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PERCEPTIONS AROUND THE ROLE OF FEMALE HEALTH WORKERS IN PERFORMING MALE CIRCUMCISION AS AN HIV/AIDS PREVENTION STRATEGY IN SOUTH AFRICA.

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Declaration

I, Lillian Ngina Mutunga declare that this is my own work, submitted for the degree of Master of Arts in Development Studies at the University of Witwatersrand in accordance with the university's ethical guidelines. It has not been submitted before for any other degree or examination in any other university.

_____ _____

Lillian Ngina Mutunga Date

DEDICATION

This research is dedicated to; the two Elizabeths' in my life.

Mom, for being a super mom

Lizzie for making me one.

And to Frank, always.

ACKNOWLEDGEMENT

I would like to thank my supervisor, Dr Terry-Ann Selikow for her tireless effort and support. Your encouragement and support during my trying times is greatly appreciated. Thank you very much.

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Abstract

Male circumcision as a HIV prevention strategy is still a relatively new concept. There is a lot of research on studies on various aspects of it. This study's focus was the perceptions around female health workers performing male circumcision as part of HIV prevention strategy. The aim of the study was to situate the policy in the social cultural context in which it would be carried out. Most acceptability studies have focused on the acceptability of the procedure as a whole to the community and gender issues in relation to male circumcision have been focused on the effects of male circumcision to women. There has been little focus on gender issues on the part of the health care workers who are the implementers of the strategy; and therefore instrumental to the success of the policy.

The study took place in the peri-urban areas of Midrand; Rabie Ridge and Ivory Park and data was collected through interviews and document analysis. The theories of structuration and the post traditional order were used to understand choice and decision making in the modern society.

Generally, the notion of female health workers performing male circumcision was found to be acceptable to most participants, although this was not without issues. Cultural constructions of gender that depict men as superior to women and masculine identity issues were found to be barriers to female health workers performing male circumcision. The high acceptability of female health workers performing male circumcision and other non traditional aspects of circumcision including medical circumcision and neo natal circumcision was attributed to the nature of decision making in the post traditional order that enables individuals to make decisions from a variety of options without feeling the need to ascribe totally to traditional prescriptions. The barriers uncovered however show that there is still need to engage further with stakeholders if the implementation of the policy is to be successful.

LIST OF ACYRONOMS

ABC	Abstainace, Be faithful, Condom use
AIDS	Acquired Immunodeficiency Disease Syndrome
FHW	Female Health Worker
HIV	Human Immunodeficiency Virus
HSRC	Human Sciences Research Council
MC	Male Circumcision
MDG	Millennium Development Goals
MHW	Male Health Worker
MOVE	Models for Optimising the Volume and Efficiency of male circumcision services
PEPFAR	the United States Presidents Emergency Fund for AIDS Relief
STI	Sexually Transmitted Infections
TB	Tuberculosis
UNAIDS	Joint United Nations Program on HIV/AIDS
USAID	United States Agency for International Development
WHO	World Health Organisation