Dedication

To all children whose hearts have been broken by loosing their beloved parents due to HIV and AIDS. They wonder what the world holds for them.
Acknowledgements

This paper would have not been possible without the support of so many people who contributed their time, their skills and their resources in order to make it a reality.

My special and profound gratitude goes to my supervisor, Mr. Nyereyemhuka for his continued critical support and input.

Furthermore, I would like to thank the staff at Spilhaus, Harare Hospital for their cooperation and their input into this paper. Special thanks go to the medical doctor at the circumcision site for his tireless effort in contacting the brave men who went through the operation for them to come for the interviews.

My gratitude also goes to the men and women I interacted with to make this study a reality, especially for responding to a short notice for the interviews. Thank you all.

Finally, I would like to thank the Lord for giving me the strength to carry out this study.
Abstract

This study explored the knowledge levels, beliefs and attitudes on male circumcision as an HIV intervention among a non-circumcising society within a country with high levels of heterosexually-transmitted infection. The study sought to gain an insight on the acceptability of male circumcision in Mbare and Southerton suburbs of Harare, Zimbabwe. A sample of 20 males who were circumcised at a health facility, 20 non-circumcised males and 20 females were reached. Three focus group discussions were held, one for non-circumcised men, one for women with circumcised partners and one for women with non-circumcised partners. Interviews were held with men circumcised at health facilities and one Key Informant (medical practitioner) from Spilhaus, Harare Hospital.

Forty-seven percent of the respondents showed knowledge on the relationship between male circumcision and the prevention of HIV and AIDS. Educational attainment and different religious beliefs impact on the prevalence of male circumcision. Highly educated men sought male circumcision services more than others with secondary and primary level of education. Men who do not belong to any religion contributed the highest number of circumcised men. A significant number of women expressed that they will bring in their sons for circumcision. All most all of the circumcised men denied that male circumcision reduces sexual pleasure. A significant number of men cited stigma associated with male circumcision. Women’s role in male circumcision is seen in the preoperative and postoperative stages of male circumcision so that they provide care for the male.

For men, the main predictors of circumcision preference pertained to beliefs surrounding sexual pleasure; for women, knowledge about the relationship between male circumcision status and sexually transmitted infections acquisition was the key indicator for circumcision preference. Among both sexes the main barrier to circumcision was fear of pain and death.

The study thus noted that the community is not aware of the benefits of male circumcision and hence making it difficult to accept it as an HIV preventive measure. Awareness and education campaigns to increase people’s awareness on the benefits of male circumcision are needed in reducing the risk of HIV.
# TABLE OF CONTENTS

_Dedication_  
_Dedication_ 1

_Acknowledgements_  
_Acknowledgements_ 11

_Abstract_  
_Abstract_ III

_Table of Contents_  
_Table of Contents_ IV-VI

_Acronyms_  
_Acronyms_ VI

_List of Tables_  
_List of Tables_ VII

_List of Figures_  
_List of Figures_ VII

**Chapter 1: Introduction**

1:1 Background to the study 1-10

1:2 Statement of the problem 11-12

1:3 Assumptions 12-13

1:4 Aim of the study 13

1:5 Objectives 13

1:6 Definitions 14

**Chapter 2: Literature Review**

2:1 Origins of male circumcision 15-32

2:2 Theoretical Framework 32-35
Chapter 3: Methodology

3:1 Type of research 35-37
3:2 Target population 37-38
3:3 Sampling 38
3:4 Data Collection Techniques 39
3:5 Data Analysis 39
3:6 Feasibility 40
3:7 Limitations 40

Chapter 4: Research Findings and Discussion

4:1 Demographic Characteristics of Respondents 41-44
4:2 Definition of male circumcision 45
4:3 Extend of Male Circumcision in Mbare and Southerton Suburbs 46-47
4:4 Knowledge on Male Circumcision and reduced risk of HIV and STIs 48-51
4:5 Attitudes and beliefs to male circumcision 52
4:5.1 Circumcised men’s views of male circumcision 53-54
4:5.2 Non-circumcised men’s views of male circumcision 55-56
4:5.3 Women’s views of male circumcision 57-59
4:5.4 Preferred Practitioner to carry out male circumcision 60-62
4:5.5 Circumcision of children and infants 63-64
4:5.7 Decision for male circumcision 65-66
4:5.8 Stigma attached to male circumcision 67-68
4:6 Scaling-up the provision of male circumcision 69-72
4:7 Provision of additional health services in male circumcision 73-74
Chapter 5: Summary, Conclusions and Recommendations

5:1 Summary 74-78
5:2 Conclusions 78-79
5:3 Recommendations 79-80

BIBLIOGRAPHY 82-86

APPENDICES
Annex 1 Questionnaire administered to circumcised men 87-90
Annex 11 Questionnaire administered to the key informant- Health Practitioner 91-93
Annex 111 Focus Group discussion guide for non-circumcised males 94-96
Annex IV Focus Group discussion guide for women with circumcised partners 97-98
Annex V Focus Group discussion guide for women with non-circumcised partners 99-100
**ACRONYMS**

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
</tr>
<tr>
<td>ART</td>
<td>Ant-retroviral therapy</td>
</tr>
<tr>
<td>BC</td>
<td>Before Christ</td>
</tr>
<tr>
<td>DHS</td>
<td>Demographic Health Survey</td>
</tr>
<tr>
<td>ESA</td>
<td>Eastern and Southern Africa</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immuno Virus</td>
</tr>
<tr>
<td>IATT</td>
<td>United Nations Interagency Task Team</td>
</tr>
<tr>
<td>JHPIEGO</td>
<td>The Johns Hopkins Program for International Education in Gynecology and Obstetrics</td>
</tr>
<tr>
<td>MC</td>
<td>Male Circumcision</td>
</tr>
<tr>
<td>MOHCW</td>
<td>Ministry of Health and Child Welfare</td>
</tr>
<tr>
<td>NAC</td>
<td>National AIDS Council</td>
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<tr>
<td>STIs</td>
<td>Sexually Transmitted Infections</td>
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<td>UNAIDS</td>
<td>Joint United Nations Programme on HIV and AIDS</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organisation</td>
</tr>
</tbody>
</table>
List of Tables and Figures

List of Tables

Table 1: Knowledge on STIs and HIV ................. 48
Table 2: Men’s beliefs around sexual aspects of male circumcision ... 53
Table 3: Why some men do not go for male circumcision .... 55
Table 4: Women’s beliefs around sexual aspects of male circumcision ... 57
Table 5: Whose decision to go for male circumcision .... 65

List of Figures

Figure 1: Age analysis of respondents ................. 41
Figure 2: Educational levels of respondents .......... 42
Figure 3: Religion of circumcised men .......... 44
Figure 4: Extend of male circumcision in Mbare and Southerton Suburbs ... 46
Figure 5: Preferred Practitioner to perform male circumcision ........ 60
Figure 6: Age for circumcision children and infants ........ 63
Figure 7: Stigma on male circumcision .......... 67
Figure 8: Scaling-up the provision of male circumcision .... 69
Figure 9: Provision of additional health services to male circumcision .... 73