

AIDSFree Namibia

Duration of Activity: October 2015–November 2019

Life of Project Funding: \$10.7 million

Although Namibia's public sector health services cover the majority of the country, the country's private health sector has more facilities and human resources. AIDSFree Namibia leveraged and engaged these private sector resources to scale up access to quality voluntary medical male circumcision (VMMC) services for HIV prevention. AIDSFree provided targeted assistance to private health care providers and stakeholders to increase access to, affordability of, and quality of HIV services, in particular VMMC.

Technical Approach & Key Activities

AIDSFree expanded a network of private providers to partner with Namibia's Ministry of Health and Social Services (MOHSS) in delivering VMMC services. AIDSFree also provided direct technical assistance (TA) to the MOHSS to increase VMMC uptake in the public sector. AIDSFree provided additional training, commodities, and support for demand creation to increase the number of providers able to conduct VMMC. AIDSFree also supported the MOHSS to adopt the online training hub (OTH) as national VMMC training platform and continuous quality improvement (CQI) as standard quality monitoring for VMMC.

Achievements

AIDSFree increased access to HIV services for out-of-pocket and low-income clients by facilitating innovative partnerships between the public and private health sectors and by supporting VMMC outreach camping campaigns in rural remote areas.

AIDSFree Namibia Objectives

- Rapidly expand the coverage of VMMC services among men and boys with the aim of significantly preventing new HIV infections
- Strengthen the quality of VMMC services through training and continuous quality improvement (CQI)
- Increase the provision of HIV prevention for key and priority populations (VMMC)
- Strengthen the capacity of Government of Namibia and VMMC technical working group to monitor and evaluate the VMMC program.



A total of 61,199 boys and men received safe, high-quality VMMC service - 6,110 in FY 2016, 12,328 in FY 2017, 19,365 in FY 2018, and 23,396 in FY 2019.

Continuous Quality Improvement

AIDSFree provided CQI technical support to VMMC sites and conducted CQI assessments, along with monthly onsite coaching visits to support the quality improvement team to address deficiencies identified initially through the external quality assessment and subsequently through ongoing CQI assessments. AIDSFree reviewed and converted an existing CQI assessment tool to Excel to make it user-friendly. AIDSFree also supported the MOHSS to adopt CQI as the national standard for quality monitoring and improvement in Namibia. AIDSFree supported the MOHSS to adopt CQI tools to fit the local Namibia context.

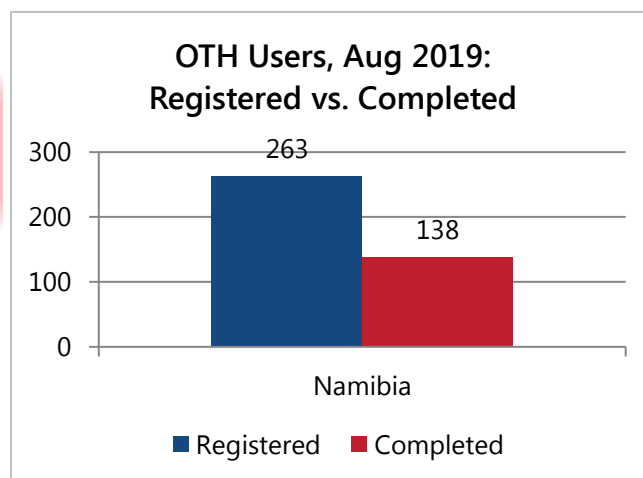
Strengthening Service Delivery

In Khomas Region of Namibia, AIDSFree procured and staffed a fully equipped clinic, which was designed jointly with the MOHSS to offer VMMC in accordance with national regulations. AIDSFree supported the clinic's staffing; the MOHSS Khomas Health Directorate provides staff management. In Oshikoto and Omusati Regions, AIDSFree and the MOHSS implemented an integrated service model approach, strengthening the capacity of the existing MOHSS VMMC teams to conduct outreach services by repairing vehicles; providing outreach equipment, communication material, and emergency bags; and ensuring that all personnel are trained in emergency management.

AIDSFree trained and deployed VMMC mobilizers, and supported facilities to develop in-house demand creation strategies. AIDSFree strengthened the capacity of outreach efforts by repairing site vehicles. AIDSFree's work with private providers spurred the providers to contract with their own project-trained mobilizers, attracting more adolescents and men for VMMC services.

VMMC Online Training Hub

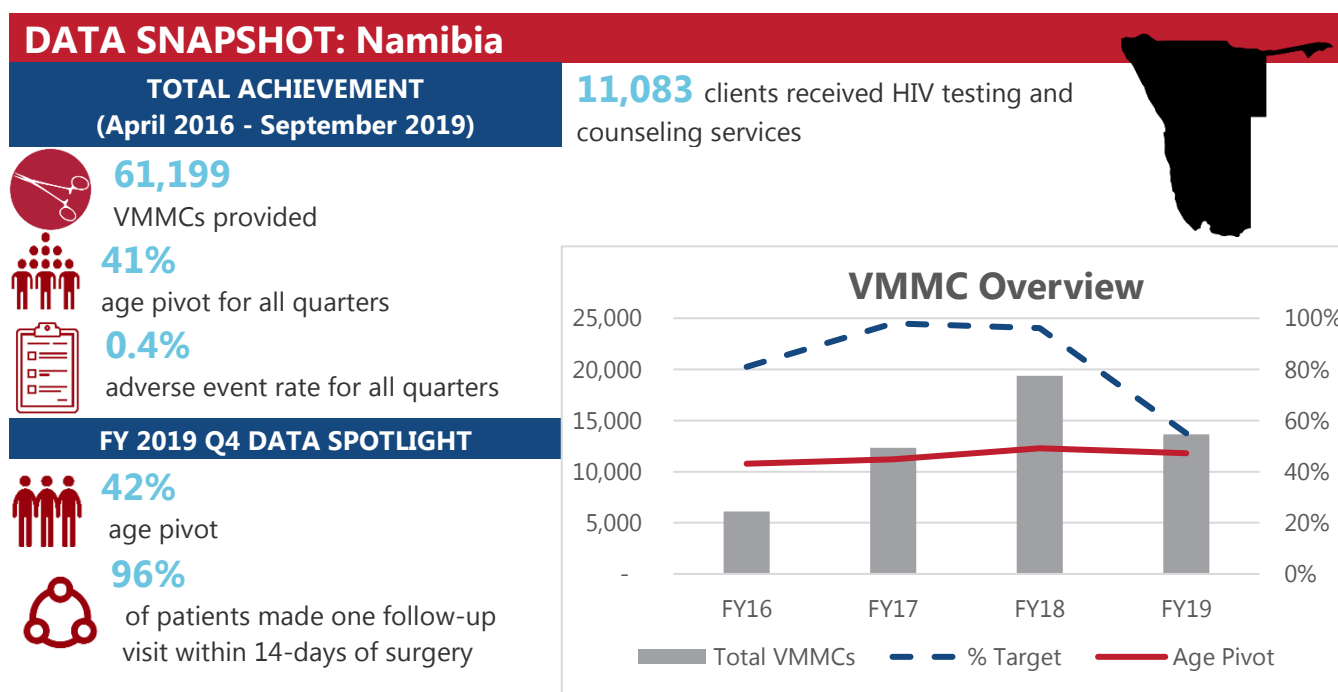
AIDSFree supported the MOHSS to switch over online training for VMMC service providers, thereby reducing the duration of VMMC training from ten to five days. As of August 2019, 138 service providers have completed the online theory course through the AIDSFree Online Training Hub, out of 263 registered (50%). The OTH has also enabled the MOHSS to conduct refresher trainings for VMMC clinical staff.



Challenges, Responses & Looking Forward

- When there was a slowdown in VMMC in Khomas region in PY19AIDSFree increased outreach efforts and discussed strategies for reaching potential clients in rural areas –
- Reaching rural boys and men has always been an issue for increasing VMMC uptake. In the final year of the project, AIDSFree piloted equipping providers with camping gear so that they could reach and stay in rural areas and provide services over a number of days.
- Poor internet connectivity in some areas impeded access to the OTH, which hampers the ability to train additional providers in VMMC. Projects using web-based platforms like the OTH should factor in unreliable internet access when looking to increase uptake in these areas.

Data Snapshot



Related Resources

[VMMC Quality Improvement Assessment Tool](#)

[Creating Demand for Voluntary Medical Male Circumcision: A Training for Community Mobilizers](#)

[VMMC Demand Creation Assessment Tool](#)

[Training for Community Mobilization for VMMC—Trainer's Slide Deck](#)

[VMMC Online Training Hub \(OTH\)](#)