relevant services.
3. Ensure that VMMC is part of a comprehensive HIV prevention package that is based on informed consent, HTS, risk-reduction counseling, condom promotion and provision, and STI screening and management.
4. Ensure MC monitoring and accountability so that quality data for decision-making and safety monitoring are available and used.



Goals and Main Target Group

Example: Scale up VMMC coverage to 80% among males 15–29 years in 5 districts with a high circumcision unmet need and HIV disease burden.



Priority Regions

- [insert map]
- [List the regions and rationale for why those regions]



Service Provision Modalities and Mix



- [Fill in configuration of fixed, outreach, and mobile sites and locations]



Getting Circumcised: The Process

Before...During...and After the Procedure



Who Can and Cannot be Circumcised?

- **WHO and UNAIDS recommend early infant male circumcision (EIMC) for infants aged 0-60 days and VMMC for boys and men above 10 years of age.**
 - Between 61 days and less than 10 years, boys are unlikely to cooperate with just local anaesthesia
- **However, they have to be fit for surgery. Men with acute STIs** or any medical condition that makes VMMC risky for them will not be circumcised. **Men with STIs** will be treated for the STI and return later for VMMC.
- **Males with foreskin problems (e.g., phimosis)** will not be served by the VMMC program but referred to the relevant specialists (e.g., urologists).



Immature Penile Anatomy and Surgical Method

- WHO and PEPFAR guidance state that in clients under age 15 and those age 15 and over with immature penile anatomy, VMMC must NOT be performed using the forceps-guided method. Instead, the dorsal slit or sleeve resection (where applicable) should be used.
- Using the forceps-guided method in under-15s can lead to serious (and preventable) adverse events, or AEs. The most common injuries experienced are glans amputations.



Moving Toward One Surgical Method for All

- There is now a drive to promote dorsal slit as the primary procedure *at all ages* within PEPFAR programs, to prevent further harm due to inappropriate use of the forceps guided method.
 - Can avoid the need to have to switch from one method to the other, depending on age since the dorsal slit (DS) method can be used on all.
 - Some countries have implemented a national policy requiring the DS procedure to be used for all ages (phasing out the forceps-guided method): e.g., Botswana, Kenya, Mozambique, and Uganda.



The Appointment for VMMC

- **Booking:** The mobilizer can book the appointment, or some men will come on their own.
- **Speak to your partner/bring your partner.** If clients have a steady partner, they should discuss VMMC together. They can bring their partner to the clinic. Younger boys can come with parent/guardian.
- **Before the appointment.** Advise men to bathe/shower and eat breakfast before coming.



Ethical Considerations

Ethical considerations - are standards of conduct that govern what is acceptable and, or not acceptable in VMMC practice as prescribed by the MOH.

- a) **Informed Consent** - is the voluntary agreement of an individual—or his authorized representative who has the legal capacity to give consent—to undergo a VMMC procedure.
- b) **Assent** - is the expression of willingness to undergo a procedure by a person too young to give informed consent but old enough to understand the procedure.



The Importance of Informed Consent/Assent

- MC is irreversible
- MC includes a process that may involve emotional or physical pain
- In rare cases, MC may result in permanent damage



Special Age Considerations

- Know the country laws for age of consent
- Only males at the legal age of majority are able to give informed consent for themselves
- Those under age of legal consent should:
 - Be asked to assent
 - Are required to get the consent of their parents/guardians for procedure and HIV testing

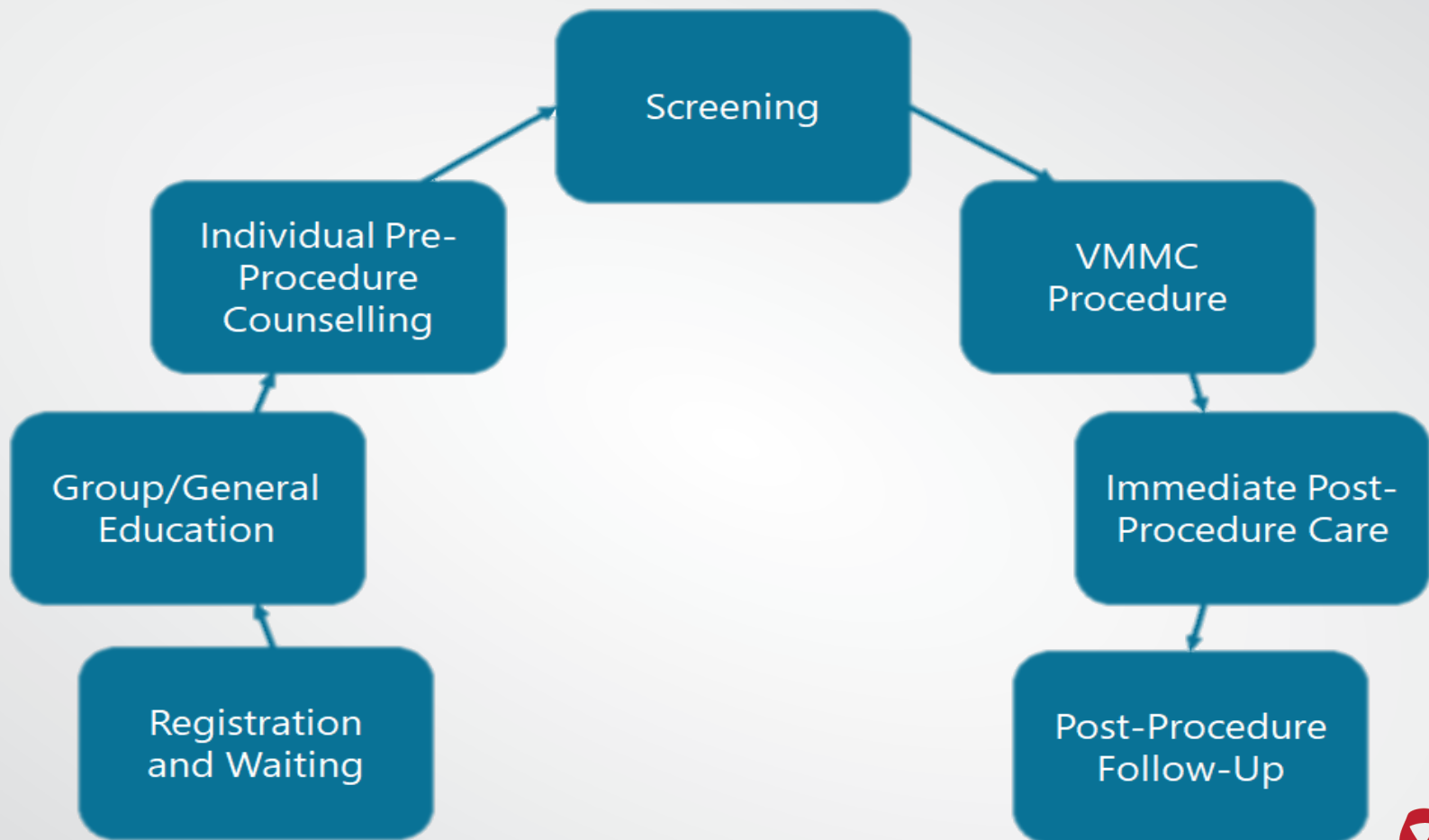


When Parents Cannot Accompany Children to the Site

- Written consent must be sought from parents **before** the boy accesses VMMC
- The consent should be confirmed at site by provider calling parent by phone, or according to country guidelines



VMMC Service Continuum: The Client's Experience



Group/General Education



Individual Counseling - Pre-Procedure

- Support the client in his decision about whether to opt for male circumcision.
- Reinforce key HIV risk reduction messages tailored to the VMMC client's needs OR risk avoidance for non-sexually active adolescents.
- Respond to individual questions and concerns about the VMMC procedure.
- For the sexually active client, identify factors that could support or hamper his ability to comply with the prescribed abstinence period and discuss risk reduction strategies.
- Provide optional HIV Testing and Counseling. Conduct appropriate post-test HIV counseling.



Pretest HIV Counseling: Important Considerations

- Testing is optional.
- There are many benefits to knowing one's HIV status.
- If men choose not to test before procedure, can also test during a follow-up visit.
- Test results are confidential. It is up to the client to share results.



Screening: Purpose and Steps

- The purpose of screening a potential client is to:
 - Ensure they are suitable for circumcision.
 - Identify any contraindications or conditions that may require treatment or referral before circumcision can be performed.

Focused
Medical
History

Focused
General Exam

Detailed
Examination of
Penis



The Circumcision Procedure

- Anesthetics are injected at base of penis to help control pain
- Actual removal of foreskin takes 20 minutes
- Then wound is closed and bandaged
- Client remains 30 minutes for rest and observation
- Clients given pain killers to take home and use when anesthetic wears off



Ask the Satisfied Client



- What did the anesthesia injection feel like?
- Did you have pain during the procedure?



Immediate Post-Operative Counseling

After the surgery, the nurse or counselor will:

- Confirm client understands wound care instructions and has access to clean water, clothing
- Ensure client understands danger of applying home remedies to the wound
- Describe signs, symptoms of AEs and how to contact staff if needed
- Determine if feasible for client to comply with follow-up schedule
- Provide detailed information on importance of abstinence, and offer recommendations to improve compliance, mitigate risk



Wound Care: Key Messages

- Keep wound clean using clean water and mild soap
- Keep penis bandaged, dry and pointing upward for 24 to 48 hours
- Do not pull or scratch wound while healing
- Avoid hard physical work for first 5 days after surgery
- Do not apply any home remedies or traditional medicines on wound that have not been prescribed by doctor
- Applying these types of remedies increases risk of serious infections, such as tetanus



Returning to Work or School after Circumcision



- Most doctors recommend **resting for two days** after the procedure and then returning to work or school
- For hard physical work that requires straining such as lifting heavy sacks, digging, assisting at a construction site, it may be recommended not to work for the first five days after surgery, as it may cause disruption of the wound



How Can You Tell if Client is Not Healing Well and Should Return to Clinic ?

- Complications are rare, but can be serious if ignored
- If client has any warning signs of AEs, he should follow instructions to contact clinic staff immediately
- Return to clinic or contact clinic if:
 - Continued bleeding that gets worse
 - Swelling and tenderness on or around wound
 - Increased pain
 - Fever
 - Swelling or tenderness in groin
 - Pus from wound
 - Difficulty passing urine
 - Hardness of lower abdomen, stiffness of jaw, chest and back



Abstinence and Risk Reduction During Healing

- Abstinence from all sexual intercourse and masturbation strongly recommended for 6 weeks after MC
- For HIV-negative men, any sexual contact during healing period greatly increases risk of acquiring HIV
- For HIV-positive men, any sexual contact during healing period greatly increases risk of transmitting HIV to partner(s)



Overview of Day Two

- VMMC Demand Creation Strategies
- Planning & Executing Mobilization Activities



What is Demand Generation?

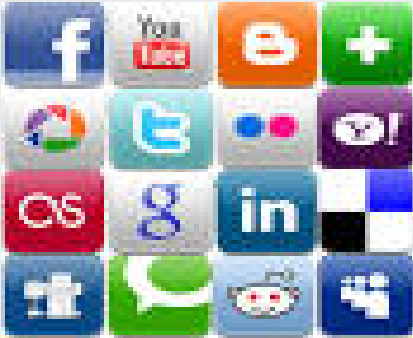
Demand generation increases awareness of and demand for health products or services among a particular intended audience through social and behavior change communication (SBCC) and social marketing techniques.



Demand Creation for VMMC= Multiple Approaches + Quality of Services!



Strategic Approaches Used in Demand Creation



A Combination of Channels Increases the Effect

- Mass media and outdoor media (i.e., billboards, taxi/bus branding)
- ICT/social media
- Interpersonal communication
- Community dialogue
- Raise awareness of VMMC and service locations
- Interactive discussion in real time
- Address fears/obstacles, dispel myths, push decision forward
- Leaders talk to their own community/create supportive environment



Complex Decision-Making Process



Sources of Referral to VMMC Services by Age Group

Source of information by age group				
Source of information	Age group			Total
	10-14 years	15-29 years	30+ years	
TV	2229	4566	443	7238
Radio	2602	5058	461	8121
Friend	3715	6123	557	10395
Family	2418	2815	132	5365
Partner	0	1578	132	1710
Community mobilizer	5142	11674	2488	19304
Community leader	3353	2256	249	5858
SBC Materials	2762	5171	518	84516
Health worker	931	1230	79	2240



What Do Communities Know about VMMC?

Myths and Facts



Questions for Discussion

1. What do people in your community know about medical male circumcision? (the benefits? location of services? etc.?)
2. Are there any myths or common beliefs that could affect men's decision?



True or False?

1. Male circumcision reduces sexual pleasure and performance.
2. You can only be circumcised in the colder winter season.
3. Foreskins are disposed of after circumcision by incineration at health facilities just as with any other medical waste.
4. Medical male circumcision protects against HIV infection by 100%.
5. After being circumcised, men can't return to work for several weeks.
6. The HIV test will be offered at the VMMC site, but is not required.



What Makes a Good Communicator?

- Kind, understanding, and supportive
- Able to exercise confidentiality
- Responsible, a good listener, and easy to talk to
- Open and nonjudgmental
- Aware of when to speak and when to listen
- Helpful and caring
- Trustworthy
- Respectful of others
- Knowledgeable of the subject



Communication Skills

Active Listening

Showing Empathy

Acknowledging
Feelings

Providing
Confidentiality

Asking Open-
Ended Questions

Praising and
Encouraging

Summarizing



Communication Skill: Active Listening

Show: Respect, interest, and empathy

- Active listening involves listening with all senses.
- As well as giving full attention to the speaker, it's important that the 'active listener' is also 'seen' to be listening
- Use both verbal and non-verbal messages such as:
 - Maintaining eye contact
 - Nodding your head and smiling
 - Agreeing by saying 'Yes' or 'Mm-hmm' to encourage them to continue.



Communication Skill: Acknowledging Feelings

- Purpose: To let person know you recognize and understand his feelings about the topic being discussed
- Use these kinds of phrases to acknowledge feelings:
 - “It seems to me you are feeling...”
 - “It sounds like you...”
 - “What I hear you saying is...”



Communication Skill: Asking Open-Ended Questions

- Usually begin with “how” or “what” or “why”
- Encourages more detailed conversation
- Helps client open up and express feelings
- Cannot be answered with simple yes or no answer:

“How did you feel when your father told you not to get circumcised?”



Communication Skill: Summarizing

- Pulls together conversational threads so client sees whole picture
- Ensure that client and mobilizer (or counselor) understand each other correctly
- Helps mobilizer summarize the next steps the client should take.



Communication Skill: Summarizing

"So let's see. We talked about the need for avoiding any sexual intercourse during the six weeks of healing after you get circumcised. You mentioned how worried you are that your girlfriend won't understand this. You liked this brochure I showed you that explains clearly why this is so important, and we decided that when you go home this afternoon you will show that brochure to your girlfriend and the two of you will talk about it together, and discuss other things you could do during this six week time period. How does that sound?"



Communication Skill: Praising and Encouraging

- Makes people feel better about themselves
- Builds self-esteem and confidence, empowering him to meet his goals

"I appreciate that you are sharing your feelings with me."

"It's great that you came to me to get more information."

"Good question. I am glad that you asked."



Communication Skill: Showing Empathy

Empathy = the act of seeing the world through another person's eyes, understanding how the person feels from his point of view

- Can still feel empathy for someone even if you disagree with decision they make
- Ability to empathize with clients goes hand in hand with having respect for them



Communication Skill: Providing Confidentiality

- You are obligated to keep confidential all personal information about clients
- When clients trust that what they disclose will remain confidential, they are:
 - Less likely to withhold important information
 - More likely to get support for what concerns them most



Reaching Priority Age Group of Men



- Demand creation efforts should prioritize most at-risk men [ages 15 – 29 years]
- Will have most immediate impact on epidemic
- **Services should not be denied to any medically eligible men**



Common Barriers for 15-29 Year Olds

Common Barriers from the Research & Literature:

- Fear of pain (pain of injection, pain post-op with erections)
- Fear of HIV test (belief that test is mandatory)
- Fear of complications leading to infertility or decreased sexual performance
- Reluctance to abstain from sex during healing period
- Older males reluctant/embarrassed to mix with younger boys in transport and services
- Perception that health facilities are for women
- Inconvenient days and times of services
- Low risk perception
- Female providers (context-specific)
- Taking time off from work, lost wages
- MC associated with other religions or ethnic groups (not in our culture)



Common Facilitators for 15-29 Year Olds

Age-specific motivators from the research & literature:

- Improved hygiene
- Enhanced sex appeal, preferred by women
- Improved sexual performance
- Prevent HIV/STIs
- Peer support
- Partner support
- Religious leaders' support
- Be a role model (set good example for community)

Anecdotal:

- Other health services for men: weight, blood pressure (and STI treatment)



Addressing Fears about Pain

- Hearing from someone who has been for VMMC (satisfied client).
- Trying to understand if fear is about pain of surgery, pain of injection, or post-op pain, so you can best respond to the fear.
- Local anesthesia controls pain during procedure
 - Explain that following circumcision, most men report minor discomfort that is managed with over-the-counter pain relievers. When you leave the VMMC clinic, they will give you pain relievers to take home.



Addressing Fear of HIV Testing

- Explain that the HIV test is offered the day of procedure and is strongly recommended, but it is not required to take the test before circumcision.
- Hearing from someone who has been through testing and VMMC can be helpful.
- Explain that knowing one's HIV status helps to take the necessary steps, depending on result.



Addressing Reluctance to Abstain from Sex During Healing

- Explain that it's important to talk with your wife or sexual partner about the decision to go for VMMC, and how she can best support you. Explain to her the health benefits for both of you.
- Avoiding situations where you could easily be tempted to have sex (partying, etc.) can help.
- Also, the inconvenience of VMMC is for a limited time; but the benefits are for life.



Addressing Concerns that VMMC is Not in Our Culture

- VMMC is not linked to any culture or faith. It is done for health reasons.
- Men and their partners should understand that HIV does not care about their ethnic background or religious affiliation.
- Here's where community and traditional leaders can help.



Motivator: Reduced Risk of HIV and Other STIs

- Remains most important benefit for men to opt for VMMC. Though men may be tired of hearing about HIV and may not perceive themselves to be at risk, most are familiar with STIs, and preventing them can be a strong motivator.



Motivator: Peer Support



- Men and adolescents are more likely to consider VMMC when others in their peer group also do.
- Conducting group mobilization sessions and working with men who have accessed VMMC services can help build interest.



Motivator: Preferred by Women



- Some women prefer circumcised men, as VMMC shows that they care about hygiene.
- Encourage women who prefer circumcised men to share this with partners.
- Testimonials from satisfied clients can share their experience of women's preferences for circumcised men.



VMMC Client Testimonial

“I heard about circumcision through the activista (mobilizer) and the radio years ago, but I never gave it any importance because many people would say things like: ‘circumcision is for children, because for adults it hurts a lot and you might not be able to have children anymore’, that’s why I didn’t give it any importance. An activist came and talked about the advantages of doing circumcision, but even then I didn’t accept it; he came back twice and showed me leaflets that talk about the advantages and disadvantages **and he also explained to me that to do circumcision the technicians apply anesthesia to prevent pain; I thought a lot... really a lot** and I asked help from my wife and she understood that diseases can be avoided such as HIV, and my wife accepted, and one day the activist passed by my shop again and I decided to enter in the car that had other young people and we went to Matambo Health Center where I did circumcision.”

---Tobias, 21 years old, Tete, Mozambique



What Do We Mean by a Satisfied Client?



"The pain was easily managed with pills. I went back to work after two days."



What Role Does the Satisfied Client Play?

- Shares his first-hand experience with VMMC.
- He's a credible source of information.
- He can address myths and misperceptions men have about VMMC.
- He can best address fears men have about pain, testing, etc.
- He refers his peers.
- He is an advocate for VMMC.



How are Satisfied Clients Recruited?

- When clients come back to the clinic for follow-up visits, counselors can recruit them.
- Mobilizers can recruit them in their communities.
- In Mozambique, they are identified by mobilizers during completion of a client satisfaction exit survey. Clients are invited to tell their experience, which is recorded by the mobilizer. Then it is shared with the provincial team, which evaluates it.



Leverage Satisfied Client Testimonials via Multiple Channels: Mozambique



- Public events
- Interactive community radio discussions (with call in)
- Brief videos in local languages, played during mobilizations sessions and on TVs in health units
- Videos shared on mobilizers' tablets and WhatsApp
- Videos shared on Facebook



Discussion:

Engaging Community Leaders

1. Who are the important leaders in your community?
2. Which ones do you think would support VMMC, are opposed to it, or are not sure or indifferent?
3. What ideas do you have for engaging them in VMMC?



How to Engage Leaders

- Set up meetings with local leaders and other influential people in a community.
- Book a day to hold a village meeting.
- Engage leaders to be mobilizers, or ask them to identify someone from their community to be a mobilizer (in advance of outreach).
- Train leaders on key messages and on use of materials designed for leaders.
- Invite them to participate in radio panel discussions.
- Equip them with branded t-shirts and hats to identify and encourage them.



Promoting VMMC through Leaders: Lessons Learned

- People in the community are more receptive to VMMC, as they trust the word of their leaders.
- Engaging leaders has helped to dispel fears and myths regarding VMMC.
- Leaders facilitate entry into a new community.
- Leaders identify members of their communities who can best help to mobilize locally.
- Leaders facilitate community dialogue and create supportive environment for VMMC!
- AIDSFree provides PA systems for village meetings.



One Senior Chief-Advocate Who Has Made a Difference

- In Thoyolo, Malawi, Senior Chief Bvumbwe has used every village meeting to advocate for men to go for VMMC.
- With his backing, the team gains entry to meet with other local leaders, as he is the senior chief.



Mobilizing Boys Aged 15–19 Years: Secondary Schools



- Engage teachers for their trust and buy-in on VMMC.
- Use close collaboration with school directors, officials.
- Schools can receive equipment upon reaching targets.
- Avoid mobilization during exam periods.
- Circumcised teachers, students as champions.
- Provide age-appropriate materials for students (notebooks, calendars, t-shirts).
- Hold VMMC Fridays.



Where to Mobilize the 20–29 Year-Olds



Mobilize During Concerts, Public Events, Festivals

- Take advantage of festivals, health fairs, concerts, sporting events where priority age group congregates
- Display and distribute VMMC materials and invitations
- Events that attract this group may happen at night or weekends
- Register interested men with their contact info
- **Individual follow-up by phone is critical**



Preparation

- Seek permission to mobilize at event or site
- Organize transport
- Bring along SBCC materials (brochures, posters, invitations, etc.)
- Bring drinking water for mobilizers
- Bring table, chairs, umbrella or gazebo, banner
- Come dressed in branded t-shirts, hats
- Bring register to record names and contact information of interested men



Strong, Personal Follow-Up After Events Results in Service Uptake

Faz a Circuncisão, torna-te Um Novo Homem

Convite Pessoal:
Torna-te um Homem mais **Limpo** **Saudável** **Atraente**

Não perca tempo! Vá ao Centro de Circuncisão no Hospital Provincial de Tete

Horário: das 7:30 às 15:30 horas | Telemóvel: 879105793

É GRATUITO, NÃO SE PAGA NADA, É DE BORLA.

Para mais informações liga para o **ALÔ VIDA** pelos números: 84146 | 82149 | 800149
A ligação também é de BORLA

Faz a Circuncisão
Torna-te Um Novo Homem

USAID
HEALTH COMMUNICATION CAPACITY COLLABORATIVE
JOHNS HOPKINS Center for Communication Programs

- During event, mobilizer should issue one-on-one invitations so men can follow up in a more private way
- During event, obtain contact information for interested men so mobilizer can follow up



As you observe the bus stop mobilization, think about.....

1. Which communication materials did the mobilizer use and how were the materials used?
2. How did mobilizer respond to men's questions/concerns?
3. Did he/she use effective communication techniques? (which ones?)
4. Did mobilizer capture the names and contact information of the men in order to follow up?
5. Is there anything that could have been done better?



Daily Register

- [Placeholder slide for your daily register]

