Addressing HIV among Adolescent Girls and Young Women



African Health Professional Regional Collaborative: Learning Session

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Presenter: Dr. Mary Mwangi Division of Global HIV & TB (DGHT) CDC Kenya

CDC Disclaimer: The findings and conclusions in this presentation are those of the author and do not necessarily represent the official position of the U.S. Centers for Disease Control and Prevention.



UNAIDS 2016: Ending AIDS by 2030 Key Global Milestones by 2020

> Reduce new HIV infections to fewer than 500,000

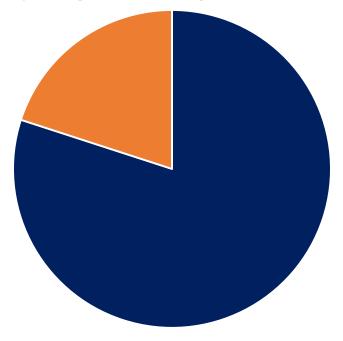
Reduce AIDS related deaths to fewer than 500,000

Eliminate HIV-related stigma and discrimination by 2020

UNAIDS 2016: New HIV Infections among Adults 2010-2015

Where	2010	2015	
Global	2.2m	2.1m	
Eastern & Southern Africa	1.1m	960,000	

20% of new infections occur among adolescent girls and young women ages 15-24



AGYW account for **70%** of new HIV infections in sub-Saharan Africa



Factors that increase HIV risk among AGYW









The DREAMS Partnership



WORKING TOGETHER FOR AN AIDS-FREE FUTURE FOR GIRLS



GATES foundation

Nike Foundation

- Launched on WAD 2014, \$210 million partnership between PEPFAR, the Bill & Melinda Gates Foundation, and the Nike Foundation to reduce new HIV infections in adolescent girls and young women in up to 10 countries.
- DREAMS aims to ensure that girls have an opportunity to live <u>D</u>etermined, <u>R</u>esilient, <u>E</u>mpowered, <u>A</u>IDS-free, <u>M</u>entored and <u>S</u>afe lives.
- Provide a country determined core package of evidence-based interventions that have successfully addressed HIV risk behaviors, HIV transmission, and gender-based violence



Achieving epidemic control with the current global budget will require delivering the

Right Things Right Places **Right Way Right Now**



Determined Resilient Empowered **AIDS-free** Mentored Safe

DREAMS Eligible Countries: Kenya Lesotho Malawi Mozambique South Africa Swaziland Tanzania Uganda Zambia Zimbabwe



Primary Goal: 40% Reduction in New HIV Infections among AGYW (15-24) by 2017



Secondary Goal: Preventing and Responding to Violence

#Justice for Liz

In 2013, a 16 year old girl was brutally gang raped by six men. They dumped her down a pit latrine where she was rescued by villagers. The attack was reported in a nearby police station and the police recorded it as "assault." The police asked the perpetrators to slash grass in the compound and later released them from custody.

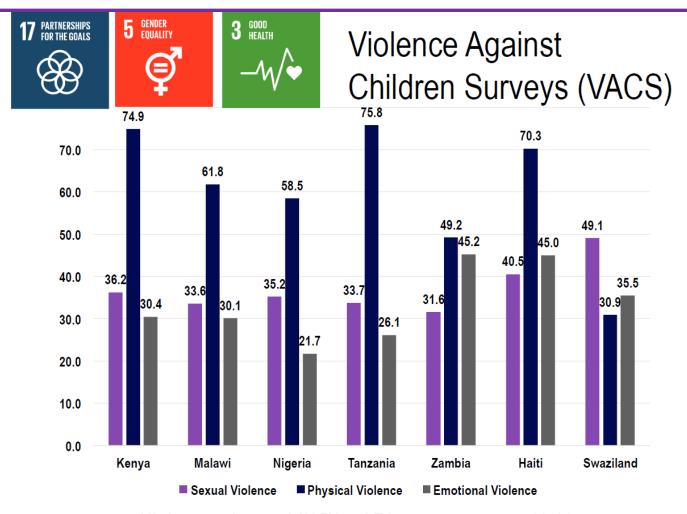
A day later, Liz and her mum sought help from a dispensary. They were given antibiotics and painkillers. They went to a medical clinic when she could not walk and the clinic recommended physiotherapy. They later visited a large hospital where she was diagnosed with a slipped disc and fistula- rendering her incontinent and confined to a wheel chair. A rights worker and local daily begun a "Justice for Liz" campaign with more than 1.8m signatures collected to compel authorities to act.

Three perpetrators were charged with "causing grievous bodily harm" and jailed for 15 years. Liz and her family received threats from the community and were relocated and put on the witness protection program. Liz received treatment and counselling and resumed school.



Photo courtesy of COVAW

Lifetime Experience of Violence

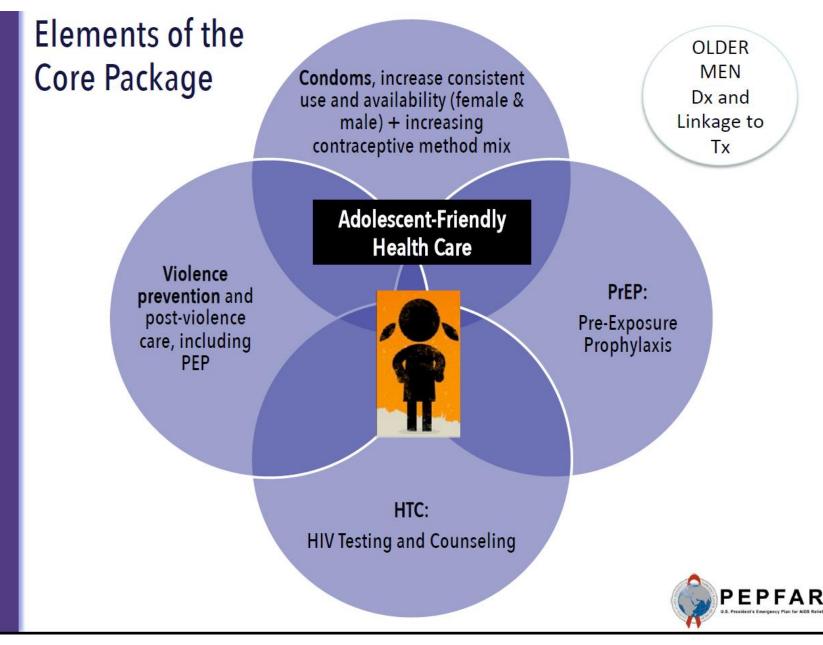


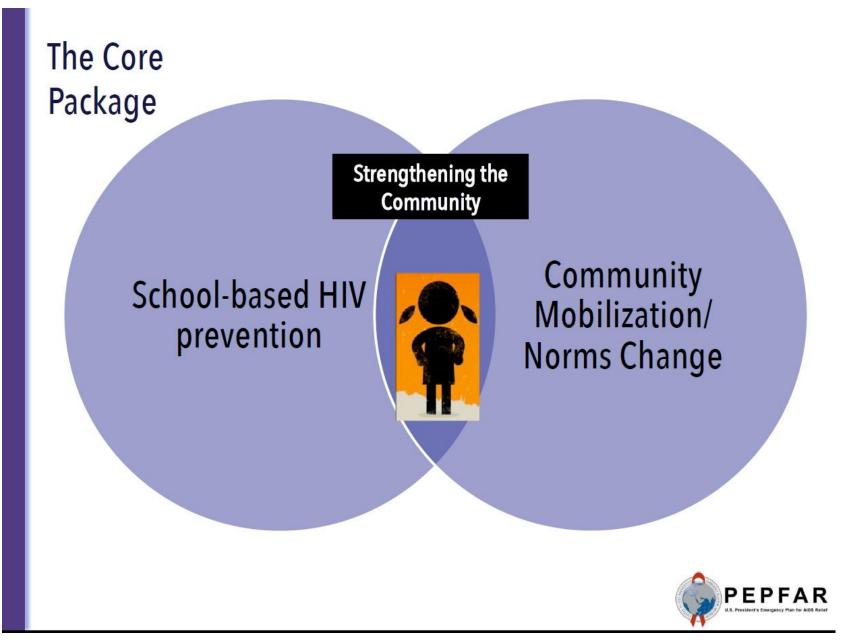
Lifetime experiences of SV, PV, and EV, among 13-24 year old girls

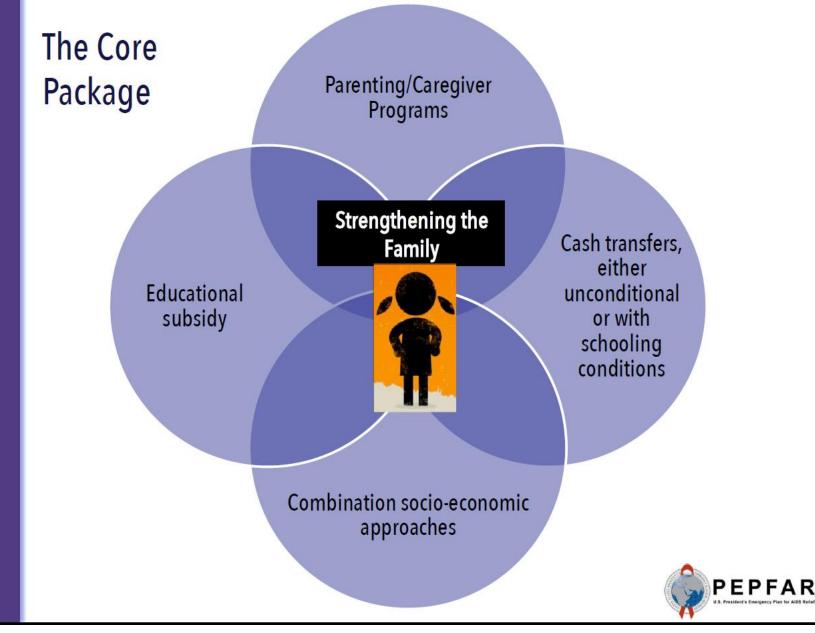
What is New in DREAMS?

- Geographic and population prioritization
- Going beyond health to address education and economic needs
- Evidence based, age appropriate
- AGYW friendly and focused
- Focus on male sex partners
- Public-Private-CSO partnerships









The Core Package

Mapping of sexual networks to target antiretroviral therapy (ART) to male sexual partners who infect young women

Decreasing Risk in Sex Partners



Mapping of sexual networks to target voluntary medical male circumcision (VMMC) to male sexual partners who infect young women



Program Challenges

- Capacity building for comprehensive services
- Selection of most vulnerable girls
- Combined socio-economic approaches
- Policies and guidelines that limit condom and contraception education and access
- Low uptake of PrEP
- Reaching older men with VMMC
- Low and late reporting of sexual violence



Promising Results: CHANGE 2016 Report

CHANGE interviewed stakeholders in Kenya and South Africa in July 2016

- Robust CSO engagement
- Enhanced communication between PEPFAR and CSO on -Identification of highly vulnerable girls
 Discussions around female condoms
 - -Adaptation of PrEP guidelines
- AGYW felt empowered and better informed to make decisions about sexual and reproductive health
- Holistic approach to address multifaceted driver of HIV

Areas for Improvement

- Better coordination and consultation between PEPFAR and CSO
- Rollout has been slow
- Slow development of monitoring and evaluation framework
- Capacity building in new areas such as social asset building
- Inclusion of girls who
 - -Engage in sex work
 - -Are LGBTQI (lesbian, bisexual, transgender, queer, and/or intersex) -Are living with HIV

Source: Center for Health and Gender Equity. The U.S. Partnership: Breaking the barriers to HIV Prevention for Adolescent Girls and Young Women. A field report on sexual and reproductive health and rights in the U.S. Dreams Partnership in South Africa and Kenya.

Priorities for Nurse Leaders



Priority #1: Condoms & Contraception Method Mix

Priorities

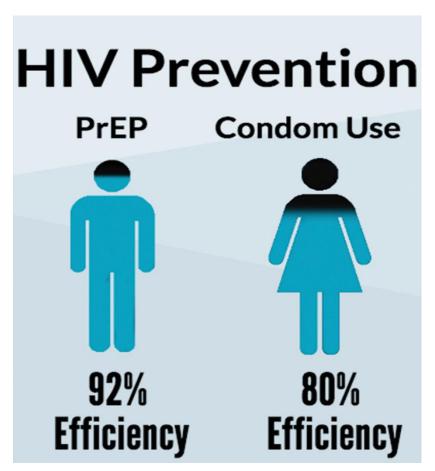
- Demand creation through IEC
- Adolescent friendly counselling and services
- Provision of contraception
- Increase access to Long acting methods

Challenges:

- HCW attitudes/perceptions
- Cultural and social norms around condoms and contraception
- Lack of commodities esp. female condoms
- Policy and guidelines
- Reliance on emergency contraception



Priority #2: PrEP



Source: American Centers for Disease Control and Prevention, 2014 (Infographic: Mitchell Tierney) • Priorities

- HCW capacity building
- Demand creation in clinical settings
- Adherence counselling
- Adolescent friendly services

- Challenges
- Low awareness and misconceptions
- Low adherence among young women
- Partner consent

Priority # 3: Voluntary Male Medical Circumcision

Priorities

- Reaching men 25 years+
- Promoting infant circumcision
- Engaging women as champions

Challenges

 Reaching older men with VMMC



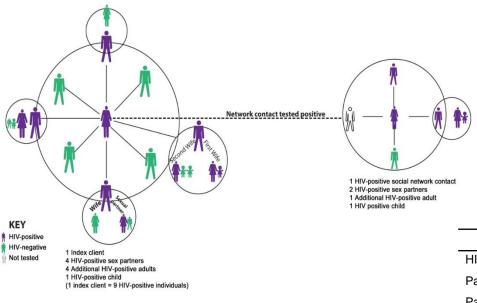
Priority #4: HTS among AGYW and Male Sex Partners

- HTS is an entry point to care and treatment
- Prioritization of AGYW in HIV Testing and counselling services
- Linkage of HIV positive AGYW to
 - -Care and Treatment
 - PMTCT
 - -VMMC and PrEP for discordant couples
 - Partner testing and notification

Assisted Partner Notification Services

Case Example: A community-based partner notification strategy in Kenya

The diagram below illustrates an example of assisted partner notification of a 26 year old woman who engaged in transactional sex.



Partner notification results

	Male	Female	Children	Total
HIV-positive clients	74	131	0	205
Partners/family identified	194	150	236	580
Partners/family tested for HIV	113	92	126	331
Partners/family HIV+	48	56 (61%)	12	116
	(42%)		(10%)	(35%)

Source: LVCT Health, Kenya

Priority # 5: ART (Test and Start)

Priorities

- Identifying and starting AGYW and MSP on ART
- Partner and family testing for index clients
- Adherence support to achieve viral suppression
- Child and adolescent friendly services and support groups
- Preventing MTC transmission in ANC/PMTCT settings

Challenges

- Identifying HIV positive men
- Achieving adherence and viral suppression among adolescents

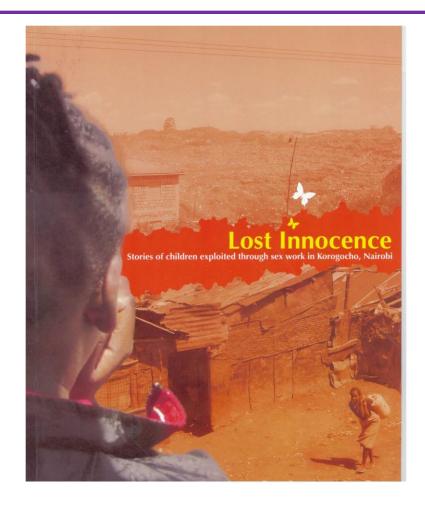
Priority #6: Comprehensive Post-GBV Services

Priorities

- IEC on GBV and services
- Capacity building of HCW
- Comprehensive services: HTS, PEP and adherence, EC, STI, counselling, evidence collection & documentation
- Linkage to non clinical services-law enforcement, legal/paralegal support, safe houses, support groups, economic empowerment

Challenges

- Limited comprehensive and survivor friendly services
- Low and delayed reporting of sexual violence
- Adherence to PEP
- Implementation of sexual offence laws



Priority #7: Linking AGYW to Community Services



Source: Hope Worldwide Kenya DREAMS Program

Priorities

- Establish relationships with providers
- Referral directories
- Effective linkage to services

Examples

- Economic empowerment
- Social protection/OVC programs
- DREAMS
- Support groups (GBV, PLHIV)
- Education/training/mentorship support
- Law enforcement/legal support (GBV)

Acknowledgement

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- Girl Effect
- Viiv Health Care
- Gilead
- Johnson & Johnson
- Population Council
- DREAMS Beneficiaries and Communities
- DREAMS Implementing partners

*Slides: Amb. Debbie Birx Presentations

Thank You!

