

12. Special Studies

Special Studies

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Useful Tools	
Useful International Guidance Document	16 PEPFAR Country Operational Plan (COP) 2012 Technical Considerations

Objective(s): To ensure the quality of VMMC services by conducting periodic studies and/or evaluations to address specific issues not captured in routine M&E

Description: Routine data will help to monitor aspects of VMMC services; however, some components of quality care are not well-suited to monitoring through routine data collection (e.g., client perspectives on quality of services) and reporting. In addition, special aspects of VMMC services may warrant periodic, in-depth studies (e.g., changes in sexual risk behaviors, barriers to older men accessing services). Periodic or special studies can help the program improve the quality of all the services it offers (see GUIDANCE DOCUMENT 16).

Case Study—Tanzania’s Qualitative Study on Attitudes and Beliefs Surrounding VMMC

Men’s decisions about VMMC services are complex, influenced by culture and history, traditional beliefs, education, sexuality, gender relations, economic and marital status, exposure to urban culture, past experiences with health care services, and many more factors. A qualitative assessment was conducted in February 2011, in three districts of Iringa region, Tanzania, to inform the VMMC program implemented there by the Ministry of Health and Social Welfare (MOHSW), with support from PEPFAR.

This formative work aimed to improve the understanding of the attitudes and beliefs of adult men and women that may enhance or hinder uptake of VMMC in Iringa region, and to explore their views on service delivery. The VMMC program is still relatively new, and only 20% of recent VMMC clients were aged 20 and above. VMMC for HIV prevention will have the greatest immediate impact if men who are already sexually active (or soon will be) primarily access VMMC services. The need to promote VMMC in men over 20 years of age is supported by the fact that HIV prevalence is highest in men ages 35 to 39 in Tanzania [Tanzania HMIS 2009]. One hundred and forty-two men and women in the three districts participated in 13 focus group discussions and three participatory exercises, which included creation of timelines and seasonal calendars. The majority of the participants could accurately describe VMMC and its benefits, including biological benefits (e.g., cleanliness and disease prevention—including HIV/AIDS prevention), as well as perceived VMMC benefits (e.g., increased virility). In general, participants stated that, ideally, men should be circumcised before puberty. Some were proponents of infant VMMC, but most felt that VMMC is best performed during childhood. VMMC during adulthood (defined by participants as married men, and those over the age of 24) was described as something unusual and perhaps embarrassing. VMMC was seen as something associated with modernity and urban environments, as well as secondary education, which usually involves the mixing of children from different ethnic groups—often in a boarding situation.