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**OPTIONS**  
OPTIMIZING PREVENTION TECHNOLOGY INTRODUCTION ON SCHEDULE

<b>Project Name</b> (Include brief description if applicable)	<b>Sponsor/Funder</b>	<b>Location: County</b> <i>(Please select all that apply from the drop down menu)</i>
<b>DREAMS</b> partnership to reduce HIV infections among AGYW; extends beyond health sector to address poverty, gender inequality, sexual violence, lack of education; PrEP implementation component included	PEPFAR, USAID	Homa Bay, Kisumu, Siaya, Nairobi
<b>Global Evaluation of Micribicide Sensitivity (GEMS)</b> Inform policies and define programmatic considerations related to use of ARV-based prev. products and resistance risk	USAID	All counties where PrEP is implemented
<b>OPTIONS Consortium</b> Provide targeted support to expedite and sustain access to ARV-based HIV prev. products in countries and among populations where most needed	USAID	Nairobi, National
<b>POWER</b> Assesses women's preferences for using microbicides and PrEP through demonstration projects with strategic pilots of delivery strategies, first with oral PrEP. Project will characterize choice, uptake, early adherence and identify cost-effective delivery models, including assessment of repeat HIV testing, decision-making within partnerships, and the interface with reproductive	USAID	Kisumu

<p><b>Partners demonstration project</b></p> <p>Evaluates HIV prevention preferences among approximately 1,000 HIV serodiscordant couples, adherence to PrEP and ART and interface of reproductive health priorities and ART-based prevention. Will implement PrEP as “bridge” to ART, providing PrEP to HIV-negative partner when HIV-positive partner is not yet on ART due to ineligibility based on country guidelines or personal decision.</p>	<p>NIH, BMGF</p>	<p>Kiambu, Nyeri, Nairobi, Migori, Kisumu, Siaya, Homa Bay</p>
<p><b>Gender-Specific Combination HIV Prevention for Youth in High Burden Settings (MP3-Youth)</b></p> <p>To evaluate the feasibility and acceptability of a gender-specific combination HIV prevention package for youth in high burden settings. The study aims to pilot a combination package of gender-specific interventions in western Kenya in a mobile health delivery format using integrated services delivery. Interventions include: Male-Specific Intervention Package (HIV counseling and testing; facilitated linkage to care for HIV-positive; condoms; VMMC); Female-Specific Intervention Package (IV counseling and testing; facilitated linkage to care for HIV-positive; contraception/family planning; PrEP; conditional cash transfer).</p>	<p>PEPFAR, NIH</p>	<p>Homa Bay</p>
<p><b>IPCP Study</b></p> <p>Introduces PrEP to combination prevention interventions. Feasibility study assessing consumer perceptions, cost, delivery options, potential barriers and opportunities for introduction and adherence completed. Acceptability among target populations, cost, menu of combination interventions and feasible delivery options established. Delivers PrEP as part of combination prevention to 2,100 participants over 12 months in preliminary stages. The project will define criteria for PrEP indication among targeted populations, adherence strategies, health system requirements and model impact of PrEP in Kenya.</p>	<p>BMGF</p>	<p>Nairobi, Kisumu, Homa Bay</p>

<p><b>Bridge to Scale (Jilinde Project)</b></p> <p>Scale up of PrEP roll out in real world scenarios. Project to be implemented in different delivery sites based in context and lessons drawn from other projects.</p>	BMGF	Nairobi, Kiambu, Machakos, Mombasa, Kilifi, Kwale, Taita Taveta, Kisumu, Kisii, and Migori
<p><b>Anza Mapema</b></p> <p>Research targeting MSM to see how many take up PrEP when offered</p>	CDC, DFID	Kisumu
<p><b>SEARCH</b></p> <p>Randomized community trial that quantifies the effect of providing PrEP to individuals at substantial ongoing risk of HIV infection from a community model approach</p>	UCSF	Homa Bay, Migori

<b>Consumer Demand Driven PrEP use for adolescent Girls and Young Women in Kenya</b>	John Snow Inc	
<b>LEARN</b> Our project is a small pilot project to implement participatory, community led research and advocacy by, with and for young women and adolescent girls. Our research will be looking at the needs, priorities and preferences of this population with regard to PrEP access, uptake and adherence in the broader context of HIV prevention and sexual and reproductive health and rights.	USAID/PEPRAF (DREAMS Innovation Challenge)	Homa Bay, Nairobi

Location: Area (If known) <i>(Please select one answer from the drop down menu)</i>	Location Intervention Delivery point: <i>(For demonstration projects only) Please select all that apply from the drop down menu)</i>	Lead Org(s): <i>(Please select all that apply from the drop down menu)</i>
Nairobi- The Mukurus, Korogocho, Pumwani, Kibera Kawangware, Kibagare	NGOs/Model sites, Public General Health Clinics, Public Hospitals, Public Testing Centres, Community	CDC and USAID, Johnson and Johnson, Gilead
	Public FP Clinics, Private Hospitals, Private Testing Centres, Private General Health Clinics, Public Hospitals, Public STI Clinic, Private STI Clinic	University of Pittsburgh (Urvi M. Parikh, Ph.D.)
National	N/A	Wits RHI and AVAC
		University of Washington (Connie Celum and Jared Baeten, Co-Project Directors)

	NGOs/Model sites, Public Hospitals, Private Hospitals	KEMRI
Homa bay sub-county	Public General Health Clinics	New York University
Korogocho,	NGOs/Model sites, Public General Health Clinics	LVCT Health

	Private General Health Clinics, Public General Health Clinics, Drop in centres, Youth friendly centres, Private FP Clinics, Private Hospitals, Public Hospitals, NGOs/Model sites, Public STI Clinic	JHPIEGO
	NGOs/Model sites	Nyanza Reproductive Heath Society
NYAMRISRA, Ogongo, Tom Mboya, Sena, Bware, Sibuoche	Public Hospitals, Public General Health Clinics	KEMRI

Kasarani, Githurai, Zimmerman, Mwiki, Kariobangi, Saika, Eastleigh, Huruma, Kayole, Majengo, Kiambu, Ruaraka	Public General Health Clinics, , NGOs/Model sites	BHESP
Nairobi Eastern Suburbs and HomaBay	Community	ATHENA Network



Facilities implementing	Contact Person within Kenya
To be determined	Patriciah Oluoch (CDC) - hpk7@cdc.gov and Emma Mwamburi (USAID) emwamburi@usaid.gov
PrEP implementing project sites	Urvi Parikh ump3@pitt.edu; +1 412- 648-3103
N/A	Dr. Wanjiru Mukoma wmukoma@lvcthealth.org
	Elizabeth Bukusi ebukusi@csrtkenya.org ebukusi@u.washington.e du

<p>Central and Nairobi: Thika level 5 Hospital, Ruiru Sub-County Hospital, Kiambu County Hospital, Murang'a County Hospital, Coptic Hospital, Kerugoya County Hospital, Karatina Sub-county Hospital, Nyeri PGH, Pumwani Maternity Hospital, Mbagathi Hospital, Kikuyu PCEA Hospital St. Mary's Hospital</p> <p>Western Kenya Region: Lumumba Health Centre, Migori County Hospital, Rongo Sub-county hospital, Ahero County Hospital, Kisumu County Hospital, Muhoroni Sub-District Hospital, Nyakach Sub-county Hospital, Siaya County Hospital, Bondo Sub-County Hospital, Rachuonyo District Hospital, Railways Health Centre, Kombewa District Hospital</p>	<p>Dr. Elizabeth Irungu eirugu@pipsthika.org; 0721861147 Dr. Kenneth Ngure kngure@pipsthika.org</p>
	<p>IRDO Dr. Irene Inwani - iinwani@yahoo.com</p>
<p>LVCT Health Prevention sites (CBD, Sokoni Arcade, Tivoli), SWOP City clinics, Korogocho Health Centre and Homabay District Hospital</p>	<p>Jordan Kyongo jkyongo@lvcthealth.org</p>

	<p>Daniel Were Daniel.Were@jhpiego.org</p>
<p>Anza Mapema Tom Mboya Clinic and Anza Mapema Town Clinic all within Kisumu town</p>	<p>Dr. Fredrick Otieno FOtieno@nrhskenya.org 0721 759867</p>
<p>Nyandenda HC Nyatoto HC Sindo SCHNyamrisra HC Sindo DistrictOgongo HC Homabay CH Kitare SCHKitare SCH Magunga HC Godbura HC - St Camilus, Nyandiwa, Lwanda Gwassikisegi SDH Kisaku DispensaryTom Mboya HC Rusinga Island of Hope Humanist HC Sena SCH Yokia Dispensary Takawiri DispensaryOngo Health Centre Othoro SDH Rapogi HFBware dispensary, Sibuoche dispensary (Outside community – Midida)</p>	<ul style="list-style-type: none"> <li>• Elizabeth Bukusi , +254 720 617 503, ebukusi@rctp.or.ke</li> <li>• Norton Sang, 0715778930 nortonsang@gmail.com</li> <li>• James Ayieko 0720 925 262 jimayieko@gmail.com</li> </ul>

<p>BHESP Wellness centre Jogoo road  BHESP Wellness centre Dandora  Mama Lucy Kibaki Hospital  Makadara Health Centre  Dandora Health centre  Mathare North Health Centre</p>	<p>Mercy Mutonyi Wafula  <a href="mailto:mercymutonyi@bhesp.org">mercymutonyi@bhesp.org</a></p>
	<p>Jacqui Stevenson  <a href="mailto:jacqui@athenanetwork.org">jacqui@athenanetwork.org</a></p>

Implementing Partner(s)	Programme Type: <i>(Please select all that apply from the drop down menu)</i>	Status <i>(Please select one answer from the drop down menu)</i>
LVCT Health, HWWK, Afya Jijini, Afya Western/Nyanza, IRDO, IMC and Global Communities	Program Delivery /Scale Up	Ongoing
FHI 360, BARC-Lancet Laboratories, University College London and University of Washington/Fred Hutchinson Cancer Research Center.	Resistance Data, Modelling	Ongoing
Avenir Health, LSHTM, LVCT Health (Kenya), Pangaea (Zim), McCann Health, FSG	Advocacy, Modelling, Policy Guideline Support, Implementation Science Research	Ongoing
Wits RHI (Johannesburg), DTHF (Cape Town), KEMRI (Kisumu), RTI, Mass General Hospital, Carnegie Mellon University, Harvard University, University College London	Demonstration Project (trial)	Ongoing

University of Washington, the Infectious Disease Institute of Makerere University, the Kabwohe Clinical Research Centre, the Kenya Medical Research Institute, Kenyatta National Hospital, Massachusetts General Hospital, and Harvard University.	Demonstration Project (trial) , Program Delivery /Scale Up	Ongoing, Proposed
New York University; University of Nairobi; Impact Research and Development Organization (IRDO)	Demonstration Project (trial) , Implementation Science Research	Ongoing
LVCT, SWOP; WHO, UNAIDS, the O'Neill Institute of Georgetown University, the London School of Hygiene and Tropical Medicine (LSHTM), Imperial College London; funded by Bill & Melinda Gates Foundation	Demonstration Project (trial)	Ongoing

International Center for Reproductive Health Kenya (ICRHK), Populations Services Kenya, NASCOP, Avenir Health	Program Delivery /Scale Up	Ongoing
International Center for Reproductive Health Kenya (ICRHK), Populations Services Kenya, NASCOP, Avenir Health	Observational Cohort Study	Ongoing
	Implementation Science Research	Ongoing

	Program Delivery /Scale Up	Ongoing
PIPE (Kenya) and ICWEA (Uganda)	Advocacy, Implementation Science Research	Proposed, Ongoing



Status details: <i>(Please enter start month and year, end month and year, results published date)</i>	Target Population <i>(Please select all that apply from the drop down menu)</i>	Target Age categorization: <i>(Please specify exact age ranges)</i>	Target # of PrEP enrollees
2016 - 2017 First PrEP initiation in January 2017	Adolescent Girls (<24)	18 - 24 years	15,200
November 2016 – July 2020		N/A	N/A
Oct 2015 - Sept 2020	Other	N/A	N/A
July 2015 - June 2020.	Adolescent girls and young women aged 16-24; women 25-29	AGYW - 16 - 24yrs Women - 25 - 29 yrs	

2012 - 2016 (demo) Jan 2017 – Dec 2022 (scale-up)	sero-discordant couples	18+ years	1000 (demo)  (1980 year 1, 2820 year 2) - (scale-up)
Nov 2014 - Nov 2016	Adolescent men and women ages 15-24 ( <i>Only enrolling adolescent female arms on PrEP</i> )	18 - 24	50
2014 - 2017	Female sex workers (18 and older), MSM (18 and older), young women at high HIV risk (15 -29)	YW - 15 - 29 MSM/FSW - 18+ yrs	2100

<i>July 1<sup>st</sup> 2016 – June 30<sup>th</sup> 2020</i>	MSM, FSW, AGYW	AGYW - 15 - 24 MSM/FSW - No age limit	Yr1 - 3000 Yr2 - 6000 Yr3 - 7000 Yr4 - 4776 Total 20,776
Jan 2017 to June 2018	MSM	18-35	156 - Initiation Jan 2017
	General Population	>15	1800 - Start July 2016

October 2016-September 2018	Adolescent girls	18 - 24 years	1500, First enrollment in January 2017
October 2016 – September 2018	Adolescent girls	<24	

Drug used and quantities	If there is a Cost Effectiveness/cost analysis component, what is the objective <i>(If applicable)</i>
N/A	conduct cost effectiveness analyses of frequency of HIV testing and the risk of resistance.
N/A	Cost effectiveness and impact of PrEP
	analyzing cost-effectiveness and modeling delivery approaches

<p>TDF/FTC or TDF 37584 packs of Truvada (scale-up) 9804 in year 1, 25184 in year 2 and 2596 in year 3</p>	<p>a. Determine efficiency, cost, and cost-effectiveness of the integrated PrEP and ART when delivered in public health clinics</p>
<p>TDF</p>	<p>To develop unit costs for PrEP delivered as part of an HIV combination prevention package among men who have sex with men (MSM), female sex workers (FSW) and young women (YW) at high HIV risk in Kenya</p>

Yr1&2 - Gilead Yr3&4 - MOH	To find how much it cost to put a client on Oral PrEP
To receive donations from Gilead	
11250 - One year	

To be provided by GILEAD	
No PrEP provision	



If Behavioural Data is being recorded, what data is being collected? <i>(if applicable)</i>	If your work is in HSS, what data are you collecting?
Sexual history	
	providing technical assistance and support for health systems strengthening with rapid use of data to identify and address implementation bottlenecks throughout the value chain.

HIV risk behaviour (condom use, intravenous drug use, number of sexual partners)	Site readiness assessment


STI cases occurrences Number of sero conversion Number of PAC cases	

If your work is a demonstration project, what are your primary objectives?	If your work is in Research, what are your primary objectives/aims?
	Characterize resistance risk from clinical trials and demonstration studies to understand the duration of time an infected person can be on product before resistance is selected.
	women and healthcare providers, focusing on motivators and obstacles for initiation of and adherence to microbicides and PrEP, to inform development of effective communications, decision tools, and delivery strategies that meet women’s needs and are integrated with established programs, including regular HIV

	Acceptability of combination HIV prevention package to youths including PrEP (Currently on Phase 4)
<p>1. To document PrEP side effects and adverse events among MSM, FSW and YW at high HIV risk</p> <p>a. To monitor safe uptake of PrEP among pregnant women</p> <p>b. To determine acceptability of HIV re-testing among MSM, FSW and YW at high HIV risk</p> <p>2. Develop tools, strategies and messaging to promote uptake and sustained adherence to PrEP as part of a combination prevention package</p> <p>3. To demonstrate effective delivery of oral HIV PrEP as part of a combined prevention package among MSM, FSWs and YW at high risk of HIV</p>	<p>1. To validate tools for risk identification and indications for PrEP initiation among YW at high HIV risk</p>

	to implement operational research to answer several questions on cost effectiveness, cost per client, feasibility and acceptability of Oral PrEP
	<ol style="list-style-type: none"><li>1. Assess proportion of HIV-negative MSM eligible for PrEP and proportion accepting PrEP when offered</li><li>2. Assess adherence to PrEP among those initiating</li><li>3. Drug presence at 3 and 9 months in a sub-sample of 160 high-risk men using DBS</li></ol>
	To determine the effect of targeted PrEP, targeted HIV testing and targeted treatment interventions on top of universal HIV treatment with streamlined care on 3 year cumulative HIV incidence in rural communities in Kenya.

	<ul style="list-style-type: none"><li>▣ define their priorities, set agendas and lead research</li><li>▣ gather meaningful data in safe, learning environments</li><li>▣ contribute to the formal evidence base around HIV prevention science</li><li>▣ advocate for prevention programming reflecting adolescent girls' and young women's lived realities, values and preferences</li><li>▣ empower adolescent girls and young women with the agency to make and enact decisions regarding their sexual and reproductive health, in the context of HIV prevention</li></ul>



If your work is in Modelling, what are your primary objectives/aims?	If your work is in scale-up , what are your primary objectives/aims?
	<ul style="list-style-type: none"> <li>• To reduce the incidence of HIV in AGYW by 40% by September 2017</li> </ul>
<p>Use mathematical modeling to identify the most effective and efficient HIV testing and resistance monitoring strategies during PrEP roll-out. Use this data to inform evidence-based policy recommendations for HIV diagnostic testing frequency and ARV resistance monitoring.</p>	
<p>Delivery of PrEP in the most effective and efficient way to the target populations in priority geographies</p>	

<p>Simulation mathematical models will be used to simulate the health outcomes from collected data, prior results from studies of couples, and the literature to consider clinical outcomes beyond the scope of this project.</p>	<ul style="list-style-type: none"> <li>a. Deliver integrated PrEP and ART for HIV-1 serodiscordant couples at scale in public HIV-1 care centers in Kenya and evaluate program impact.</li> <li>b. Assess facilitators and barriers to a) implementation of integrated PrEP and ART in delivery settings and b) optimized PrEP and ART adherence.</li> <li>c. Develop operational tools that will expand and support delivery of integrated PrEP and ART at scale and secure buy in from relevant stakeholders to ensure delivery continues to scale up at the national level.</li> </ul>
<p>Conduct mathematical modeling to select optimal combination intervention package components and to assess potential population-level impact. (Phase 1 or 2)</p>	

	<p>Goal: To demonstrate, document and disseminate an effective model on how oral Pre-Exposure Prophylaxis (PrEP) can be scaled up as an HIV-prevention intervention in low resource settings.</p> <p>Specific objectives:</p> <ol style="list-style-type: none"><li>1. Demonstrate that oral PrEP works to reduce HIV incidence among key populations and Adolescent Girls and Young Women when implemented at a population level in “real life” routine service delivery</li><li>2. Develop and document an acceptable, affordable, and replicable approach to launch and scale-up the use of oral PrEP</li><li>3. Ensure political, donor, and community support for the scale-up of oral PrEP</li></ol>

	<p>The approach in this project is focused on creating demand rather than mobilizing clients for service provision. The narrative will change from supply driven to demand driven.</p> <ul style="list-style-type: none"><li>-Getting PrEP into The consumers' (AGYW) hands so that they can prevent themselves from HIV infection</li><li>-Promote a responsible choice on their health and place a high on their lifestyle and social life</li><li>-Ensure accessibility and availability of PrEP package commodities.</li></ul>

Indicators collected	Tools developed
frequency of drug resistance selection in a cohort of individuals who seroconvert on PrEP	<ul style="list-style-type: none"><li>o Laboratory SOPs on specimen collection and resistance testing</li><li>o HIV acute seroconversion checklist</li><li>o Training materials for clinicians</li><li>o Informational materials for clinic staff and PrEP clients</li><li>o Clinic flow diagram and job aids that outline specimen collection and shipment for resistance testing</li></ul>
	Situational analysis, readiness assessment

<p>i. proportion of HIV-1 infected persons whose partners are tested for HIV-1 before/after PrEP as a bridge to ART is implemented,</p> <p>ii. PrEP initiation and adherence by HIV-1 uninfected partners until their HIV-1 infected partners initiate ART and sustain use for six months,</p> <p>iii. ART initiation and adherence by HIV-1 infected individuals,</p> <p>iv. couples achieving optimized antiretroviral-based prevention coverage (i.e., high adherence to at least one antiretroviral intervention), and</p> <p>v. HIV-1 uninfected partners staying HIV-1 uninfected</p>	<p>IEC materials, training materials, clinic encounter forms</p>
<p>No. tested for HIV, No. screened for PrEP eligibility, risk failures, consent, enrolled, LTFU, discontinued, serious adverse effects</p>	<p>Training materials, clinical forms, IEC materials, SOPs</p>

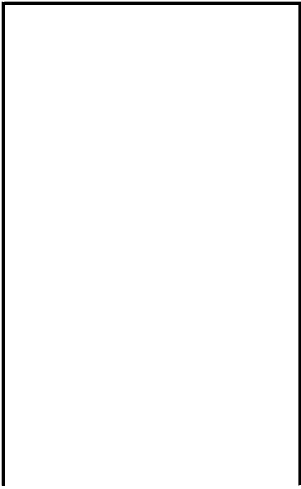
<p>In addition to national indicators, collect Client level data which include baseline information, initiation and follow up</p> <p>Program level data</p>	
	<p>behavioural ACASI, medical evaluation and laboratory forms</p>
	<p>Risk assessment tools, Clinic flow chart diagrams, SOPs for offering PrEP/job aids, Clinic encounter forms, Follow up forms, Protocols for stopping PrEP, Adherence monitoring SOP, Laboratory monitoring SOPs, M and E tools- data collection tools, summary forms, reporting forms, FAQs, Patient education tools, Training curriculum/slides for service providers, Training curriculum/slides for patients/communities, CSO/community engagement tools, Communication strategy, Community refill tools, Community mobilization tools</p>

<p>Number of AGYWs reached with PrEP promotional messages</p> <p>Number of target AGYW enrolled on PrEP</p> <p>% of AGYWs retained on PrEP medication through risk period/annually</p> <p>% adherence to PrEP medication among users</p> <p>Number of PrEP medication users testing for HIV and given test result quarterly</p> <p>Number of new HIV infections among PrEP medication users</p> <p>Number of Outreaches conducted</p> <p>Number of PE Trainings Conducted</p> <p>Number of AGYW reached with PE training</p> <p>Number of AGYW reached in Support Group meetings</p>	<p>P.E calendars and Organisation data base</p> <p>Facility and community PrEP registers</p> <p>Databases</p> <p>Program monitoring tools</p> <p>HTS register,</p> <p>Training reports</p> <p>Attendance list</p> <p>Attendance register</p> <p>Reports</p>
<p>1a. Use/application of new knowledge base in evidence-based advocacy and policy engagement</p> <p>1b. Number and type of policy makers, decision makers and service providers engaged in dialogue with LEARN ambassadors</p> <p>1c. New evidence generated and/or synthesized and published through the project</p> <p>2a. Number and range of positive engagements by LEARN ambassadors with existing and new civil society allies, including non-traditional allies</p> <p>2b. Number of AGYW in each country trained and supported with leadership skills (disaggregated by age, HIV status, impacted population)</p> <p>3b. Number of AGYW demonstrating increased levels of knowledge about PrEP, HIV prevention and SRHR</p> <p>3c. Number of AGYW engaging in community fora / safe spaces (digital or physical)</p>	<p>M and E tools- data collection tools, summary forms, reporting forms</p> <p>CSO/community engagement tools</p> <p>Community mobilization tools</p>

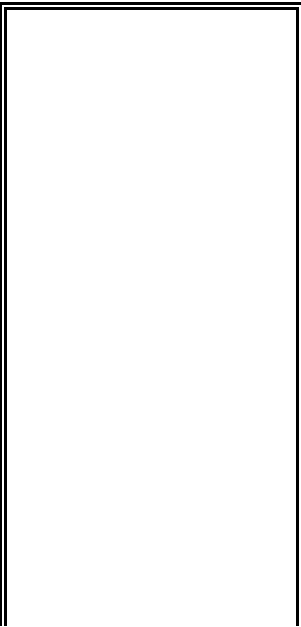


Approximate funding level for Kenya
\$1,000,000

\$1,500,000



**\$600,000**




Project Name (Include brief description if applicable)	Sponsor/Funder	Location: County <i>(Please select all that apply from the drop down menu)</i>
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Copy the content from PrEP summary

USAID	Baringo
BMGF	Bomet
PEPFAR	Bungoma
NIMH	Busia
NIH	Elgyo-Marakwet
CDC	Embu
DFID	Garissa
UCSF	Homa Bay
USAID/PEPRAF (DREAMS Innovat	Isiolo
	Kajiado
	Kakamega
	Kericho
	Kiambu
	Kilifi
	Kirinyaga
	Kisii
	Kisumu
	Kitui
	Kwale
	Laikipia
	Lamu
	Machakos
	Makueni
	Mandera
	Marsabit
	Meru
	Migori
	Mombasa
	Murang'a
	Nairobi
	Nakuru
	Nandi
	Narok
	Nyamira
	Nyandarua
	Nyeri
	Samburu
	Siaya
	Taita Taveta
	Tana River
	Tharaka-Nithi
	Trans-Nzoia
	Turkana
	Uasin Gishu
	Vihiga
	Wajir
	West Pokot
	All counties where PrEP is im
	National

Location: Area (If known) (Please select one answer from the drop down menu)	Location Intervention Delivery point: (For demonstration projects only) Please select all that apply from the drop down menu)	List of facilities implementing	Lead Org(s): (Please select all that apply from the drop down menu)		
We will populate the options once we have the specific areas the projects are being implemented	Private Pharmacies		Please clear the options here we will populate once filled		
	Private FP Clinics				
	Private Hospitals				
	Private Testing Centres				
	Private General Health Clinics				
	Private Schools				
	Public Pharmacies				
	Public FP Clinics				
	Public Hospitals				
	Public Testing Centres				
	Public General Health Clinics				
	Public Schools				
	NGOs/Model sites				
	Drop in centres				
	Youth friendly centres				
	Public STI Clinic				
	Private STI Clinic				
	Community				
	N/A				

plemented

Contact Person within Lead Org(s)	Implementing Partner(s)	Programme Type: <i>(Please select all that apply from the drop down menu)</i>	Status <i>(Please select one answer from the drop down menu)</i>
Disable multiple choices so that we can fill in the contacts directly	We can populate this once we have the information. Kindly disable multiple choices	Advocacy Communications/ Market Research Demonstration Project (trial) Health Systems Strengthening Impact Evaluations Implementation Science Research M&E support Modelling Observational Cohort Study Open Label Program Delivery /Scale Up Policy Guideline Support Program Support Resistance Data Surveillance Other	Proposed Ongoing Completed

Status details: <i>(Please enter start month and year, end month and year, results published date)</i>	Target Population <i>(Please select all that apply from the drop down menu)</i>	Target Age categorization: <i>(Please specify exact age ranges)</i>	Target # of PrEP enrollees
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No options just actual project dates

FSW  
 Women 25+ years  
 Men 25+ years  
 Adolescent Girls (<24)  
 Adolescent Boys (<24)  
 MSM  
 Pregnant Women  
 Transgender Women  
 Transgender Men  
 Serodiscordant couples  
 All seroconverters on PrEP  
 Other

To be populated once we have the information

No multiple choices



If there is a Cost Effectiveness/cost analysis component, what is the objective <i>(If applicable)</i>	If Behavioural Data is being recorded, what data is being collected? <i>(if applicable)</i>	If your work is in HSS, what data are you collecting?
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If your work is a demonstration project, what are your primary objectives?	If your work is in Research, what are your primary objectives/aims?	If your work is in Modelling, what are your primary objectives/aims?	Total funding level for programme
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Proposed  
Planned  
Ongoing  
Completed

Approximate funding level for Kenya

FSW  
Women 25+ years  
Men 25+ years  
Adolescent Girls (<24)  
Adolescent Boys (<24)  
MSM  
Pregnant Women  
Transgender Women  
Transgender Men  
Serodiscordant couples  
Other

