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Education Level and Acceptability of Male Medical Circumcision for HIV/AIDS Prevention in Mityana District: A Case Study of Mityana District Referral Hospital.

This study analysed education level and acceptability of male medical circumcision for HIV/AIDS Prevention in Mityana district, taking Mityana District Referral Hospital as a case study. Specifically the research investigated the drives that make people seek Male Medical Circumcision (MMC) services, the Knowledge ability about MMC by the clients, the attitude and perceptions of the clients on MMC and the challenges faced in implementing MMC for HIV/AIDS prevention in Mityana district.

A case study design was adopted to study the influence of education level on acceptability of Male Medical Circumcision. This design was ideal because it enabled the researcher to explore more about the subject under investigation at a minimum cost of time and financial resources. Data were collected by use of a questionnaire, interview guide and observation checklist. The data were mainly analysed qualitatively with the researcher often quoting selected respondents verbatim so as to buttress arguments raised in the course of discussion. This was substantiated by secondary data. The study found out that people are driven to seek MMC services for HIV/AIDS Prevention because of a number of factors. These are the knowledge that MMC reduces the possibility of contracting a number of Sexually Transmitted Infections (STIs) including HIV/AIDS; the spirited campaign to promote the procedure; the influence of peers and spouses; and the availability and affordability of the procedure. The study also found out that knowledge ability of the clients about MMC promotes its acceptability. This is the knowledge that it is pain free; is carried out by trained surgeons and under sterile conditions. It was established that the educated easily comprehend, analyse, interpret and assimilate information about MMC more easily than the less educated. The study established that the attitude and perceptions of the clients on MMC determined its acceptability. Respondents had a positive attitude towards MMC that it was a safe procedure; with no side effects; being conducted by trained surgeons; and under sterile conditions. There were also some negative attitudes that it was aimed at converting people into Islam; that it would promote promiscuity in men; and that the foreskins cut in the process would be exported for monetary value. The study also found out that the implementation and roll out of MMC faced challenges such as opposition of some religious leaders; the distance to Mityana district referral hospital; and the low and delayed funding of the project from AMREF. The study recommends that there is need to intensify the MMC campaign to remove all fears and doubts in the population; need to design a strategy to bring on board religious and cultural leaders in the promotion of MMC; including MMC on the menu of services and behaviours considered as healthy living; and rolling out of compulsory MMC among the soldiers, prison warders, policemen, since they are often considered as most at risk persons to HIV/AIDS, at birth and before joining post primary education institutions.

Key Words: Education Level, Acceptability, Male Medical Circumcision, HIV/AIDS, Prevention, Referral Hospital, Mityana District