

# A novel qualitative assessment tool tracking progress towards sustainability of Zimbabwe's voluntary medical male circumcision program



Sinokuthemba Xaba<sup>1</sup>, Gertrude Ncube<sup>1</sup>, Lawrence Nyazema<sup>1</sup>, Patience Kunaka<sup>1</sup>, Talent Moyo<sup>1</sup>, Brian Nachipo<sup>1</sup>, Felisiya Gwarazimba<sup>1</sup>, Abaden Svisva<sup>2</sup>, Nonhlanhla Zwangobani<sup>2</sup>, Bothwell Pindiwe<sup>2</sup>, Delika Rama<sup>2</sup>, Natsai Shoko<sup>2</sup>, Tiwonge Kanyenda<sup>2</sup>, Yemurai Katanda<sup>2</sup>



1. Ministry of Health and Child Care, Government of Zimbabwe
2. Clinton Health Access Initiative (CHAI)

Contact Author: Bothwell Pindiwe, Correspondence— [bpindiwe@clintonhealthaccess.org](mailto:bpindiwe@clintonhealthaccess.org) . CHAI Zimbabwe, No. 4 Arundel Office Park, Mount Pleasant, Harare, Zimbabwe

## Background

- Zimbabwe has been implementing voluntary medical male circumcision (VMMC) since 2009, with approximately 2 million circumcisions conducted by end of 2021.
- To realize and maintain sustainable delivery of VMMC services, program implementation elements must be continuously and regularly assessed, reoriented, and strengthened at both sub-national and national levels.
- The VMMC Transition Assessment Dashboard (VTAD) was developed in response to Zimbabwe's need to measure national and sub-national progress against established sustainability targets.
- The VTAD was designed to collect data on key processes in the VMMC program while tracking progress towards the characteristics necessary for sustainability by programmatic pillar, as defined in the Sustainability Transition Implementation Plan.
- The VTAD measures progress towards five country-defined sustainability goals for the program pillars.

## VMMC Transition Assessment Dashboard (VTAD) Development and Implementation Process

1. Multi-stakeholder taskforce and TWGs were established with clear terms of reference to facilitate sustainability activities, including the VTAD process.
2. Taskforce and TWGs steered the:
  - creation of indicators across each level of the programmatic pillars,
  - establishment of an assessment method for each indicator, and
  - development of data collection tools.
3. Tools were piloted in select districts with subsequent roll out to the remaining districts and provinces after incorporating pilot feedback.
4. Survey CTO was used for data collection during round table focus group discussions. Data analysis was completed in Excel.

## Limitations to the VTAD

- Data collection relied mostly on respondents' recall. The absence of some district health executive members led to information gaps, reducing the ability to document the transition towards sustainability appropriately.
- Delays in dissemination of preliminary findings resulting in delays in incorporation in districts plans and inadequate time to address the identified gaps before the phase II VTAD assessments.

## Results

The VTAD is a biennial activity, with phase I conducted in 2019 and Phase II in 2021. The results obtained were informed by assessments conducted across 60 districts in Zimbabwe. In 2019, 5 districts were at an advanced level of sustainability but had regressed by 2021 due to acute economic challenges, high staff attrition levels, and COVID-19 impact on the program. Phase II results show 48 non-metropolitan districts making broad progress towards sustainability. Minor adjustments are still required to bring these districts to an advanced state of sustainability.

Figure 1: Phase I District Sustainability State

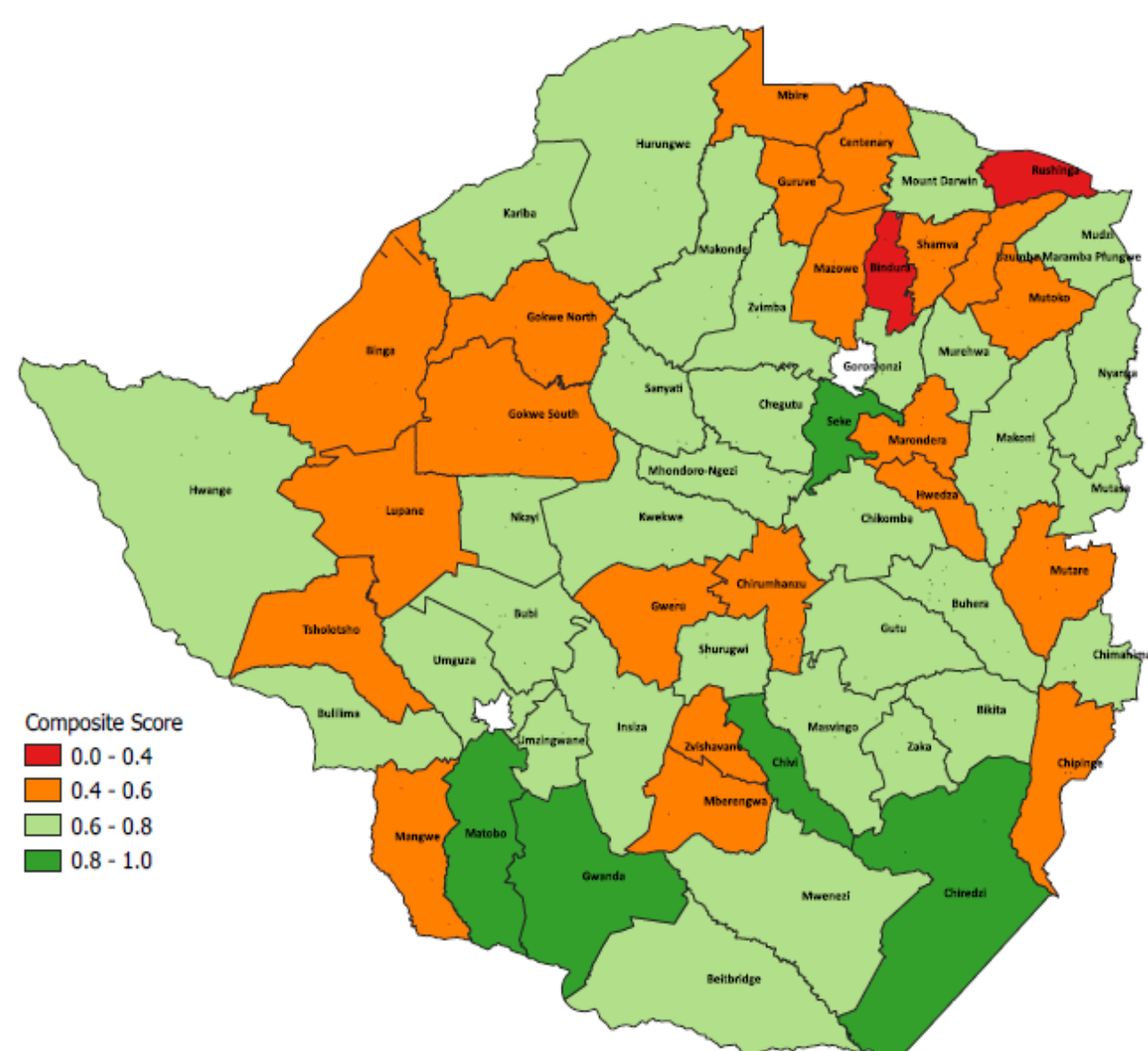


Figure 2: Phase II District Sustainability State

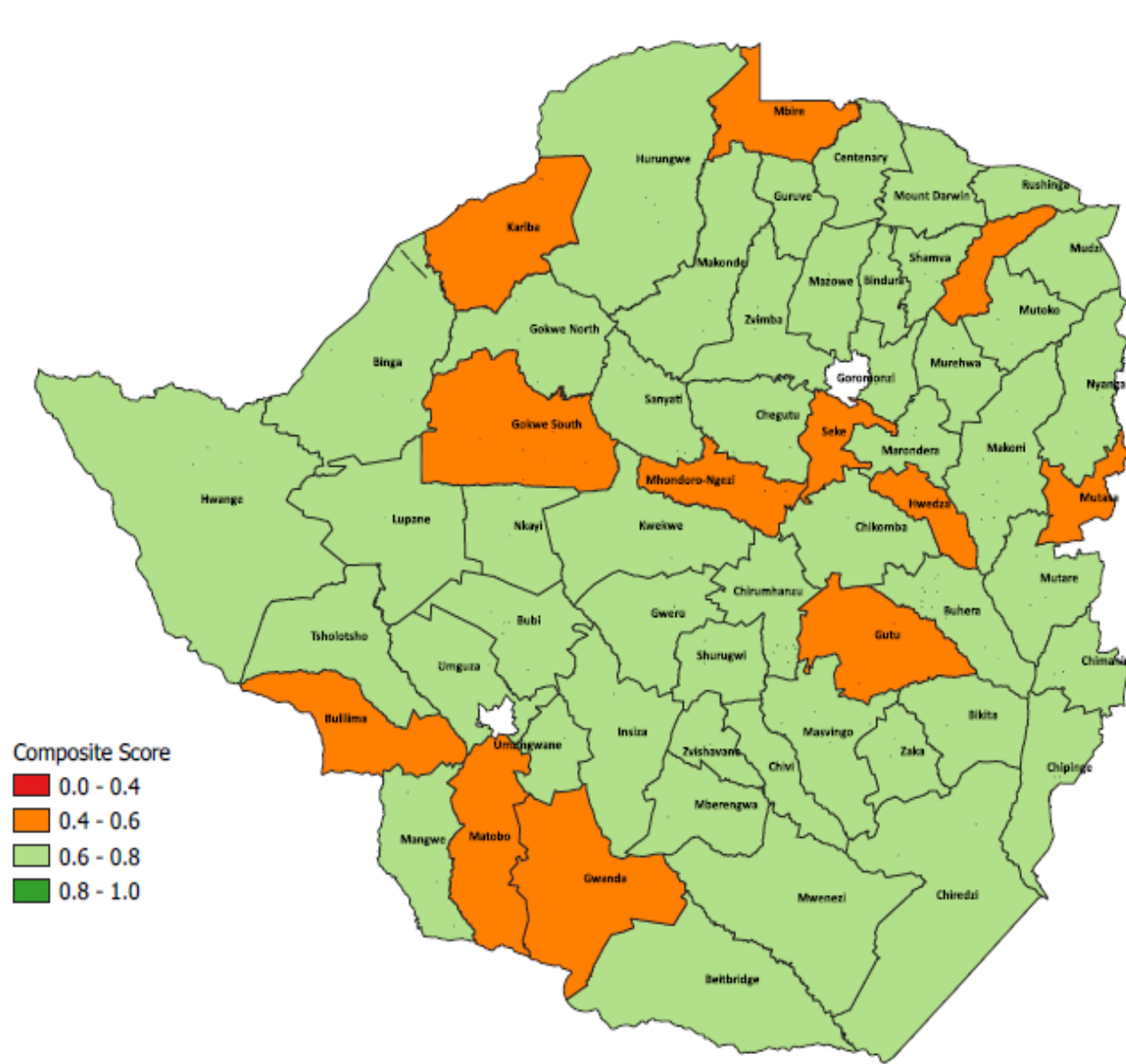
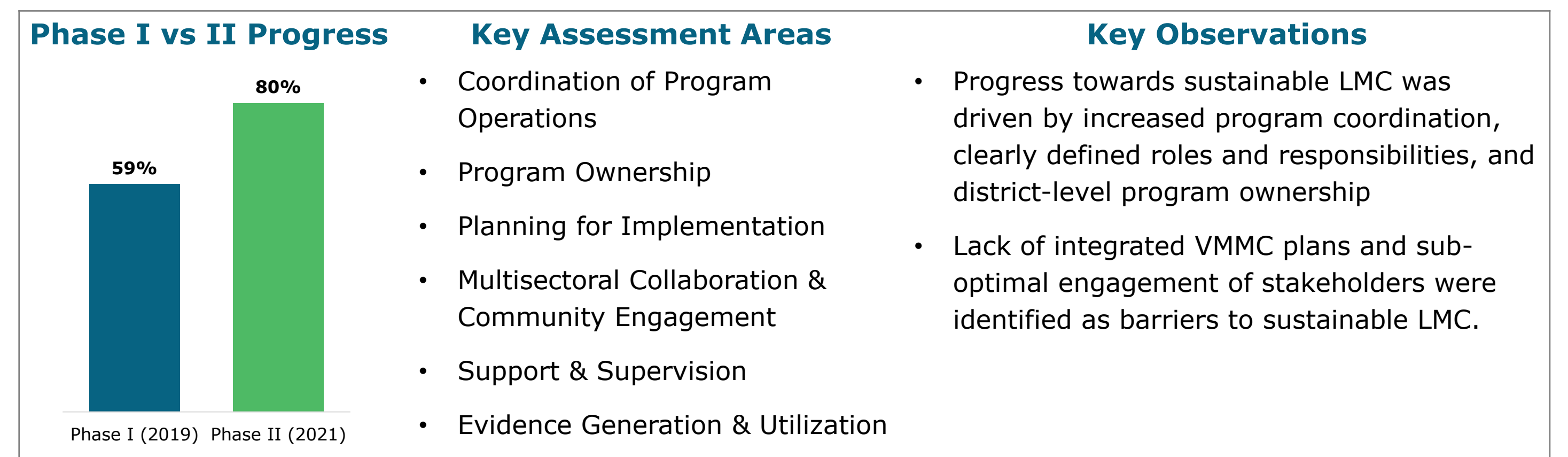


Table 1: Description of District Sustainability States

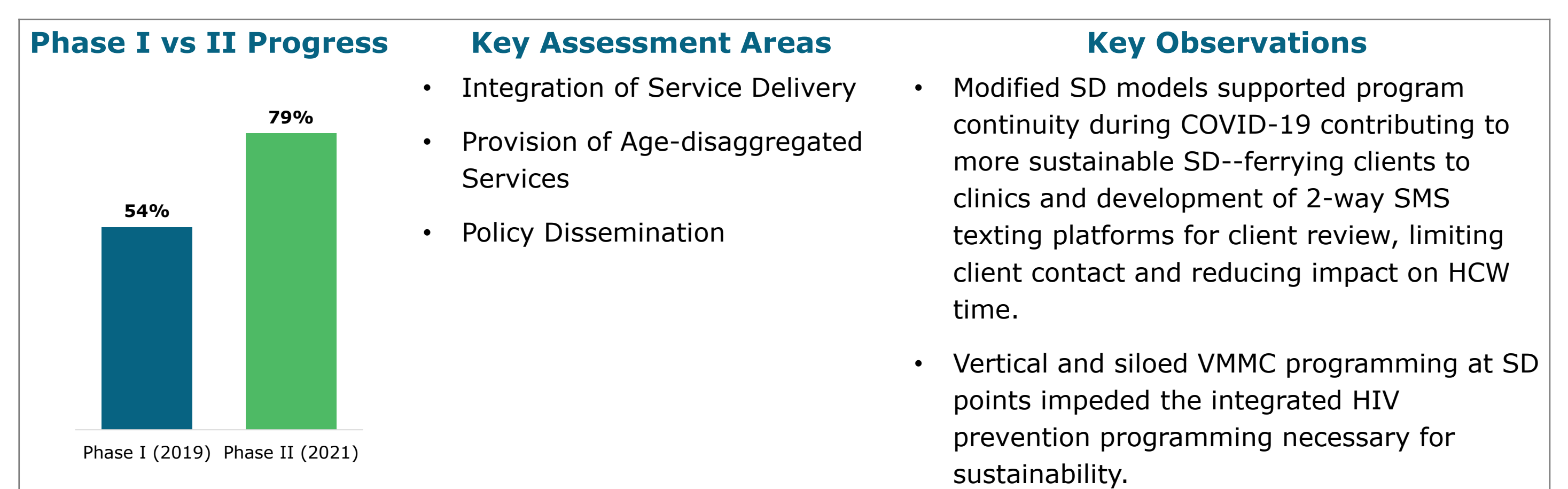
| Score     | Maturity State  | Description                                                                                       | Phase I | Phase II |
|-----------|-----------------|---------------------------------------------------------------------------------------------------|---------|----------|
| 0 - 40%   | Not yet started | Implementation approach is unsustainable and requires significant reorientation.                  | 2       | 0        |
| 40 - 60%  | Early           | Implementation has some sustainability characteristics but still requires some adjustments        | 22      | 12       |
| 60 - 80%  | Intermediate    | Implementation is approaching sustainability but still requires minor adjustments and maintenance | 31      | 48       |
| 80 - 100% | Advanced        | Implementation shows sustainable characteristics and needs to be maintained                       | 5       | 0        |

## Results by Programmatic Pillar

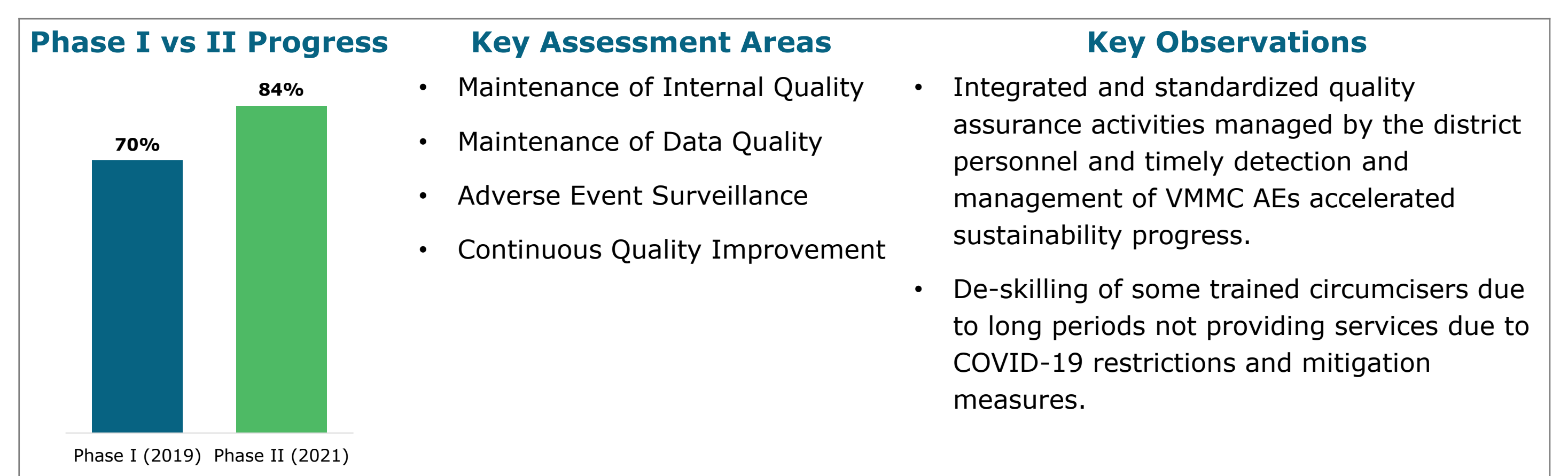
**Leadership Management & Coordination (LMC)** – the goal is to foster program ownership and buy-in for VMMC as a part of Combination HIV Prevention across all key stakeholders.



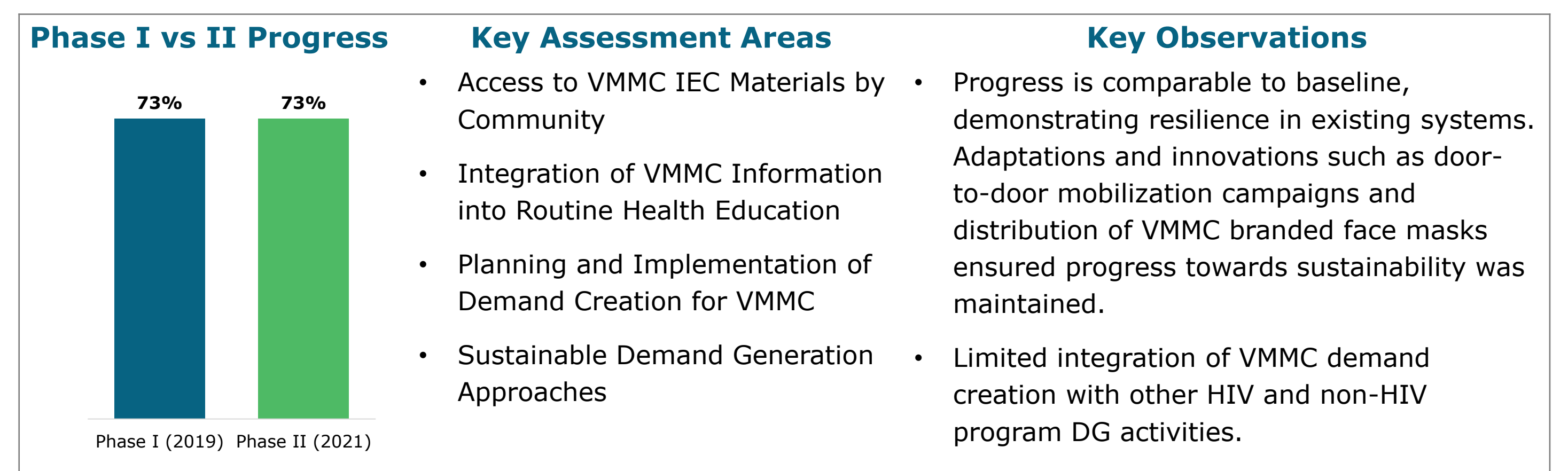
**Service Delivery (SD)** – the aim is to efficiently decentralize and strengthen VMMC services to ensure they are accessible, affordable, and effective enough to meet both scale-up and maintenance phase targets.



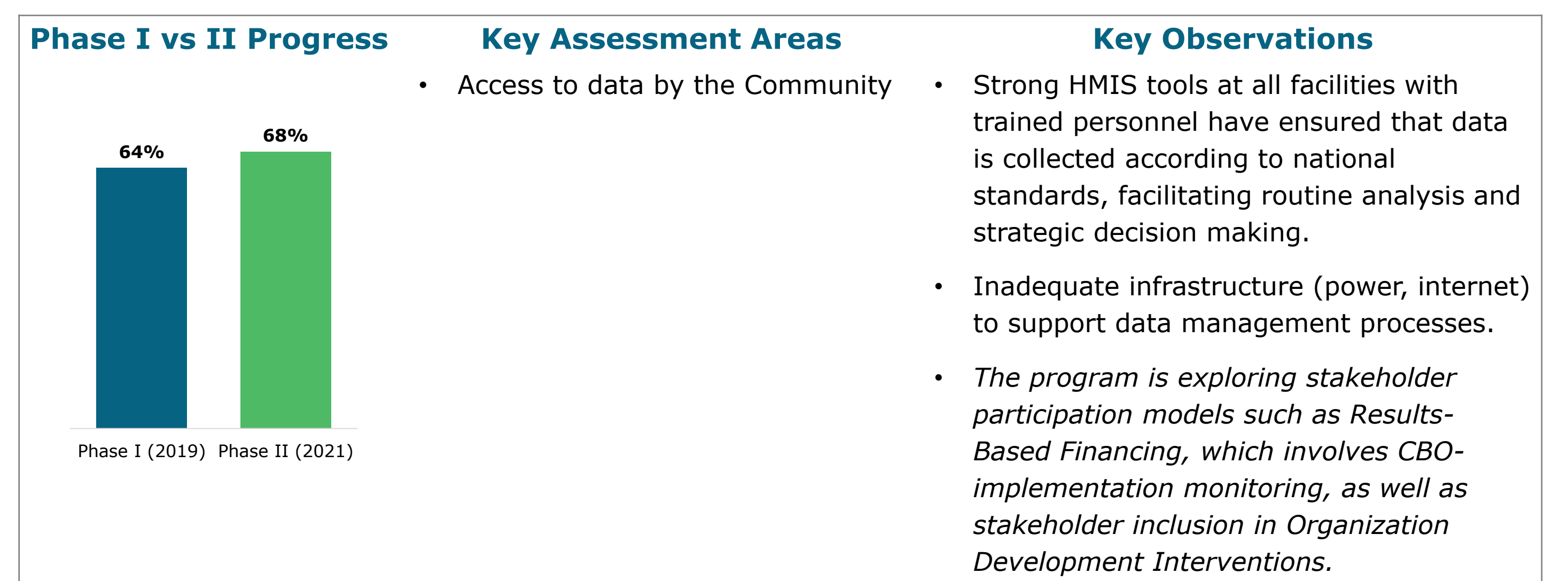
**Program Quality (PQ)** – the goal is to provide high-quality, safe male circumcision services through enhanced quality assurance and strengthened clinical mentorship.



**Demand Generation (DG)** – the aim is to create sustainable, effective, and efficient demand generation approaches that will eventually result in the transition to a state of high natural demand for VMMC services.



**Strategic Information (SI)** – the goal is to strengthen the VMMC monitoring and evaluation system to ensure accountability and learning while integrating with other HIV prevention programs.



## Conclusion

The VTAD is designed as an iterative monitoring process that incorporates stakeholder feedback on progress towards country-defined sustainability. Outputs from the VTAD are useful in assessing program opportunities and weaknesses to inform effective and sustainable strategic planning. Routine program monitoring and the VTAD are complementary and help align the VMMC program towards meeting sustainability targets. Subsequent VTADs will inform the evolving conversation about sustainability of HIV prevention programs in the context of achieving and maintaining epidemic control.