

STRENGTHENING UGANDA'S SYSTEMS FOR TREATING AIDS NATIONALLY

KEY INTERVENTIONS

Voluntary Medical Male Circumcision (VMMC)

Increasing demand for and access to Voluntary Medical Male Circumcision (VMMC) services among men of age 15–49 years in Uganda

HIV prevalence in Uganda is higher among uncircumcised men (6.7 percent) than men who are circumcised (4.5 percent). However, currently, only an estimated 26 percent of Ugandan men between age 15 and 49 are circumcised.¹ The Uganda Ministry of Health (MOH) implements voluntary medical male circumcision, also known as safe male circumcision, as one of the various biomedical interventions for reducing transmission of HIV. In April 2013, the USAID Strengthening Uganda's Systems for Treating AIDS Nationally (SUSTAIN) project began supporting 12 Regional Referral and 6 General Hospitals to implement VMMC in accordance with Ministry policy and operational guidelines. In 2014, the project aims to support 14 healthcare facilities to circumcise up to 60,000 clients.

Steps undertaken and ongoing activities:

- ◆ Facilitating rapid needs assessments followed by development of costed implementation action plans by each hospital
 - ◆ Encouraging community mobilisation efforts for uptake of services—hospital teams are supported to work with local leaders and community networks to mobilise surrounding communities
 - ◆ Training VMMC teams (at least three staff per hospital), and providing on-the-job mentoring to effectively apply skills
 - ◆ Supporting hospitals to conduct VMMC activities:
 - Supplying the required equipment, kits, medicines, and sundries
 - Facilitating routine client follow-up, monitoring, and management of adverse events when they occur
 - ◆ Supporting hospital-level routine VMMC performance review exercises to inform implementation plans and practice
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- ◆ Supporting continuous on-site supervision to ensure quality standards with regard to:
 - Hospital-level VMMC management systems, including data systems that use standard MOH VMMC monitoring and evaluation tools (e.g., adverse event forms, monthly summary forms, client cards, registers, and indicator reference guides)
 - Availability of required supplies, equipment, and surgery environment
 - Registration and group education for clients
 - Appropriate procedures for individual counselling and HIV testing
 - Use of correct male circumcision surgical procedures
 - Use of infection prevention measures and practices
 - ◆ Improving physical infrastructure for VMMC—all hospitals supplied with tents and refurbishment of minor surgery theatres to ensure appropriate VMMC space
 - ◆ Strengthening five RRHs (Jinja, Masaka, Fort Portal, Lira, and Kabale) to function as VMMC training centres for their respective regions through:
 - Improvements to physical infrastructure through renovation of minor surgery theatres
 - Provision of VMMC-specific training materials
 - Training of VMMC trainers based at the selected hospitals



¹ Uganda AIDS Indicator Survey 2011