FACTORS CONTRIBUTING TO THE LOW UPTAKE OF MEDICAL MALE CIRCUMCISION IN BAMBAZONGE VILLAGE WITHIN MUTARE RURAL DISTRICT, ZIMBABWE

BY

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Abstract
Male circumcision is one of the oldest and most common surgical procedures worldwide, and is undertaken for many reasons. These include religious, cultural, social and medical reasons. Medical male circumcision (MMC) has become a significant dimension of HIV prevention interventions after the results of three randomized controlled trials (RCTs) in Uganda, South Africa and Kenya demonstrated that circumcision has a protective effect against contracting HIV of up to 60 percent. In 2009, following recommendations by the World Health Organisation (WHO), Zimbabwe adopted Voluntary Medical Male Circumcision (VMMC) as an additional HIV prevention strategy to the existing ABC behavior change model. The purpose of this study was to investigate the factors contributing to the low uptake of MMC in Bambazonge village in Mutare Rural District. The study adopted a quantitative approach using a descriptive cross sectional survey. Self-reported questionnaires with close-ended questions were administered to the eligible respondents. The targeted population was all males aged 18-49 who met the inclusion criteria. The households were systematically selected and a sample size of 234 was used. The Statistical Package for Social Sciences (SPSS) was used to analyse data. The study results indicated that religious affiliation has an influence on one’s decision to be circumcised. Fear of surgical operation, long wound healing time, diminished sexual pleasure and costs that may incur before and after circumcision were identified as the major barriers leading to the low uptake of MMC. The study recommended the Ministry of health and child welfare to come up with more campaign strategies to increase its adoption and reduce misconceptions associated with it.

Key words: Factors, low uptake, medical male circumcision (MMC), Bambazonge village