





AIDSFree Tanzania VMMC

Duration of Activity: October 2014–December 2019

In Tanzania, AIDSFree worked with the Government of Tanzania using mixed modalities to reach and maintain 80 percent circumcision coverage by scaling up early infant male circumcision (EIMC) with simultaneous focus on early adolescent male circumcision (EAMC) and voluntary medical male circumcision (VMMC). AIDSFree worked with facilities, districts, and regions both to build capacity and to create ownership of these services so that each program had the capacity and management capabilities for long-term, sustainable voluntary medical male circumcision (VMMC) implementation.

Technical Approach & Key Activities

Capacity Building for Sustainability

AIDSFree focused on building the capacity at the site and district levels with the aim to transfer voluntary medical male circumcision (VMMC) and EIMC programming to the Government of Tanzania. AIDSFree built the capacity of the Ministry of Health and regional and district authorities to ensure that VMMC and EIMC services were fully integrated within existing health facility services through district- and region-led provider

Life of Project Funding: \$45.4 million

AIDSFree Tanzania VMMC Objectives

- Strengthen and support sustainable VMMC and EIMC services newly integrated into national primary health care.
- Transition an efficient, sustainable model of high-quality VMMC and EIMC service delivery to the Government of Tanzania to maintain 80 percent circumcision prevalence among males in districts that have met or exceeded 80 percent coverage in Iringa and Njombe regions.
- Complete VMMC scale-up in Tabora to achieve 80 percent prevalence targets in PEPFAR priority districts, and continue to support EIMC services to transition to sustainability service delivery.
- Support VMMC services and introduce EIMC services to Morogoro and Singida, and use mixed service modalities to achieve the annual target and to provide sustainable service delivery.

trainings, supportive supervision, and quality assurance visits to maintain quality service delivery. AIDSFree prioritized sustainable VMMC implementation with a process that used tools consistent with guidance from the PEPFAR Sustainability Index and Dashboard. To build the capacity of local governmental authorities – a crucial step in the sustainability process – AIDSFree provided subawards to seven local government authorities and three regional health management teams.



Adolescent-Friendly Platform

AIDSFree supported a comprehensive and adolescent-friendly integrated platform of VMMC service delivery in sustainable districts. Health facilities were supported to promote adolescent-friendly male circumcision services to comprehensively meet the needs of adolescent males through the use of adolescent-friendly health providers, age-appropriate counseling materials, and specialized services with appropriate referrals.

Demand Generation

AIDSFree worked to identify and build capacity of key groups and community members to conduct sustainable demand creation activities. AIDSFree used experiential learning approaches to assess motivational incentives, message dissemination, timing options, service environment, and the role of community-owned resource persons as drivers of VMMC uptake. Strategies included: mass media campaigns promoting self-reinforcing messages; community mobilization at village level incorporating social routines and schedules; and setting-based one-to-one interactions to address individual needs and support linkage to services. AIDSFree collaborated with local partners, CSOs, and other community-based organizations through fixed-amount awards and seed funding of innovative ideas to build on existing networks and cadres of community workers to enable the community to drive demand.

Achievements

With AIDSFree support, a total of 563,139 boys and men received safe, high-quality VMMC services and 17,844 circumcisions for infant males aged 1- 60 days old. Iringa and Njombe regions reached male circumcision saturation, defined as 80 percent circumcision prevalence for 10–34-year-old males, between October 2014 through September 2019. Overall 80 percent HIV testing services uptake was achieved with a 0.3 percent positivity rate. AIDSFree trained 709 EIMC and VMMC providers and supported 77 static/routine VMMC sites and 52 EIMC sites. AIDSFree also collaborated with Sauti Project Mobile Services conducting 1,837 circumcisions at Sauti sites aimed at reaching men over the age of 20 years.

Challenges, Responses & Looking Forward

AIDSFree faced a variety of challenges during implementation but adapted throughout the process and forged new ways to improve access to and ensure provision of quality services. Annual targets remained high, even with the success of the program and the achievement of targets in many districts. This meant that the team had to adapt approaches to reach the late adopters, older men, and those in the harder to reach communities in order to attain VMMC targets.

Sustainability

Since 2015, AIDSFree has focused on sustainability, prioritizing the integration of VMMC services within other routine services, though it has been challenging to fully integrate. AIDSFree has provided ongoing



advocacy with key stakeholders on the use of integration to promote long-term sustainability by identifying action items based on sustainability assessment findings. Infrastructure and facility space remain a constant challenge with integrating VMMC at health facilities – many lack an operating theatre, which creates a challenge for providing routine services and can result in low uptake of VMMC services.

To further promote sustainable service delivery, campaigns are being phased out in all regions, with a goal of having the majority of circumcisions coming from health facilities providing routine VMMC service delivery and facility-led outreaches. For demand creation, the project has prioritized the use of local Volunteer Community Advocates (VCAs) from the communities they serve over paid promoters from outside communities.

Service Delivery

VMMC services rely on a large amount of supplies and commodities for implementation of services. Delays in procurement and challenges in government clearing processes have impacted the ability to not have stock-outs during service delivery. In the early years, ensuring that opt-out HIV testing for all VMMC clients for HIV was difficult, as test kits are not always available. With the new focus on efficient testing strategies, the project has lead efforts to introduce HTS screening tools in the national VMMC program but had various policy barriers that it had to overcome to implement this approach.

Availability of Trained VMMC Providers

AIDSFree collaborates closely with the Ministry of Community Development, Gender and Children in VMMC implementation and utilizes Ministry of Health providers for all VMMC providers. Given this, the project is affected by issues around recruitment and retention of providers at health facilities. Trained providers are often moved to different sites or given other tasks by the health facility. In addition, VMMC providers can be recruited by other implementing partners to work in non-AIDSFree regions, which has negatively impacted uptake of services delivered at AIDSFree sites.

To ensure continued success, AIDSFree continuously advocates with regional and district authorities to have VMMC training to be incorporated in health management team budgets, continues to reinforce site-level data collection and engage providers in data for decision-making, and establishes forums at district, regional, and national levels for data dissemination to best monitor and evaluate project implementation.



Data Snapshot

DATA SNAPSHOT: Tanzania VMMC

TOTAL ACHIEVEMENT (October 2014 - September 2019)



563,139

VMMCs provided



17,844

early infant male circumcisions for all quarters



0.1%

adverse event rate for all quarters

FY 2019 Q4 DATA SPOTLIGHT



1,521

early infant male circumcisions in Q4

94%



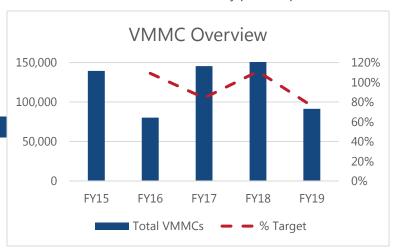
of patients made a follow-up visit within 14-days of surgery

Key Highlights

709 VMMC/EIMC providers trained

26 active District Sustainability Taskforces

100% of districts with sustainability plans in place



Related Resources

Tanzania VMMC Sustainability Summary

Tanzania VMMC Sustainability Baseline Assessment

Early Infant Male Circumcision Services for HIV Prevention

Meet Albert Cosmas, A Traditional Healer Who Became A VMMC Ambassador