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Former U.S. Ambassador Robert F. Godec looks at Esther Kendi's fashion and accessory designs. Esther Kendi (seated at sewing machine) was a beneficiary of fashion and design vocational training through the HWWK DREAMS Project and now runs her own fashion business.

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## **ACRONYMS**

**AEP** Adolescent Empowerment Program

**ANC** Antenatal Clinic

**ART** Antiretroviral Therapy

**CASCO** County AIDS and STI Coordinator

**CCC** Comprehensive Care Center

**CDC** Centers for Disease Control and Prevention

**CHMT** County Health Management Team

**CHV** Community Health Volunteer

**CSC** Community Score Card

**DICE** Drop-in Center

**GBV** Gender Based Violence

**HCBF** Healthy Choices for a Better Future

**HEI** HIV Exposed Infant

**HIV** Human Immunodeficiency Virus

**HTS** HIV Testing Services

**HWWK** HOPE worldwide Kenya

**KENPHIA** Kenya Population Based HIV Impact Assessment Survey

**KP** Key Populations

**MHMC** My Health My Choice

**NHIF** National Hospital Insurance Fund

**NSSF** National Social Security Fund

**OGAC** Office of the United States Global AIDS Coordinator

**PAC** Program Advisory Committee

**PEP** Post-Exposure Prophylaxis

**PEPFAR** U.S. President's Emergency Plan for AIDS Relief

**PHDP** Positive Health, Dignity and Prevention

**PLHIV** People Living with HIV

**PMTCT** Prevention of Mother-to-Child Transmission

**PrEP** Pre-Exposure Prophylaxis

**QIT** Quality Improvement Team

**SAA** Social Analysis and Action

**SASA** Start, Awareness, Support and Action

**SCASCO** Sub County AIDs and STI Coordinator

**SGBV** Sexual Gender Based Violence

**VL** Viral Load

**VSLA** Voluntary Savings and Loans Association

**VMMC** Voluntary Medical Male Circumcision

## VISION, MISSION, VALUES



Ta'adhmeeka Beamon, DREAMS Gender Focal Person from the Office of the United States Global AIDS Coordinator (OGAC) and Dr. Tamu Daniel, US President's Emergency Plan for AIDS Relief (PEPFAR) Country Coordinator for Kenya (both squatting at the front) pose for a photograph with the HWWK Team and other guests including Obbili Kenyatta - Public Health Specialist, CDC Kenya and Rose Mokaya - OVC Technical Lead after an interactive forum on the implementation of the DREAMS Project at the Tassia DREAMS Site.

### Vision

#### **Empowered Healthy Communities**

#### Mission

HOPE worldwide Kenya (HWWK) is a local faith based non-governmental organization that exists to work with youth and children to improve their quality of life through responsive and innovative health programming among underserved communities in Kenya.

## **Core Competencies**

- 1. Community mobilization
- 2. Community participation and engagement
- 3. Community systems strengthening
- 4. Community based service delivery
- 5. Partnership building

#### **Values**

- Rights-Based programming
- Accountability and transparency in all our actions to ensure credibility
- Openness to feedback, ideas and learning to ensure we are creative and innovative
- Quality, excellence and the continuous improvement of services to deliver high impact and cost effective support for our stakeholders
- Service to the poor and underserved to bring hope and change lives
- Stakeholder participation for community based solutions

## 2018 Overview from the Executive Director



n 2018, HOPE worldwide Kenya (HWWK) embarked on a journey of growing in excellence. We endeavored not only to do the right things, but to also do them right. Anchored in our core values of accountability, transparency and delivering high impact, cost effective services to poor and under served communities, we realigned our systems and ways of working to ensure greater impact.

HWWK brought on board a Program Director and an HIV Prevention Technical Advisor for Clinical Services. This resulted in an improved program design and more effective ways of working as well as enhanced program monitoring and reporting.

In a bid to use technological advancement to improve our work, we launched an Enterprise Resource Planning System in early 2018 and the system is currently fully operational. The monitoring and evaluation team also developed a Key Population Information System (KIS). This is a web based data management and reporting system that will improve data management and make reporting more efficient in all HWWK Key Population Sites. These advancements enabled HWWK to work in a more efficient and transparent way as we implemented our projects in 2018.

HWWK hosted various United States Government visitors in our Determined, Resilient, Empowered, AIDS free, Mentored and Safe (DREAMS) Project sites in Nairobi during the year. The site visits mostly took the form of interactive forums whereby beneficiaries from

In a bid to use technological advancement to improve our work, we launched an Enterprise Resource Planning System in early 2018 and the system is currently fully operational.

the DREAMS Project shared their life stories, and how the project has been instrumental in reducing their vulnerability to HIV, improving their resilience against poverty, strengthening their families, and empowering them through education.

HWWK has continued to deliver services to Orphaned and Vulnerable Children (OVC) and to youth. Our goal has been to ensure adoption of best practices learned from past and present OVC programming, and from current government and PEPFAR guidelines.

We are grateful to all our partners who have in various ways contributed to the success of our projects and programs throughout 2018. HWWK looks forward to a productive 2019 as we look towards embracing innovations and new ideas.

We continue to build strong collaborations with different stakeholders to ensure that we deliver services that reach and serve the most vulnerable populations in efficient ways. HWWK together with other partners will continue to lobby for strengthening of county government mechanisms to coordinate OVC services, and also services to the youth and key populations we serve.

We are grateful to all our partners who have in various ways contributed to the success of our projects and programs throughout 2018. HWWK looks forward to a productive 2019 as we look towards embracing innovations and new ideas to make our services to the communities we serve more effective and impactful.

Warmest Regards,

Malinda K. Wheeler

Executive Director HOPE worldwide Kenya

## A Word from the Board Chairman



he year 2018 has been one of strategic investment in capacity building, quality improvement and strengthening systems to ensure HWWK achieves more impact in its work. As a Board, we commend HWWK staff for their hearts of service and commitment to offering quality services to the communities we serve. We also commend HWWK management for their visionary leadership and commitment to ensure HWWK operates within their core values of transparency, accountability and service to the poor and underserved in order to bring hope and change lives.

During the year, HWWK worked closely with and received support from county governments through their provision of medical supplies, support supervision, and also shared and received feedback and support through various county technical working groups and committees. We remain committed to work with county governments and other partners in the journey towards an AIDS free Kenya.

Following the roll-out of revised 2018 guidelines on the use of Anti-Retroviral drugs for treating and preventing HIV

in Kenya by the National AIDS and STI Control Program (NASCOP), HWWK has continued to train its staff on the new guidelines and is monitoring the implementation and cascading of prevention and treatment of HIV to our beneficiaries. Further emphasis has been made to employ Partner Notification Services to scale up discovery of new HIV infections and provide linkage to care. HWWK remains committed to playing its part in moving Kenya towards achieving 90-90-90<sup>1</sup> global targets for HIV prevention and treatment.

HWWK also continued to embrace the community approach as one of the best models of service provision. Community ownership and support is key in achieving optimal implementation success and we are grateful to all our community stakeholders who have continued to support our work.

We are deeply thankful to all our donors, sponsors and partners for their continued support. We hope that you will continue to partner with us as we strive to create 'Empowered Healthy Communities'.

Warm Regards,



**George Irungu**Board Chairman
HOPE worldwide Kenya

<sup>&</sup>lt;sup>1</sup> By 2020, 90% of all people living with HIV will know their HIV status, 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy, and 90% of all people receiving antiretroviral therapy will have viral suppression.

## **Brief History of HOPE worldwide Kenya**

HOPE worldwide Kenya (HWWK) was registered in 1999, although prior to this, a team of Christians from the Nairobi Christian Church, a member of the International Churches of Christ. would reach out to and serve the needy through benevolent activities. These voluntary activities attracted more people to participate and before long the vision translated to an established institution that would carry out the activities in a legal, coordinated and professional manner. Initially HWWK received financial assistance from Rotarians for Fighting AIDS and Rotary Club of Nairobi East to help vulnerable children in Mukuru with provision of basic education and supplemental nutrition. The Rotary Club of Nairobi East supported HWWK to build a Hall in Mukuru Kwa Ruben to serve the

HWWK programs were officially launched on 23rd February 2003 in Mukuru Informal Settlement by the then U.S. Ambassador Mr. Johnny Carson. Thus began our work with HIV prevention. HWWK has grown and provides support to thousands of vulnerable youth, orphans and vulnerable children (OVC). women, key and priority populations in different parts of the country. These beneficiaries have been reached through various programs including HIV prevention, care and support/ treatment, education subsidies, healthcare, nutrition, psychosocial support, shelter, vocational training, entrepreneurship

training, support to access micro-finance, initiation of businesses, and linkage to the current job market. HWWK has also complimented the Ministry of Health through mobilization of blood donors so as to meet the deficit of blood in the Blood Banks in hospitals in Kenya.

The work of HWWK has been made possible through resources mobilized from various donors and agencies including the U.S. Government, the Global Fund, the Canadian government, The Coca-Cola Africa Foundation, Swedish International Development Agency, Shell Oil Products Africa, the Walmart Foundation, trusts, other charities, and individual donors.

HWWK has also worked in close collaboration with other stakeholders that include the government of Kenya, development partners, other NGOs. community based organizations, faithbased organizations, corporations, trusts, and selected learning institutions. HWWK is a member of several national technical working groups, and is a member of the Health NGO's Network (HENNET) and joined its board in 2016. HWWK is also Deputy Chair of the Volunteer Involving Organization (VIO) Society. Despite being a local NGO, HWWK continues to maintain close collaborative ties with HOPE worldwide members in other countries especially in Africa and in the U.S.

## Where we Work-2018 Projects Summary

Project	Description	Funder	Locations
NURU II - KP	This project seeks to increase access to sustainable, high quality, comprehensive health and structural interventions among key and priority populations in Nairobi, Central and Eastern Regions of Kenya under PEPFAR with the ultimate		Uasin Gishu, Embu, Kirinyaga, Nyeri, Meru, Tharaka Nithi, Makueni, Muranga
	goal of HIV prevention.		Transport Corridor in Uasin Gishu, Nakuru, Machakos, Makueni, Kajiado and Mombasa through partnership with North Star Alliance.
Nuru II - DREAMS	This project supports the scale-up of combination HIV/AIDS prevention services for Adolescent Girls and Young Women (AGYW) living in the informal settlements of Nairobi.	The United States Department of Health and Human Services - Centers for Disease Control and Prevention (CDC)	Mukuru, Tassia, Kiambiu, Viwandani, Eastleigh South, Nairobi South, Mathare
Road Towards HIV Free Society Project- Global Fund	This project implements combination HIV prevention services targeting key and priority populations.	Global Fund Grant through Kenya Red Cross Society	Kajiado, Nakuru, Machakos
CASE-OVC Project	This program implements interventions aimed at increasing access to health, social services, improved livelihoods, caregiving, protection, and fostering transformational change by ensuring that systems and structures for child welfare are responsive, inclusive and accountable.	USAID through Christian Aid	Makueni

Project	Description	Funder	Locations
Nilinde Project	This project helps promote family focused support to OVC through implementing sustainable activities. It addresses household economic vulnerability by empowering caregivers to make investments that improve the health and well-being of OVC, facilitating access to essential services, and strengthening community-level OVC monitoring and support systems.	USAID through Plan International	Kayole, Dandora, Ruai, Tassia
Bridge To Empower Girls In Nairobi (BEGIN) Project	This project provides teenage girls who are pregnant and/or nursing children between the ages 0-3 years living in Mukuru Slum of Nairobi with knowledge and skills using a three-pronged approach that incorporates scientific, social and economic interventions. The main goal is to promote their children's brain and overall development.	Grand Challenges Canada	Mukuru Tassia
Bold Idea for Girls (BIG) Project	This project seeks to improve HIV protective behavior among out of school adolescent girls and young women aged 15-24 years and reduce barriers to accessing health, social and economic outcomes.	Grand Challenges Canada	Mukuru Dandora Kayole
Kenya Kids	This project offers education support to OVC and sanitary towels to AGYW in Nairobi. The project also gives support to caregivers to start income generating activities thus promoting economic stability of vulnerable families.	Individual sponsors through an initiative by the Triangle Church of Christ in the U.S.	Kibera Kawangware

Project	Description	Funder	Locations
Adolescent Empowerment Project (AEP)	This project works with school going and out of school male and female adolescents by providing Sexual Reproductive Health (SRH) services, economic strengthening, providing access to Information Communication and Technology (ICT), and promoting education uptake among 10-19 year olds.	CARE International in Kenya	Mukuru
JamQuest	This project supports OVC in secondary schools with school fees and school uniforms.	JamQuest	Mukuru
Regional Psychosocial Support Initiative (REPSSI)	Continued partnership with REPSSI offers beneficiaries open and distance learning to enhance psychosocial support and quality care to children.	Regional Psychosocial Support Initiative (REPSSI)	Mukuru

## 2018 Achievements at A Glance

- 116,092 KP were tested for HIV and taken through HIV risk reduction counseling. 1,471 KP tested HIV positive. Out of these, 1,329 (90%) were linked to care.
- Partner Notification Services (PNS) contributed to **14%** of all newly identified HIV+ clients in the year.
- A total of **8,618** AGYW were tested for HIV with **38** testing HIV positive.
   Of these **35** (**92%**) were linked to care and treatment.
- 3,995 AGYW received education support in the form of school fees, uniforms, scholastic materials and sanitary pads.
- 27,601 OVC were served in 2018.
   Services included health services, nutrition services, protection and legal services, economic empowerment of OVC caregivers, psychosocial support and education support.

- VSLAs are savings and loans groups where caregivers take part in table banking. In 2018, 4,737 caregivers caring for 8,486 OVC were members of Voluntary Savings and Loans Associations. Cumulatively, the 253 VSLA groups mobilized savings worth KES 6,868,124.
- 80 active KP Behavior Change Groups participated in savings and loans activities. Savings among the groups had grown to approximately KES 1,500,000 by September 2018.
- 1,247 packets of uni-mix were distributed among 589 adolescent mothers. Uni-mix is a nutritious porridge taken to prevent malnutrition.
- An ICT hub was launched and established at the Mukuru Center of HOPE. It has a total of 20 mini- laptops to serve 25 in-school adolescents and 75 out-of-school adolescents through the Adolescent Empowerment Program.

## **Health and HIV Services**



Muranga Acting County AIDS and Sexually Transmitted Disease Coordinator (CASCO)- David Kinyanjui (front) attended the roll-out of HWWK training of clinical staff on new Kenya ART Guidelines that was held in October 2018. He reiterated the importance of implementation of the updated guidelines to ensure clients benefited from quality services.

### **Key and Priority Populations**

#### **NURU II PROJECT**

HWWK implemented the second year of NURU II, an HIV prevention project in Nairobi, Eastern and Central regions of Kenya. Additional coverage includes Uasin Gishu County in the North Rift and truck stops along the Northern Transport Corridor where services are provided through a sub-grant with North-Star Alliance. The Project is funded by Centers for Disease Control and Prevention (CDC).

The Key Populations (KP) Program is tailored to reach Female Sex Workers (FSW), Men who have Sex with Men (MSM) and People Who Inject Drugs (PWID); and Priority Populations (PP) including Long Distance Truck Drivers (LDTD) and clients of sex workers. Interventions under this project were

implemented from 17 KP Friendly Centers in 12 counties including Makueni, Kitui, Machakos, Meru, Embu, Nakuru, Uasin Gishu, Tharaka Nithi, Kirinyaga, Kajiado, Muranga and Mombasa counties.

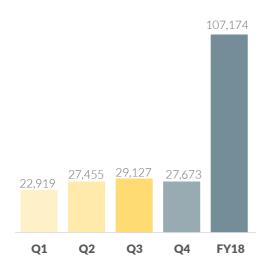
During the last quarter of the year under review, the HIV prevention work for KPs in Machakos and Kitui counties was transitioned to the *Center for Health Solutions* (CHS) with guidance from CDC Kenya. This process was successfully completed in September 2018 with minimal interruption to service provision to the beneficiaries.

A total of 38,076 KPs (35,335 FSW, 3,274 MSM, and 367 PWID) were reached with a combination of essential HIV prevention and treatment services in the year. This was against a target of 33,539 KPs.

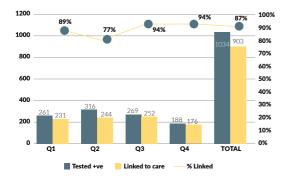
#### HIV testing and linkage to treatment

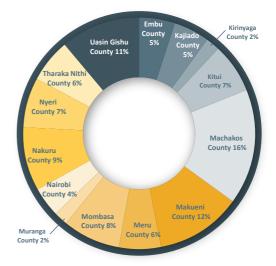
In 2018, 107,174 KPs were tested for HIV and taken through HIV risk reduction counseling. HTS services were provided during adjusted hours to encourage uptake of services by men and other clients who would otherwise not uptake the services during regular hours.

#### **KPS TESTED FOR HIV IN 2018**



The yield of HIV positive clients was 1,034 (99%) against an annual target of 1,038. Out of those who tested positive, 903 (87%) were linked to care.

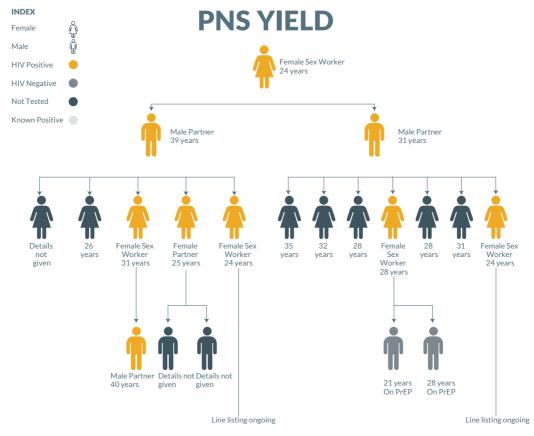




Machakos had the highest HIV positive yield at 16% among KPs.

#### Scale-up of partner notification services

To optimize the first universal goal of identifying 90% of all individuals living with HIV, Partner Notification Services (PNS) were scaled up and monitored closely. HTS providers and clinicians were trained in the implementation of PNS while other staff and peer educators were sensitized. PNS contributed to 14% of all newly identified HIV+ clients in the year. Scale up of this intervention will continue in 2019 to inform more targeted testing and optimize resource utilization. Negative partners of index clients are offered Pre-Exposure Prophylaxis (PrFP).



Mwingi Drop in-Center Partner Notification Services Tree

# Summary of Key Achievements for Nuru II Key Population Program

- 107,174 KPs were tested for HIV and taken through HIV risk reduction counseling. Out of these 1,034 tested HIV positive and 903 (87%) were linked to care
- Partner Notification Services (PNS)
   contributed to 14% of all newly identified
   HIV+ clients in the year.
- 38,076 KP were contacted and reached with health education. New topics introduced in 2018 included: Test and Start, Post Exposure Prophylaxis (PEP), Pre Exposure Prophylaxis (PrEP) and violence response.
- 38,076 KP were reached with Respect-K an evidence based Intervention integrated into KP clinical visits that is used for risk assessment and risk reduction counseling.
- HWWK completed training of clinical staff on the new Kenya ART guidelines and started the transitioning of eligible clients to Dolutegravir (DTG).
- HWWK developed and launched KIS (Key Population Information System) to improve data management and reporting.
- One new DICE was set up in Maua in Meru County and the Muranga DICE was relocated to the County-managed Kenneth Matiba Hospital in Kenol Town.

### Beneficiary's Testimonial

"My life has changed for the better as I have been able to make healthy decisions that have made life beyond sex work more promising each day. My main objective in life is to provide my daughter with the most valuable things I missed out on when I was growing up. If HOPE worldwide Kenya had not come to my rescue, I am not sure where my life would be". – Beneficiary from Nuru II Key Populations Program.

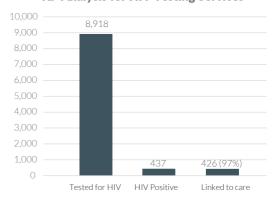
# Road Towards HIV Free Society Project

HWWK implemented the *Road Towards* HIV Free Society Project which aims to reduce new HIV infections by 75% and reduce AIDS related mortality by 25% by 2019. The project was implemented in Nakuru, Kajiado and Machakos counties and is funded by Global Fund through Kenya Red Cross Society.

The Project reached 12,525 KPs (1,754 MSM, 10,771 FSW) with a combination of essential HIV prevention and treatment services.

8,918 KPs were tested for HIV and taken through HIV risk reduction counseling. Out of these 437 tested HIV positive and 426 (97%) were linked to care.

#### **KP Analysis for HIV Testing Services**



# Summary of Health and HIV Key Achievements for Road to HIV Free Society

- 8,918 KP were tested for HIV and taken through HIV risk reduction counseling. Out of these 437 tested HIV positive and 426 (97%) were linked to care.
- 12,525 KP were screened for Sexually Transmitted Infections (STIs)

- 8,045 KP were screened for alcohol and substance abuse
- 10,771 KP were screened for tuberculosis with none testing positive.

## **Adolescents and Young Women (AGYW)**



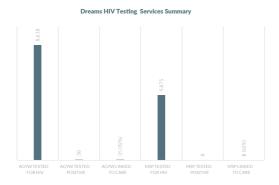
Financial Capability training helps AGYW to break the cycle of poverty through saving and effective money management.

## **DREAMS Project**

Determined, Resilient, Empowered, AIDS-free, Mentored and Safe (DREAMS) is an initiative targeting AGYW between 10 and 24 years with HIV prevention and treatment services. The specific DREAMS interventions are classified into four main categories including: interventions that empower AGYW; mobilization of communities to support AGYW through community level interventions; strengthening the socio-economic status of families of AGYW; and decreasing the risk of HIV transmission from the male sexual partners of AGYW. The DREAMS initiative is a component of the Nuru II Project implemented in informal settlements of Nairobi, namely Kiambiu, Mukuru, Tassia, Viwandani, Eastleigh South, Nairobi South, Hospital Ward in Mathare and Utalii Ward in Mathare.

A total of 8,618 AGYW were tested for HIV with 38 testing HIV positive. Of these 35 (92%) were successfully linked to care and treatment. A total of 171 Male Sexual Partner (MSP) outreaches were conducted where 4,875 MSP were tested for HIV. Out of these 5 were linked to Voluntary Male Medical Circumcision (VMMC), and 8 tested HIV positive. Out of those who tested positive, 5 (62%) were linked to care and treatment. Clients not linked are followed up and given counseling until they are ready to be linked to care.

AGYW who had experienced Gender-based Violence (GBV) were identified using enrollment data and at Safe Spaces through sensitizations and engagement with mentors. Counselors engaged in the project provided counseling services and made referrals for more specialized



services where necessary. In the reporting period 1,012 AGYW reported having experienced violence. Of these, 960 reported physical violence while 52 had experienced sexual violence. All the 52 who had experienced sexual violence

## Characterization of AGYW Male Sexual Partners (MSP)



received at least one service while the 960 who had experienced physical violence received psychosocial support counseling and trauma counselling.

# Summary of Key HIV Prevention and Treatment Achievements for Nuru II DREAMS Program

- 8,618 AGYW were tested for HIV and taken through HIV risk reduction counseling. Out of these 38 tested HIV positive and 35 (92%) were linked to care.
- 3,995 AGYW received education support in the form of school fees, uniforms, scholastic materials and sanitary pads. AGYW who had a disability or were heading families received 100% payment of school fees and school supplies
- 5,840 AGYW were reached with RESPECT-K

   an evidence based intervention integrated
   into KP clinical visits that is used for risk
   assessment and risk reduction counseling.
- 1,186 caregivers completed Families Matters
  Program and I, 466 caregivers completed
  Families Matters Program II. This Program
  aids in improving parent-adolescent
  communication, especially on sexuality.

- 929 AGYW continued to receive Cash Transfers throughout the year.
- 86,581 community members were reached with SASA messages which aim to facilitate community mobilization and norms change. Out of these, 5,989 were AGYW.
- 1,031 AGYW and their 576 male peers completed their required 5 sessions of My Health My Choice. There was 100% retention of girls reached with this intervention
- 1,301 adolescent girls and 962 adolescent boys completed 7 sessions of Healthy Choices for a Better Future (HCBF) - a school based HIV and violence prevention intervention. The number of AGYW reached was 81% of the annual target of 1,615 AGYW. All girls enrolled for this intervention completed the sessions recording 100% retention.

## **Bold Idea for Girls (BIG) Project**

HWWK implemented the final year of the Bold Idea for Girls Project that was funded by Grand Challenges Canada. This was the transition to scale phase which was implemented through matching funds from other partners and donor agencies within HOPE worldwide Kenya. The broad objective of the Project was to contribute to the reduction of incidences

of HIV and other Sexually Transmitted Infections (STIs), and prevent teenage pregnancies among girls and young women in urban informal settlements by integrating science/technology (evidence based intervention and mobile health messaging), social interventions (through sister walks/ social asset building groups) and business innovation (vocational skills & entrepreneurship training). A social enterprise in fashion and design was set up to provide employment to project participants undertaking fashion and design training as well as an income stream to sustain the Project. These interventions would increase the beneficiaries' access to health

information and services, improve their life-skills, and increase their employability through provision of vocational and entrepreneurial skills.

The Project reached 503 Adolescent Girls and Young Women (AGYW) aged 15-24 years living in Mukuru and Dandora Slums in Nairobi. Outcomes expected from the Project included increased knowledge of HIV prevention, increased uptake of health services, enhanced self-esteem, assertiveness, decision making of girls; and increased employability of girls and income. The BIG End Project Evaluation findings are summarized below:

# Summary of Key Findings from Bold Idea for Girls End of Project Evaluation

- Knowledge on HIV prevention increased from 49.4% at baseline to 88.6% at midline to 98.3% at end line evaluation.
- Beneficiaries' uptake of voluntary testing and partner testing was higher for the intervention group (67%) compared to the comparison group (25%).
- At end-term, girls in the BIG Project were almost 5 times (4.712 (2.214-10.048), p=0.0001) more likely to have the correct attitude about HIV as they were at baseline level
- At end-term, 92% of the sexually active girls in the BIG Project always practiced safe sex compared to 27% of the girls not in the program, (O.R 11.038, 95% C.I 8.074-14.002 and P<0001).</li>
- The girls who earn more than KES, 5000/- (USD 62.5) per month increased from 1% at baseline to 10% at midterm to 34% at end term. The girls in the BIG Project were almost 20 times (or 21.568 (95% CI 16.300-26.836); P<0001) more likely to have an income compared to the girls not in the project.

- The BIG Project was approved for national scale-up as an evidence based intervention by the National AIDS and STI Control Program (NASCOP) with a 74% score.
- HWWK participated in the 8th
   International Convention on Peer
   Education, Sexuality, and HIV in Nairobi
   Kenya held on 14th June 2018. An
   abstract was presented titled 'Impact of the Integrated & Innovative Bold Idea for Girls (BIG) Project in Sustaining Protective Behaviors among Slum-dwelling Adolescent Girls and Young Women in Kenya'.
- Project outcomes were presented as part of experiential learning at the 'Unlocking the Power of Adolescents Through Innovation Track' at the Grand Challenges Annual Meeting held in Berlin Germany 1st - 4th Oct 2018.
- The BIG Project manuscript was published in the African Journal of Health Sciences in September 2018: "Sustenance of HIV/ STI Protective Behaviors by Slum-dwelling Adolescent Girls and Young Women is associated with their Income Status".

## **Beneficiary's Testimonial**

"In 2017, I was working in a local hotel. I used to earn a meagre KES 200 per day and was the sole bread winner for my household. With one child who was in school, it was difficult to make ends meet. I used to walk to and from work to save money as I needed every shilling to meet my family's basic needs. My dream, however, was to be self-employed. I gradually saved up KES 500 and started a green grocery stall outside my home. I just had a few vegetables to start with, but I was willing to press on. I later heard about and enrolled in the BIG Project because I was interested in getting training to be more effective in running my business. I received entrepreneurship training and received a start-up kit worth

KES 6,000 to boost my business. The kit comprised of items that added to my stock including cooking oil, kerosene, corn flour and sugar. I learned a lot from the entrepreneurship training that I received from HOPE worldwide Kenya. My lessons in customer care, making business plans, and money management have helped me sustainably run my business. I am now able to pay school fees and meet the basic needs of my family. I earn a profit of KES 4,000 per month from my business. I also have access to HIV counseling and testing services which is important as well. My hope is to expand my business in the future so that we can be financially secure as a family." Janes, BIG Project beneficiary.



Janes (left) sells an orange to a customer at her green grocer shop outside her home.

# Strengthening Community Health and Related Structures

#### **Community Dialogue Forums**

To improve community participation and communication between the project and the beneficiary sub-populations, the Nuru II Key Population Project introduced dialogue forums using a structured guide. During these forums, members of HWWK target populations were invited to share their ideas on how services can be improved, express any grievances and identify gaps. Input was collected and used to guide decision making. Project opportunities and limitations were also communicated at these forums.

#### **Community Safe Spaces for AGYW**

A space was considered safe if it provided physical safety; an environment for AGYW to have emotional safety; and whether it was easily accessible to the AGYW. In 2018, a total of 14,720 AGYW met in 217 Safe Spaces provided by schools, churches, mosques, program sites, community halls, vocational training centers, and Chiefs' camps. Partnership with communities to provide Safe Spaces has strengthened the commitment of community members to support vulnerable AGYW.

#### **HIV and Gender Based Violence (GBV)**

Gender Based Violence (GBV) against KPs increases vulnerability and makes them more susceptible to HIV infection. HWWK sought to increase awareness of GBV, improve reporting, and strengthen response mechanisms. KP staff and Peer Educators engaged by HWWK have been taken through intensive training on how to identify and respond to GBV.

Peer educators have been encouraged to educate peers on GBV and improve reporting so that cases can be addressed. While reporting has increased compared to previous years, much more needs to be done to ensure all cases are reported in a timely manner.

During the year, a total of 944 clients reported having experienced physical violence with 108 of these reporting sexual violence.

There is need to continue regular sensitizations and/or training of law enforcement agencies on responsible law enforcement in order to help KPs to feel supported when reporting cases of violence or when incidences of human rights violation happen. The majority of the victims don't want to take cases to police for lack of support.

#### Social Analysis and Action (SAA)

HWWK through its Adolescent Empowerment Program (AEP) held 5 Social Analysis and Action (SAA) sessions with parents and their adolescent children on topics related to gender based violence, school drop-out and gender roles. The aim of SAA is to challenge gender norms that hinder adolescents' development as well as facilitate community led decision action to solving community issues.

Reflection sessions with parents on early pregnancy were held. Parents also discussed domestic violence as it was mentioned as a social issue that contributes to adolescents dropping out of school.

## **Partnership Building**



Muranga County Executive Committee member for the Department of Health - Mr. Joseph Mbai (second from left) officially opening the HWWK Muranga Drop-in Centre (DICE). Together with County Director for Health - Dr. Winnie Kanyi, he welcomed HWWK as a key partner in serving key and priority populations in Muranga and pledged continued support to ensure key populations in the county are reached with essential HIV prevention and treatment services. The DICE was launched on 9th October 2018.

#### **DREAMS Ambassadors**

 In partnership with the Nairobi County Government, 30 DREAMS ambassadors were trained by the county as Peer Educators and allocated to government health facilities to support the roll out of adolescent friendly services.

# Capacity building of County Health Care Workers (HCWs)

 In partnership with the CASCOs, health care workers were selected from KP referral facilities to train on the provision of KP friendly services. 78 health care workers from various health care facilities benefited from this training.

# Support for County level KP Technical Working Groups (TWGs)

 HWWK has taken the lead in the formation of KP TWGs in all counties of coverage. The process involves sensitization of County Health Management Teams (CHMTs) on KP programming, developing the Terms of Reference for the TWGs at county level, and providing the resources required to facilitate this forum.

#### **Support for County KP size estimation**

 To adequately program for key populations, each county must have a clear understanding of the KP subpopulations estimates. The Program, under the leadership of NASCOP and supervision of CASCOs participated in the preliminary size estimation and validation exercise in the counties where HWWK works.

#### **Support for County events**

 HWWK was actively involved in the planning, preparation and funding of the World AIDS Day on December 1st 2018. Support included provision of HTS services, support for hiring tents and chairs and provision of refreshments for participants. We also participated in the KENPHIA launches organized across the counties.

#### **Increased integration efforts**

 In Tharaka Nithi County, project peer educators are now recognized as community health workers and will be integrated into the community health structures at the end of the project. In partnership with Muranga County, the KP DICE was moved to a county health facility to improve sustainability. Efforts are in place to relocate other stand-alone DICEs in Uasin Gishu and Makindu to county health facilities.

#### **Provision of commodities**

County and Sub County Health
 Management Teams provided
 supervision during various project
 activities and supply of commodities
 such as family planning kits, HTS
 testing kits and condoms.

## **Improved Livelihoods**

#### **Alternative Livelihoods Activities**

To reduce dependency on sex work and develop better health seeking behaviors, sex workers were supported to identify and pursue alternative sources of livelihoods to improve income and reduce vulnerability. Activities undertaken to promote alternative livelihoods included: table banking, linkage to vocational skills training and linkage to financial institutions for training and access to business start-up loans. Most Behavior Change Groups were also involved in savings and loans activities which allowed sex workers to save small amounts of money and borrow when the money was most needed. Out of the 80 active Behavior Change Groups supported by the project. 4 benefitted from loans from Women's Enterprise Fund that provides interest-free loans for women to start and run businesses. Savings among the groups had grown to approximately KES 1,500,000 by September 2018. Groups are supported through training to have strong structures of leadership and

promote wealth generation among their members.

# Combination Social Economic Approaches (CSEA)

HWWK used multiple complementary CSEA in the year through the DREAMS Project. They included training AGYW in financial literacy and entrepreneurship, supporting AGYW to develop business plans, providing business start-up kits, training in vocational skills, and linking AGYW to internships and job opportunities. In total, 1,375 unique AGYW were supported against a target of 1,883, representing 73% achievement. In addition, the BIG Project supported the project participants to register their Sister Walks as self-help groups. They received training on how to access government loans under the Kenva Youth Enterprise Development Fund (KYEDF) and 2 groups were successfully registered -Seven Stars Ladies Group and the Galaxy Ladies Group with a membership of 8 each.

A summary of CSEA services is seen in the table below:

Types of Combination Social Economic Approaches support	10 -14 years	15-17 years	18 -24 year	Total
Financial Capability	2,956	1,777	3,216	7,949
Entrepreneurship	102	2,005	1,872	3,979
Business start- up kit	0	1	298	299
Vocational training	4	57	859	920
Linked to employment	0	2	124	126
Linked to internship	0	0	44	44



Table banking is a key strategy in growing caregiver's savings

#### **Voluntary Savings and Loans Associations (VSLA)**

VSLAs are savings and loans groups where caregivers take part in table banking. In 2018, 2,922 caregivers caring for 6,858 OVC were members of Voluntary Savings and Loans Associations in the Nilinde Project. Cumulatively, the 189 VSLA groups mobilized savings worth KES 5,762,279 and closed the year with an outstanding loan balance of KES 2,897,557. Through mentorship and trainings provided at group level on entrepreneurship and financial management, 80% of the groups were

legally registered with the government. This resulted in formal and stable ways of saving with financial institutions for the groups.

In the CASE-OVC Project there was a total of 64 VSLAs comprising of 1,628 caregivers caring for 2,834 OVC. The VSLAs mobilized a total of KES 1,105,845 in savings. Loans taken by caregivers were used to meet various needs including food security, education, and start up/boosting of income generating activities.

## **Success Story**



Members of Moyo Safi Self-Help Group showcase their source of income during a follow-up visit by Mr. Kamau, Value Chain Development Community Based Trainer (far right)

## Moyo Safi Self-Help Group

Moyo Safi Self-Help Group is one of the Voluntary Savings and Loans Association (VSLA) groups of HOPE *worldwide* Kenya, Nilinde Program. It consists of 30 caregivers from Ruai site.

Initially the members had different individual income generating activities including: selling ground nuts, liquid soap, green groceries, indigenous chickens and fruits. They lived from hand to mouth, unable to afford basic necessities. They could not afford to provide three meals a day for their families or school fees for their children which led to their poor school attendance.

"Life changed for the better after we received empowerment trainings on VSLA and financial literacy, raising rabbits as productive assets, and mentorship on key principles of value chain development. We are soon registering our self-help group into a Community Based Organisation (CBO) to seek larger opportunities," Mary Mweru Wambugu, one of the caregivers attested.

Moyo Safi Self-Help Group is one of the 17 groups who have received training on value addition and on principles of value chain development and have benefited from synchronized production and joint marketing. They have a total of 29 rabbits and their market prices are as follows: a pregnant rabbit sells for KES 2,500; an adult rabbit sells at KES 1,500; and a kitten (baby rabbit) sells for KES 800.

The group has grown their savings and are planning to purchase a modern rabbit urine collection system so as to expand their business. Rabbit urine is used as a pesticide.

Moyo Safi Self-Help Group is very grateful to Nilinde for the empowerment and mentorship they have received which has changed their lives for the better.

## **Children's Services**



HES Officer Linda Ochieng (front,3rd from left) receives a trophy on behalf of HWWK for being the best Service Delivery Partner in the implementing of the Economic Strengthening interventions of Nilinde Project during a 2018 Economic Strengthening Committee Peer Review Meeting.

## Nilinde Project

The Nilinde Project addresses household economic vulnerability by empowering caregivers to make investments that improve the health and well-being of OVC, facilitating access to essential services, and strengthening community-level OVC monitoring and support systems. HWWK is implementing the Nilinde Project in Embakasi, Njiru and Kasarani sub counties in Nairobi County and is funded by USAID through Plan International. In 2018, HWWK OVC targets increased from 10,909 to

22,457 following a restructure of the implementation of the Project.

A total of 22,232 Orphans and Vulnerable Children received services including school fees support, nutrition support and health services through the Nilinde Project.

1,941 OVC participated and benefited from hand washing and hygiene sensitization while marking the global hand washing day at Gitwamba Primary School in Ruai courtesy of Dettol soap. Gitwamba Primary School has over 500 OVC who are served in Nilinde Program.

## Summary of Key Achievements for the Nilinde Project in 2018

- 19,406 OVC know their status. Out of these, 614 children living with HIV were enrolled in the project - 100% are linked to care.
- 18,964 OVC received psychosocial support.
- 9,517 OVC participated in child Safe Spaces activities.
- 8,000 aqua tabs (water purification chlorine tablets) were distributed to 608 households reaching 1,605 OVC. The exercise targeted areas with high risk of water borne diseases.
- 2,922 caregivers caring for 6,858 OVC were members of Voluntary Savings and Loans Associations (VSLAs). Cumulatively, the 189 VSLA groups mobilized savings worth KES 5,762,279.

- 702 OVC received one year's supply of sanitary towels.
- 1,021 OVC received school fees support
- 479 OVC were provided with unimix- a nutritious porridge taken to alleviate malnutrition
- 438 OVC households were linked and supported to access National Health Insurance Fund (NHIF) services.
- 201 OVC received school uniforms.

#### **CASE-OVC Project**

The Comprehensive Assistance, Support and Empowerment of Orphans and Vulnerable Children (CASE-OVC) Project is funded by USAID through Christian Aid. The Project implements activities in 4 sub-counties in Makueni County, namely Makueni, Kibwezi West, Kibwezi East, and Kilome.

The main project goal is to ensure that children affected by HIV/AIDS are resilient and thriving within their households and communities. In 2018, the project supported 5,369 OVC with

various services through the CASE-OVC Project

To implement the OVC work, HWWK has continued to collaborate with government agencies. Through the office of the Children's Department, the Project has organized forums geared at advocating for child rights and championing issues affecting OVC and their welfare. Caregivers have also benefited from cash transfers, bursaries, nutrition education, linkage to treatment and agricultural education from these collaborations.

# Summary of Key Achievements for the CASE OVC Project in 2018

- 5.369 OVC served.
- 5,259 OVC reached with health and nutrition services.
- 3,191 OVC reached with child protection and legal support.
- 5,365 OVC reached with psychosocial support.
- 1,628 caregivers were trained on preventing child abuse and neglect; and or reporting and management of defilement cases
- There are a total of 64 VSLAs comprising of 1,628 caregivers caring for 2,834 OVC.
   The VSLAs saved KES 1,105,845 in the year 2018
- 354 HIV positive OVC are enrolled in the project. 100% are linked to care.

#### Adolescent Empowerment Program (AEP)

HWWK is implementing a 5 year project (2015-2020) funded by the Patsy Collins Trust Fund Initiative (PCTFI) through Care International in Kenya. This project's aim is that by 2020, adolescents from Mukuru Slums who are currently denied their rights are empowered to fully exploit their potential, take advantage of opportunities, and fulfill their aspirations.

In October 2018, HWWK launched an ICT hub at the Mukuru Center of

HOPE in Mukuru Informal Settlement in Nairobi. The ICT hub has been providing a platform and space for information, training and mentorship of 24 adolescents in various life skills, and provides a platform to impact 21st century skills. It will also integrate twinning, which is using technology hubs to link adolescents in Mukuru and Kajiado for online peer to peer learning. This will promote learning and networking between the in-school and out-of-school beneficiaries within the program.



A beneficiary of the Adolescent Empowerment Program navigates the touch screen of one of the program's mini-laptops. The Adolescent Empowerment Program launched an ICT Hub in October 2018 together with staff from HWWK, Mustek, and CARE International in Kenya at Mukuru Center of HOPE, Nairobi.

# Summary of Key Achievements for Adolescent Empowerment Project

- 101 adolescents trained in financial literacy, adolescent sexual and reproductive health and adolescents savings and loans associations.
- 32 adolescents received dignity kits which included sanitary towels and underwear donated through partnership with Ladies of Hope Women's Group.
- 33 teachers were trained on social analysis and action, financial literacy, adolescents savings and loans associations, and adolescent sexual reproductive health by

- CARE International in Kenya in partnership with HWWK.
- An ICT hub was launched and established at the Mukuru Center of HOPE. It has a total of 20 mini- laptops to serve 25 inschool adolescents and 75 out of school adolescents.

# Bridge to Empower Girls In Nairobi (BEGIN) Project

The BEGIN Project provides services to teenage girls aged 15-19 years who are pregnant and /or nursing children between the ages of 0-3 years living in Mukuru and Tassia Slums in Nairobi. The Project uses a three-pronged approach that incorporates scientific, social and business interventions. The main objective of the research project is to provide 500 teenage girls with

knowledge and skills to promote the optimum development of their children's brains and overall development. The project improves and assesses parental knowledge, attitudes, practices, and access to services; and child developmental milestones. The project is funded by Grand Challenges Canada, a 2 year grant implementing the proof of concept phase.

### Summary of Key Achievements for the BEGIN Project

- 589 girls were enrolled into the Project and received services.
- 1,247 packets of unimix were distributed among enrolled girls. Unimix is a nutritious porridge taken to prevent malnutrition.
- 353 workshops were held where beneficiaries discussed sexual reproductive health, social issues touching on adolescent mothers, gender based violence, and nutrition among other topics.
- 138 adolescent mothers received vocational training in hair and beauty, fashion and design, catering, mechanics and computer training.
- 50 households of teenage mothers received livelihood support through cash transfers.
   Cash transfers are given to the needlest families to help them meet basic needs
- 39 adolescent mothers received school fees subsidies

## **Child Sponsorship Projects**



JamQuest beneficiaries enjoy a game during an April 2018 mentorship event held at Mukuru kwa Ruben Center of HOPE.

## **JAMQUEST**

JamQuest is a child sponsorship project that provides high school education support to needy children in Kenya. Nick Shoff, JamQuest Executive Director, founded the project in 2008 while in junior high school in the U.S. as part of a school project.

In 2018, JamQuest supported 22 high school students with school fees support. There were 5 students who completed their high school education in the previous year-2017, and 4 qualified for 2018 university admission. JamQuest

sponsored their first year of school fees during their transition to university.

Other young people in the U.S. also support the project. One of the most impactful projects by the youth has been from heART to heART Arts Movement through which students in the U.S. hold art exhibitions to fund raise for school fees support for JamQuest beneficiaries. They also make personalized arts & crafts which they send to the students here in Kenya. HWWK remains grateful for the continued and heartfelt support from JamQuest sponsors.

### Summary of Key Achievements for JamQuest Project

- 22 students received school fees support in 2018.
- 5 students completed their high school education in 2017. Out of these, 4 qualified

for university and were all supported to join various public universities in 2018. One student is in his fourth year in university.

### Kenya Kids



Kenya Kids is an Orphans and Vulnerable Children (OVC) sponsorship project which was started in 2007 through an initiative of the Triangle Church of Christ. The Project serves children by supporting and strengthening their families. In 2018, Kenya Kids supported 59 children who received school fees, school shoes, and uniforms.

## Summary of Key Achievements for Kenya Kids Project

- 50 children received school uniforms.
- 55 children received school shoes.
- 41 children received school fees.
- NHIF was provided for 11 households supporting 39 Orphans and Vulnerable Children.
- 15 caregivers received training on Voluntary Savings and Loans Associations (VSLAs) so as to build their capacity on how to start table banking and grow their savings to secure their futures

## **Supporting Volunteerism**

### **HOPE Volunteer Corps**



Volunteers from the HOPE Volunteer Corps renovate an outdoor playground at a school in Embu.

The 2018 HOPE Volunteer Corps was held in Nairobi and Embu Counties. The team comprised of 14 international volunteers from the United States, 9 local volunteers, and staff from HWWK. The team served at Kenyatta National Hospital where they spent time playing with and encouraging children. They also donated care packs to the hospital to be distributed to the neediest children. The volunteers continued their service

at Modern Green School in Embu where they renovated an outdoor playground and spent time teaching the young children in the Early Childhood Development section.

HOPE worldwide Kenya is grateful to all the volunteers who gave their time and resources to serve in Kenya. Your love and service has changed lives-both at the hospital and at the school in Embu in a very special way.

### **Good Deeds Day**



Good Deeds Day is an international day set aside for doing and celebrating good deeds.

HWWK took part in the Good Deeds Day celebrations in Nairobi on 15th April 2018 and showcased how economic empowerment is reducing vulnerability of youth in informal settlements through funds received from the U.S. and Canadian governments.

HWWK staff also initiated Good Deeds Day projects. Staff from the Embu Dropin Center visited Toto Love Children's Home to mark the day. The home has 18 orphaned and vulnerable children aged between 4 to 16 years. As their way of giving back to society, the team donated food and also got a chance to play, cook, and eat with the children as they listened to their individual stories.



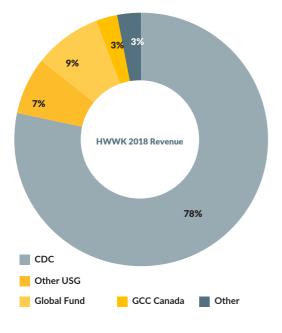
HWWK Staff wash children's hands in Toto Love Children's Home where they celebrated Good Deeds Day through cooking and sharing a meal with the children.

## **Financial Summaries**



Expenses	Amount In Kes
Personnel	188,439,006
Travel	21,561,954
Equipment	29,750,689
Supplies	18,000,363
Program Costs	230,489,296
Sub - Recipient	40,420,702
Total	528,662,010

### **Funders**



- Centres for Disease Control and Prevention (CDC)
- Global Fund through Kenya Red Cross
- Christian Aid
- Patsy Collins Trust Fund Initiative (PCTFI) through Care International in Kenya
- Nilinde through Plan International
- International Churches of Christ (ICOC) - Youth & Family
- Kenya Kids Fund
- JamQuest
- SLF Trust.
- Grand Challenges Canada







