Project Name: DREAMS

Contact Information

- Sponsor/Funder PEPFAR/GILEAD
- Lead Org(s) USG
- Contact Person within Lead Org(s) Patricia Oluoch
- Email and Telephone contact of contact person hpk7@cdc.gov
- Implementing Partner(s) LVCT Health, HWWK, Afya Jijini, Afya Western/Nyanza, IRDO, IMC and Global Communities

Location

- Is this a multi-country project? What country/countries is the project in? 10 countries
- Which area will you be working in? (State the County, Subcounty, Community e.g Nairobi County, Langata subcounty, areas could be Kibera, Korogocho etc) Nairobi- The Mkurus, Korogocho, Pumwani, Kibera Kawangware, Kibagare
- Which facilities will you be working with? Provide the list of facilities where you will be providing service/ carrying out research. The partners are still working this out having working relationships with facilities

Programme Status

- What type of programme is it? (Demo project, advocacy, programme implementation, modelling, observational cohort study, policy support etc) Service Delivery
- State your goals and objectives To reduce the incidence of HIV in AGYW by 40% by September 2017
- What are the dates of this project? (start month and year, end month and year, results published date. Eg: Jan 2016 Dec 2020) 2016-2017
- Status (ie. Proposed, Planned, Ongoing, Completed) Ongoing but PrEP is to commence in December /January
- What phase of the program are you currently in? (formative research / start-up / recruitment / data collection, data analysis etc) Start up
- When do you plan to start offering PrEP to individuals? Dec/January

Target Population and Criteria

- Who is your target population (select from the list below)?
 - a) General population
 - b) FSW
 - c) Women 25+ years
 - d) Men 25+ years
 - e) Adolescent Girls (<24)
 - f) Adolescent Boys (<24)
 - g) MSM
 - h) Pregnant Women
 - i) Transgender Women
 - j) Transgender Men
 - k) Sero discordant couples
 - I) People who inject drugs (PWID)
 - m) Other (specify)
- What ages are you enrolling? (Please specify exact age ranges. Eg. 18 to 24) 18-24 years
- What is the target number of PrEP enrolees? Provide per every year of implementation -15,200
- Do you have HIV incidence data in your area /incidence estimate? Yes from modelling studies
- Do you have incidence data on your target population? No
- What is the criteria for participants to be enrolled?
 - o Inclusion DREAMS girls, ongoing HIV risk meets national criteria
 - o Exclusion Any girl outside 15-24 years, HIV positive does not meet national criteria

Recruitment

- When is recruitment planned to start? Sensitization started within safe spaces
- What are the specific recruitment communication strategies? Apart from sensitization in safe spaces, program is awaiting national communication strategies
- Are you providing support for additional human resource or any other resources to the facilities?
 As determined by the IPs and identified facilities

Eligibility and Requirements of participants

- If a participant cycles off PrEP are they still included in the program? Not clear
- What type of lab investigations are you doing? (resistance testing, drug levels, etc) Will follow the the national guidelines

Service Delivery

- What are the delivery channels for your project? Highlight the ones that apply for your project from the list below:
 - a) Private Pharmacies
 - b) Private FP Clinics
 - c) Private Hospitals
 - d) Private Testing Centres
 - e) Private General Health Clinics
 - f) Private Schools
 - g) Public Pharmacies
 - h) Public FP Clinics
 - i) Public Hospitals
 - j) Public Testing Centres
 - k) Public General Health Clinics
 - I) Public Schools
 - m) NGOs/Model sites
 - n) Public STI clinic
 - o) Private STI clinic
 - p) Community
 - q) Other (Specify)
- Where is service delivery occurring e.g HTS room, CCC? To be determined by IPS in consulkatation with identified facilities. But CCC is out of question as the beneficiaries said no
- Which health personnel is/will be dispensing PrEP? Hospital Pharmacies, Nurses, Doctors and COs
- Who will be supplying the project with PrEP (ex: Gilead, Mylan)? Gilead
- How long are you planning to give PrEP for each individual? 6 months/1 year/as long as they are
 at risk. So long as the risk persists
- What is the prescription frequency? Initially one month and thereafter as per national guidelines
- How often are the visits? As per the national guidelines. However the program has the opportunity of seeing the DREAMS girls weekly
- How long is the follow up for each cohort? As per the national guidelines
- State the package of service that will be offered. Combination prevention including Behavioral, Biomedical and Structural interventions including Socio -economic strengthening and community mobilization against harmful practices

Data

 What specific data are you collecting? Refer to data tool; enrolment form, assesment and continuation form

- When do you anticipate data (even interim data) will be available? As soon as we start
- If Behavioural Data is being recorded, what data is being collected? (if applicable) Sexual history
- If your work is in Health System Strengthening,
 - What are the objectives?
 - What data are you collecting?
- If your work is in Research, what are your primary objectives/aims?
- If your work is modelling, what are your primary objectives/aims?

Monitoring and Evaluation

- What indicators will you be reporting on? Please provide the list of indicators (policy, implementation and impact indicators)
- Please provide the tools that you will be using to collect the data Already provided
- Are you collecting data electronically or paper based? Please explain Both will be used
- How do you plan to evaluate for impact? Impact evaluation planned Performed by LSTHM
- Are there any planned midterm or end term evaluations? Implementation Science by Population Counsil

Commodity Management

- What drugs are you using or planning to use? Truvada
- What is the source of your drugs (donations or government supply or private)?Donation
- If it is a donation, which company is supplying the drugs? Gilead
- Are the drugs labelled? I suspect they are
- What quantities are you expecting? Provide scale up plan. Limited to DREAMS areas for now
- What is your current stock status? Number of packs available or pending shipments N/A
- What is your annual target and what quantities do you require per year? 15200
- For how long will you be receiving donations? State the start and end date. As long as DREAMS is
- What is the source of your test kits, creatinine testing, CD4 testing, Viral load testing, Hepatitis B serology? PEPFAR supported

Research and Impact Evaluation

- What research have you conducted in the past concerning PrEP in Kenya? Share the abstracts. N/A
- What research is ongoing /planned during the implementation/study period? Please provide the research questions that you plan to answer, study dates and the summary study information Can be provided
- If there is a cost effectiveness/cost analysis component, what is the objective (If applicable) NO
- Is there any plan to conduct modelling? Please provide summary of modelling plans NO

Tools

PrEP Demo Project and Resources Landscape Questionnaire

• What tools are you developing? (IEC, posters, eligibility analysis, videos, training materials etc.)
Assessment, Enrolment, Continuation and and summary report as provided

Funding

- What is the funding level for the project in Kenya? PreP commodities are in kind donation
- What is the transition plan following end of project? Uncertain for now

Additional Comments / Information