

Improving programming to encourage voluntary medical male circumcision in Tanzania

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Highlights

Evidence impact

- The impact evaluation helped Jhpiego identify supply and demand barriers associated with the use of voluntary medical male circumcision (VMMC). The organisation drew from the findings when designing a subsequent project to increase the uptake of VMMC among adults.

Factors that contributed to impact

- AIDSFree, the implementing partner of the amended project, has a consortium under which it hosts several partners. Jhpiego is one of these partners. Jhpiego was able to leverage this relationship in disseminating evaluation findings and encouraging their uptake.

Impact evaluation details

Title: [Using smartphone raffles to increase demand for voluntary medical male circumci...](#)

Authors: Hally Mahler, Eva Bazant

Status : Completed March 2016



Context

Numerous countries in Sub-Saharan Africa have made tremendous efforts to scale up evidence-based HIV-prevention efforts, especially voluntary medical male circumcision (VMMC). In 2009, Tanzania's Ministry of Health and Social Welfare (now called the Ministry of Health, Community Development, Gender, Elderly and Children) initiated pilot programmes to encourage VMMC in three regions, with plans to scale up to 12 regions in 2010. The ministry adopted various communication approaches to increase the demand for VMMC among its male citizens, but challenges remained. Official data (2010–2014) on regions with low VMMC uptake show that men aged 20 and above have not made use of the VMMC services provided to them. The VMMC programme reached only 21 per cent of the target population of men aged 25–34. Stigma attached to VMMC after adolescence was identified as one of the main reasons for low demand.

In 2013, 3ie collaborated with researchers from Jhpiego to implement and evaluate an intervention that offered a smartphone raffle to encourage uptake of VMMC services by men aged 20 and above. Participants were entered in the raffle if they referred a man for circumcision. The study, a randomised controlled trial, compared uptake at facilities that offered the smartphone raffle with those that did not.

Evidence

The study's findings showed that the treatment groups had a higher uptake of VMMC, but the difference was not statistically significant.

The focus group discussions held during the study revealed that men had significant exposure to the VMMC programme and were well aware of it. However, their opinions about the benefits of a smartphone raffle were mixed. Though some clients believed that raffle promotions led them to act on circumcision, for others it created suspicions and failed to address the reasons why adult men do not adopt VMMC.

Evidence impacts

Improving programming to increase VMMC uptake among older men

The mixed results from the impact evaluation of the smartphone raffle incentive in terms of increased uptake of VMMC by adult men suggested a need to identify the barriers keeping the male population from using VMMC services. As a result, Jhpiego, the implementing agency for the VMMC programme in Tanzania, designed a VIP card for adult men that took into consideration the study's recommendations. This work was done in collaboration with Jhpiego's partners: the health ministry, AIDSFree, the National AIDS Control Programme and FHI360. The card included a menu of 10 adult-friendly service options to increase uptake of VMMC service among adult men.

The recommendation from the evaluation to identify barriers to VMMC use led Jhpiego to engage local volunteers, who have intimate knowledge about their communities and the barriers to VMMC uptake by adult men. The volunteers recruited adult VIPs, assisted them to select desired options on their VIP cards, and pre-arranged clinic visits with health facilities.

Suggested citation

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