

Note to the Press

Eastern and Southern Africa region agree to accelerate scale up of male circumcision services in the context of HIV prevention

Harare, 17 May 2007 --Sixty-five participants representing Ministries of Health, Mission Health Services providers (Faith-Based Organizations), NGO Health Service providers, UN agencies and other development partners met from 7-9 May in Harare, Zimbabwe, to discuss how best to scale up male circumcision services for HIV prevention in the Eastern and Southern Africa region.



The participants at the three-day meeting agreed on the need to integrate male circumcision scale up within the framework of comprehensive HIV prevention, and to put in place effective and adequate communication strategies.

The meeting also underscored the need to consider alternative models for scaling up male circumcision, such as task shifting (using of nurses, midwives, medical officers) and use of mobile teams in order to achieve the acceleration goal.

The meeting acknowledged the important role that traditional practitioners play in male circumcision and agreed that more consultation needed to occur at country level to better understand what the traditional practitioners are doing and define how they could be involved in safe male circumcision scale up.

Participants also agreed on the following next steps:

- Brief national leaders, including Ministers of Health and other stakeholders, on the outcomes of the meeting and advise them on national road-maps for scaling-up male circumcision.
- Develop policy documents on male circumcision based on the WHO-UNAIDS recommendations
- Engage national stakeholders, in particular traditional leadership and practitioners, and establishment, where appropriate, of national task teams on male circumcision, ensuring that these task forces work in the context of existing national HIV prevention working groups or task forces.
- Integrate and cost male circumcision into existing national HIV prevention strategies and services
- Undertake resource mobilization to support scaling up of male circumcision activities

UN agencies, in collaboration with the SADC Secretariat, agreed on a joint work plan that includes finalizing normative tools, development of communication guidelines, establishment of technical support teams, and accelerated support to countries.

The meeting, organized by WHO, UNAIDS, UNICEF UNFPA and the Southern African Development Community (SADC), drew country participants from Botswana, Kenya, Lesotho, Malawi, Mozambique, Namibia, Swaziland, Tanzania, Uganda, Zambia and Zimbabwe .

For more information

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