

SUCCESS STORY

August 2014

**TLC's mobile approach:
It's a community affair**



Boys wait in a classroom to be circumcised



TLC staff circumcise a patient

Swaziland currently has the highest adult HIV prevalence in the world, at 26% among people aged 15-49¹ and 31% among adults aged 18-49². The country's extended National Strategic Framework for HIV and AIDS, 2014-2018, adopted a combination prevention approach, integrating biomedical, behavioral, social, and structural interventions for maximum impact in stopping new infections. One of the core programs is voluntary medical male circumcision (VMMC). Studies show that this intervention provides up to a 68% reduction in HIV infection risk.³

The USAID-funded Building Local Capacity for Delivery of HIV Services in Southern Africa Project (BLC) is partnering with The Luke Commission (TLC), a faith-based organization based in Swaziland, providing TLC with a grant to deliver VMMC to men and boys as well as capacity building to strengthen its sustainability and contribution to the country's HIV response.

TLC, established in 2005, developed a mobile medical outreach model to deliver basic health services to remote communities in the country, overcoming the barrier of a lack of transportation to access health facilities. TLC typically serves more than 500 individuals during an outreach, offering a variety of services including testing and treatment for diabetes, hypertension, tuberculosis, and HIV. TLC also provides eyeglasses to those with impaired vision and all-terrain wheelchairs to those living with disabilities.

On March 19, 2014, at Mpuluzi Anglican Primary School, 50 men and boys had come to be circumcised. In accordance with World Health Organization guidelines⁴, 60 boys who had been circumcised the previous week were brought back to monitor the healing process.

The TLC surgical unit, called Room 6, is a busy place. A driver with a small truck brought the boys in from two earlier sites: Mgotjane and Mangcongco. TLC medical personnel carefully treated each patient to make sure he was taking care of the wound and healing properly.

"I have to make two trips, because there are so many boys," said the driver with a big smile. "I put in many, many, but it was too many. I had to return for more."

1 2006-07 Swaziland Demographic and Health Survey: [http://dhsprogram.com/pubs/pdf/PB2/Swaziland_2006-07_Briefing_Kit_all7\[PB2\].pdf](http://dhsprogram.com/pubs/pdf/PB2/Swaziland_2006-07_Briefing_Kit_all7[PB2].pdf)

2 Swaziland HIV Incidence Measurement Survey (SHIMS) 2011

3 Bailey, R., Moses, S., Parker, C., Agot, K., Maclean, I., et al., (2007). Male circumcision for HIV prevention in young men in Kisumu, Kenya: a randomized controlled trial. *The Lancet*, 369 (9562): 643-656.

4 According to World Health Organization standards, boys or men who have been circumcised should be examined within 14 days of the procedure

TLC's mobile model is recognized as an important strategy in Swaziland's efforts to roll out VMMC for HIV prevention. BLC is implementing the "Development of a Swaziland Male Circumcision Strategic and Costed Operational Plan" project⁵ to support the Ministry of Health to develop a VMMC strategic plan for 2014-2018 and a costed operational plan. This comprehensive strategy seeks to address the gaps of the previous strategy, which fell far short of its VMMC targets. Outreaches and mobile sites, which accounted for the largest number of male circumcisions in the country from January 2013-March 2014, are necessary to sustain and enhance Swaziland's progress in providing VMMC.

In Room 7, a young man who had been circumcised the week before sat watching the boys and men wait for surgery. They asked him if he had been afraid to be circumcised.

"I was not afraid," he answered, adding that TLC's Swazi staff had explained what to expect and what would happen. "They showed us everything."

"Are you hurting now?" another boy asked.

"I am not sore," he replied. "I want to be protected from sickness."

The youth spoke from experience: when he was seven years old, his mother died of an HIV-related illness, and his father died the next year, in 2000. He was raised by his grandparents and still lives with them. Now 21 years old, he would like to go back to high school in order to pass his physical science examinations, despite his age. He remained in the pre-op and post-op room all day, admitting shyly that he'd like to be a doctor.

In Room 7, TLC staff prepare boys and men for circumcision. They receive and verify consent, administer HIV tests and take blood pressure, and educate clients about the procedure. TLC gives the boys bread and juice and shows movies while they wait.

⁵ Funded by the Bill and Melinda Gates Foundation

After surgery in Room 6, males recover in Room 7. They each receive a green bag with soap, a small towel, vitamins, and Panado, as well as a post-op instruction pamphlet and a date for the first follow-up appointment. Bandages will be removed at the two-day follow-up. Another checkup will be scheduled after seven days.

Part of the success of TLC's mobile approach is that it involves the entire community, from those engaged to transport the patients, to parents and guardians who accompany boys to give their consent and provide support, to community leaders and teachers who serve as advocates to inform the community of the importance of VMMC. It brings essential services to people where they are and involves them in the delivery of services.

Launched in 2010, the USAID-funded Building Local Capacity for Delivery of HIV Services in Southern Africa Project (BLC) strengthens government, parastatal, and civil society entities to effectively address the challenges of the HIV and AIDS epidemic.

Throughout the Southern Africa region and with specific activities in six countries, BLC provides technical assistance in organizational development, including leadership, management, and governance in three key program areas: 1) care and support for orphans and vulnerable children; 2) HIV prevention; and 3) community-based care.

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