

HOPE
worldwide
KENYA



**ANNUAL
REPORT**
2019

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Ms. Malinda Wheeler HWWK Executive Director receives the award for Best NGO Program on Human Rights Promotion during the Diversity and Inclusion Awards dinner. HWWK also won the African CSO Excellence Award in 2019 in the Operations category from Epic African CSO Excellence Awards

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ACRONYMS

| | |
|---------------|---|
| AEP | Adolescent Empowerment program |
| AGYW | Adolescent Girls and Young Women |
| ANC | Antenatal Clinic |
| ART | Antiretroviral Therapy |
| CASCO | County AIDS and STI Coordinator |
| CBO | Community Based Organization |
| CCC | Comprehensive Care Center |
| CDC | Centers for Disease Control and Prevention |
| CHMT | County Health Management Team |
| CHV | Community Health Volunteer |
| CRS | Catholic Relief Services |
| CSC | Community Score Card |
| CSEA | Combination Social Economic Approaches |
| DCO | District Children's Officer |
| DICE | Drop-In Center |
| DOC | Department of Children's Services |
| DREAMS | Determined, Resilient, Empowered, AIDS-free, Mentored and Safe |
| FSW | Female Sex Workers |
| GBV | Gender Based Violence |
| GOK | Government of Kenya |
| HCBF | Healthy Choices for a Better Future |
| HEI | HIV Exposed Infant |
| HENNET | Health NGOs Network |
| HES | Household Economic Strengthening |
| HIV | Human Immunodeficiency Virus |
| HTS | HIV Testing Services |
| HWWK | HOPE <i>worldwide</i> Kenya |
| IRDO | Impact Research & Development Organization |
| KELIN | Kenya Legal & Ethical Issues Network on HIV and AIDS |
| KEMSA | Kenya Medical Supplies Agency |
| KESWA | Kenya Sex Workers Alliance |
| KP | Key Populations |
| KPIF | Key Population Innovation Fund |
| LESDEP | Local Entrepreneurship Development & Education Project, East Africa, Ltd. |
| MHMC | My Health My Choice |
| MSM | Men who have Sex with Men |
| MSP | Male Sexual Partners |

| | |
|---------------|--|
| NASCOP | National AIDS and STI Control Program |
| NACC | National AIDS Control Council |
| NHIF | National Hospital Insurance Fund |
| NITA | National Industrial Training Authority |
| NSSF | National Social Security Fund |
| OGAC | Office of the United States Global AIDS Coordinator and Health Diplomacy |
| OVC | Orphans and Vulnerable Children |
| 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 |
| PNS | Partner Notification Services |
| PrEP | Pre-Exposure Prophylaxis |
| PWID | People who Inject Drugs |
| QIT | Quality Improvement Team |
| SAA | Social Analysis and Action |
| SAB | Social Asset Building |
| SACCO | Savings and Credit Cooperative Organization |
| SASA | Start, Awareness, Support and Action |
| SCASCO | Sub-County AIDs and STI Coordinator |
| SGBV | Sexual Gender Based Violence |
| SNS | Social Network Strategies |
| SRH | Sexual and Reproductive Health |
| TOT | Trainer of Trainers |
| TWG | Technical Working Group |
| VL | Viral Load |
| VIO | Volunteer Involving Organization Society |
| VSLA | Voluntary Savings and Loans Association |
| VMMC | Voluntary Medical Male Circumcision |

VISION, MISSION, VALUES AND CORE COMPETENCIES



Tharaka Nithi County signed a Memorandum of Understanding with HWWK on 4th June 2019 to ensure we reach Key & Priority Populations with HIV Essential Services

Vision

Empowered Healthy Communities

Mission

HWWK is a local faith-based, non governmental organization working with youth and children to improve their quality of life through responsive and innovative health programming among underserved communities in Kenya.

Core Competencies

- Community mobilization
- Community participation and engagement
- Community systems strengthening
- Community-based service delivery/ interventions
- 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

A Word from the Executive Director



It has been a year full of changes and transitions, and we thank God for the incredible work he has enabled us to do in 2019. Our donors and contributors have helped us to transform lives, build communities, and meet the physical needs of many needy Kenyans.

As Kenya continues its growth as a middle-income country, the expectations of local NGOs is increasing, and all of us are being called higher in our service to the country and the beneficiaries we serve. As we worked in partnership with the communities and stakeholders, we were all able to harness unique skills to improve effectiveness and sustainability.

Our work with adolescent girls and young women continued to transform their lives as they received integrated services, including support to complete their education. The older girls were trained in vocational and business skills to improve their capacity to be employed or start their own businesses. These efforts and interventions contributed to reducing their vulnerability to HIV infections.

HWWK transitioned one of its orphaned and vulnerable children projects in

Makueni County to a local community-based organization, after two years of implementation. They were supported to ensure a smooth transition as the baton was passed to them to continue providing quality service delivery to the children. HWWK continued to provide services to orphans and vulnerable children in Nairobi as the project transitioned from one donor to another.

Our project sites in Uasin Gishu, Kitui, Machakos, and Makueni counties that serve Key Populations were transitioned to the HIV treatment partner for those counties. HWWK entered into the county of Laikipia and scaled-up services in Nyeri, Meru, and Tharaka Nithi in partnership with county governments to ensure sustainability and collaboration in service delivery.

Volunteers contribute immensely to serving our communities. This year, 33 HOPE *worldwide* Volunteer Corps participants from around the world spent two weeks serving in Embu, helping to refurbish one of the local schools. 40 volunteers from HOPE *worldwide* Hong Kong visited Kenya for the first time and spent time with our girls from Mukuru informal settlement. They also generously donated two refurbished containers, which are being used to expand vocational skills training and grow the HWWK social enterprise.

Concerning growth and change, HOPE *worldwide* Kenya has been keeping in step. This year HOPE *worldwide* Kenya won the Diversity and Inclusion Award for Best NGO Program on Human Rights Promotion; and the 2019 EPIC African CSO Excellence Award in the area of Operations.

This would not have been possible without the support from our partners, including donors, government, communities, and

individuals for putting their faith in us and supporting our vision to realize ‘Empowered Healthy Communities’.

One of my personal highlights was becoming an executive coach through training at Strathmore University. This skill is being used to help staff continue unlocking their inner wisdom so they can solve their challenges with confidence and also have time to focus on their personal growth as they continue to go from strength to strength and rise to each new challenge.

We acknowledge and appreciate the support from our Board of Directors who consistently walk with us on this journey and provide guidance and direction. We are also excited to have four new Board members joining us in 2020 who will bring new insight and expertise.

In 2020 our focus will be to continue improving our services to the communities

we serve and for us to walk together in partnership with the communities and Kenyan government to continue building all our capacities on the road to self-reliance.

“...if you want to walk far, walk together”

Warmest Regards,



Malinda Wheeler
Executive Director, HWWK

A Word from the Board Chairman



The year 2019 presented opportunities for HOPE *worldwide* Kenya to embrace transitions due to the changes in the donor environment and development sector as a whole.

I want to applaud the staff and management of HWWK for continuously adapting to the constant changes and improving services to the vulnerable communities.

The year saw us transition key population services from 8 counties, including Muranga, Nyeri, Makueni, Uasin Gishu, Mombasa, Kajiado, Meru, and Nakuru to 3 counties, namely, Kirinyaga, Embu and Tharaka Nithi. We started work in Laikipia County and scaled-up the HIV prevention work in Nyeri, Meru, and Kitui counties under the Global Fund.

The Kenya National HIV survey shows progress towards control of the HIV epidemic, which has led to changes in programming strategies. Partnerships with county governments have been established to ensure sustainable services among the KP and priority populations. An upshot of these partnerships is that services are being provided within government health facilities. The US government, through PEPFAR, has increased its support to youth programs targeting adolescent girls and young women

who are vulnerable to HIV infections. HWWK remains committed to driving behavior change among this population and joining other development partners in fast-tracking the end of the AIDS epidemic by 2030 through achieving 95-95-95 global targets. The Organization faced staff downsizing due to the scaling down of HIV prevention services in several counties. Separation with staff is usually a bitter-sweet experience due to the family culture at HWWK.

Another key achievement in 2019 was the scale-up in the use of Electronic Medical Records (EMR) to improve the quality of services and reporting. The EMR in use includes improved quality care (for treatment and HIV testing services) and an internally developed web-based Key Population Information System (KIS).

The HWWK Board welcomed four (4) new members who bring diverse skills in law, education, corporate accounting, and research. We will continue to work and support the HWWK staff and management towards organizational stability and sustainability.

We are grateful for the continuous encouragement and support that we have received from our donors, the government through various ministries, volunteers, individual sponsors, and our community stakeholders.

We look forward to strengthening these partnerships in the coming years to bring lasting change in our communities.

Warm Regards,

A handwritten signature in black ink, appearing to read 'George Irungu'. The signature is stylized and includes a circular flourish at the end.

George Irungu
Board Chairman, HWWK

Brief History of HOPE *worldwide* Kenya

HOPE *worldwide* Kenya (HWWK) was registered in 1999. 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 HOPE *worldwide* in the US and from Rotarians for Fighting AIDS and Rotary Club of Nairobi East to help vulnerable children in Mukuru with the provision of basic education and nutrition support.

HWWK programs were officially launched in the Mukuru Informal Settlement in February 2003 by the then US Ambassador, Mr. Johnny Carson. Thus began our work with HIV prevention. HWWK has grown and provided support to thousands of vulnerable youth, orphans and vulnerable children (OVC), women, and 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 job market.

The work of HWWK has been made possible through resources mobilized from various donors and agencies including the US Government, the Global Fund, the Canadian government, The Coca-Cola

Africa Foundation, Swedish International Development Agency, CARE Kenya, 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, faith-based organizations, corporations, 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). We became a Board Member of HENNET in 2016, and are 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, the US, and Hong Kong.

Where We Work

2019 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 goal of HIV prevention. | The United States Department of Health and Human Services - Centers for Disease Control and Prevention (CDC) | Uasin Gishu Machakos Embu Kirinyaga Nyeri Meru Tharaka Nithi |
| 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) | Eastleigh South (Kiambu) Embakasi (Tassia) Hospital Land Mawe (Mukuru Kayaba) Mabatini Mathare North Nairobi South Reuben (Mukuru Kwa Reuben) Utalii Viwandani |
| The Road Towards an HIV free society - Global Fund New Funding Model | This project implements combination HIV prevention services targeting key and priority populations. | Global Fund Grant through Kenya Red Cross Society | Kajiado Nakuru |
| CASE-OVC Project | This project 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 |
|--|---|---|---|
| <p>Nilinde Project (closed out in March 2019)</p> <p>Now MWENDO as of October 2019</p> | <p>This project helped 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.</p> | <p>USAID through Plan International</p> <p>Now USAID through Catholic Relief Services (CRS)</p> | <p>Kayole Dandora Ruai Tassia</p> |
| <p>Bridge to Empower Girls in Nairobi (BEGIN) Project</p> | <p>This project provides teenage girls who are pregnant and/or nursing children between the ages of 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 the overall development of children's brains and general development.</p> <p>Closed out end of June 2019</p> | <p>Grand Challenges Canada</p> | <p>Mukuru</p> |
| <p>Kenya Kids</p> | <p>This project offers education support to OVC and vulnerable young people. The Project may also support caregivers to start income-generating activities, thus promoting the economic stability of vulnerable families.</p> | <p>Individual sponsors through an initiative by the Triangle Church of Christ in the US.</p> | <p>Kibera Kawangware</p> <p>Also, other areas are considered when OVC are identified.</p> |

| Project | Description | Funder | Locations |
|---|--|--|----------------------------|
| Adolescent Empowerment Project | 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. | Patsy Collins Trust Fund Initiative (PCTFI) through CARE Kenya We are now in year 5 moving towards closeout | Mukuru |
| JamQuest | This project supports OVC in secondary schools with school fees and school uniforms. | JamQuest | Mukuru |
| Kenya Youth Employment and Opportunities Project (KYEOP) | KYEOP aims at increasing employment and earning opportunities for youth between 18-29 years through various skills training and entrepreneurship support. | World Bank through National Industrial Training Authority (NITA) | Nairobi Kitui Nakuru |
| Kamilisha | KP Clinical Project | USAID through JHPIEGO | Meru County (Maua) |

2019 Achievements at A Glance

16 KPs Friendly Centers (Clinics) established in 11 counties including Embu, Kirinyaga, Makueni, Meru, Mombasa, Muranga, Nakuru, Nyeri, Tharaka Nithi, Uasin Gisu, and Kajiado.

44,472 KPs (40,638 FSW; 3,583 MSMs; 251 PWIDs) were reached with a minimum package of services in the year.

107,680 KPs were tested for HIV and received their results. Out of these, 1,138 tested HIV positive. 91% (1,032) were linked to care and treatment. **1,879 KPs** were in 'HWWK's Care and Treatment Program at Drop-in Centers. This included HIV positive KPs identified before 2018. 91% (856) of those eligible for viral load tests attained viral suppression.

4,075 KPs that experienced gender-based violence (GBV) in the form of sexual, physical, and emotional violence, including illegal arrest and discrimination, were provided with relevant support.

84 KP groups engaged in alternative livelihood activities.

Kes 9.6M raised by these KP groups through table banking and other IGAs (Merry go-Rounds, beekeeping, soap making, goat rearing, poultry farming, bead making, shampoo and detergent making, selling clothes, charcoal and greengrocers, among others) and used to respond to their economic needs.

Youth

14,571 Adolescent Girls and Young Women (AGYW) ages 10 to 24 are part of the DREAMS (Determined, Resilient, Aids Free, Mentored, and Safe) Project. They are receiving individualized packages of service to prevent them from acquiring HIV.

7,825 girls at-risk girls tested for HIV. 13 were HIV positive, and 11 successfully linked to care.

352 Social Asset Building Groups comprising of **13,822** AGYW aged 10 to 24 years.

Evidence- Based Interventions : Healthy Choices for a Better Future (HCBF): 1,448 adolescent girls and 704 boys (ages 10-14 years) completed the training sessions.

My Health, My Choice (MHMC): 2,074 adolescent girls and 1,473 male peers (13-17 years) completed the training sessions.

5,699 Adolescent boys and girls received training on evidenced-based interventions that included Healthy Choices for a Better Future and My Health My Choice that empowers them to make choices that reduce their risk of HIV and other

HCBF is used to reach AGYW aged 10 to 14 years and their male peers through trained facilitators from the community.

MHMC is used to reach AGYW aged 13 to 17 years and their male peers through a team of trained facilitators in out-of-school settings.

SASA is a community based intervention aimed at changing community norms that hinder young women and girls from achieving their highest potential and creating a more enabling environment. Facilitators are drawn from the communities where the girls live

FM I & II: This intervention targets parents and caregivers of 10-14 year olds, and 15- 19 year olds to improve parent-adolescent communication, especially on sexuality.

reproductive health-related infections

SASA: Facilitators reached **45,171** community members on changing community norms that hinder young women and girls from achieving their highest potential and creating a more enabling environment.

Families Matter I and II (FM I and FM II): **1,124** parents with adolescents 10 - 14 trained on parent-adolescent communication; **799** parents of adolescents 15-19 trained on the same.

1,923 Parents/caregivers of AGYW provided with training on how to improve parent/caregiver-adolescent communication with their 10-14 and 15-19 year olds respectively.

7,825 AGYW were tested for HIV and received their results. Of these girls, 13 were HIV+ and were linked to care and treatment.

5,224 Adolescent Girls and Young Women (AGYW) provided with education support that included school fees, school uniforms, stationery, and other learning materials.

1,120 AGYWs provided with vocational skills training

4,699 adolescents trained in financial

capability

4,847 adolescents trained on entrepreneurship skills

20 schools in Viwandani and Rueben Wards facilitated to do Social Analysis & Action (SAA) sessions

62 Social Analysis & Action sessions done with parents and community leaders in Reuben and Viwandani wards

1,262 adolescents trained in Economic Citizenship Empowerment and Sexual Reproductive Health

167 adolescents and young people 18–29 years (Kenya Youth Employment and Opportunities Project) received vocational skills training, and 86% (144) were placed in internships

3 out-of-school groups formed adolescents savings groups and 3 out-of-school groups are engaging in group IGAs

10 in-school groups saving in an Adolescent Savings Club; 10 in-school groups have group IGAs

Orphans and Vulnerable Children

20,593 OVC served; 932 of the children were HIV+, and 100% were linked to care

93 caregivers received positive parenting training

4,119 children 0 to 17 years obtained birth certificates

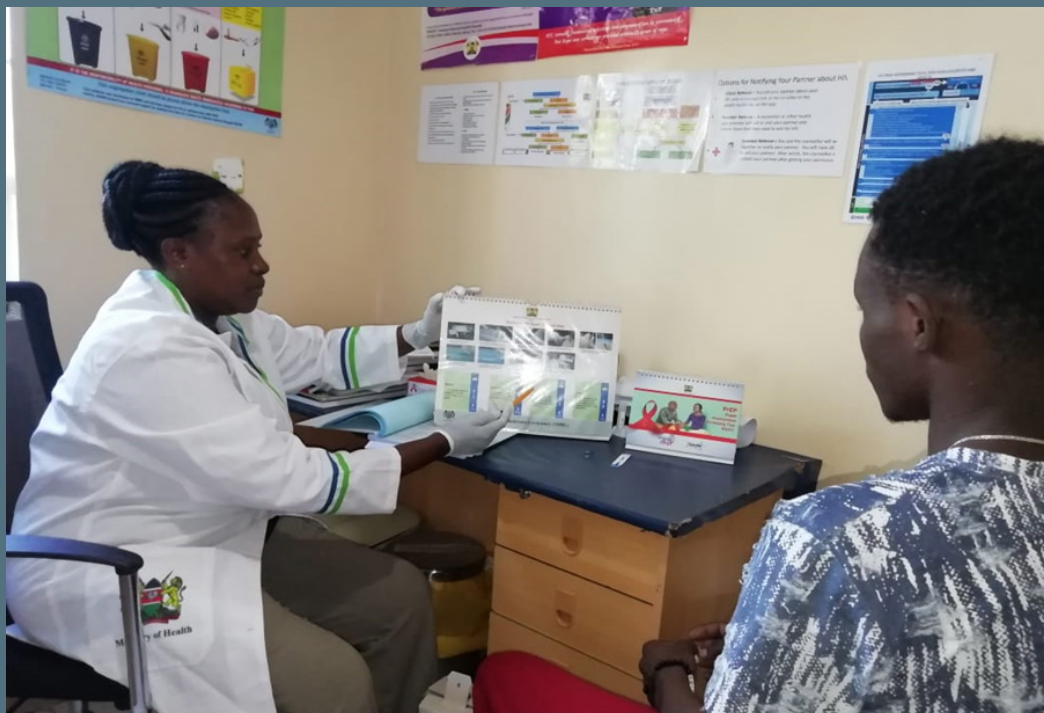
18,709 children received support through payment of school fees, levies, uniforms, and sanitary pads for the girls

208 Voluntary Savings and Loan Association (VSLA) groups comprising of 3,555 caregivers caring for 7,948 OVC. These groups had cash amounting to KES 7,335,103 with an accumulated loan fund of KES 2,882,642

268 households were linked to NHIF and/ or government cash transfers

24 older OVCs (11 girls, 13 boys) between 14 – 17 years received vocational training.

Health And HIV Services



HWWK provides friendly HIV clinical services within strategic Drop-in Centers and Wellness Centers

Key and Priority Populations

NURU II PROJECT

2019 marked 'HWWK's third year of implementing the NURU II Project - an HIV Prevention Project funded by the US President's Emergency Plan for AIDS Relief (PEPFAR) through the Centers for Disease Control and Prevention (CDC). The Project works with key populations and adolescent girls and young women (AGYW).

HWWK engaged with Key Populations in Eastern, Central, and Rift Valley Regions of Kenya and reached 30,315 Female Sex Workers (FSWs), Men Who have Sex with Men (MSMs), and People Who Inject Drugs (PWIDs). These populations were reached with essential HIV prevention and treatment services, and services were also provided to partners of sex workers.

Services were provided to key populations in 16 KP-friendly centers in 11 Counties. In

partnership with the county governments of Muranga, Tharaka Nithi, and Kirinyaga Counties, KP friendly satellite centers were set up at government health facilities where services could be provided.

The Project was awarded additional funding in its third year from the Key Population Innovation Fund (KPIF) through Impact Research and Development Organization (IRDO). The funds were utilized to address gaps and to roll out other case-finding approaches. These approaches included Social Network Strategies (SNS), supporting responses to Gender-Based Violence (GBV), and increasing outreach activities to ensure new hotspots not previously covered were reached. The HIV self-testing kits were rolled out in all counties in partnership with the County Health Laboratory Technicians through Kenya Medical Supplies Agency (KEMSA).

Through a strategic partnership with North Star Alliance, a sub-grantee of HWWK, services were also provided to Key Populations (KPs) along the Transport Corridor from Mombasa to Uasin Gishu and Kajiado Counties.

There was a transition to Dolutedegravir and Tenofovir Lamivudine Efavirenz (TLE), for clients accessing treatment at KP-friendly centers, and 97% of those eligible successfully transitioned. By the end of the year, 95% of HIV positive individuals were linked to care with a retention rate of 91% within the KP friendly centers.

HWWK transitioned KP work in Muranga, Nyeri, Makueni, Uasin Gichu, Mombasa,

Kajiado, Meru, and Nakuru to the lead clinical partners in the counties. This enabled the integration of HIV prevention services for KPs into the existing county health system to improve program sustainability.

HIV Testing and Linkage to Treatment

In 2019, 25,948 KPs were tested for HIV and taken through HIV risk-reduction counseling. In addition, 15,288 truck drivers and other partners of key populations were also tested and received their results. Of those tested, 227 were identified as HIV-positive, which translated to 1.5% of those tested. Positivity was higher among newly enrolled KPs at 10% for FSWs and 18% for MSM.

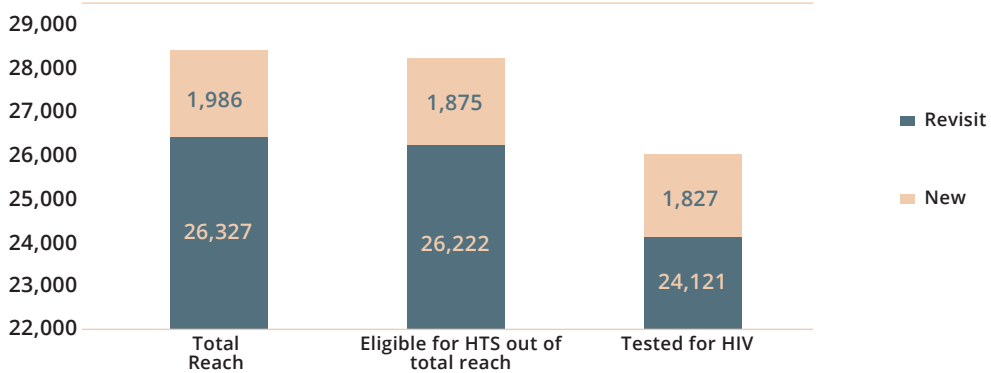


Figure 1: HTS Achievements for Key Populations

Scale-up of Partner Notification Services (PNS)

To improve case finding and optimize HTS services, the Project scaled up partner notification services for positive clients identified. Partner contacts were elicited from newly identified HIV positive clients, and clients enrolled at the KP DICES identified as high viremia clients. PNS

contributed to the identification of 158 new clients. Notably, most of the clients identified through PNS were from among the general population and represented an 11% yield.

Summary of Key Achievements for Nuru II Key Population Program

- **95,005** KPs were tested for HIV and taken through HIV risk reduction counseling. Out of these 1,026 tested HIV positive and 92% were linked to care.
- Partner Notification Services (PNS) contributed to 11% of all newly identified HIV+ clients in the year.
- **30,315** KP were contacted and reached with health education and were also screened for STI's. Of these, 2,907 were diagnosed and treated for various STIs with sex workers recording the highest incidence of STIs .
- **10,642** truckers and partners of KPs were reached in partnership with North Star Alliance.
- Over 15 million male and female condoms were distributed to KPs and their clients and about 12,000 needle and syringe kits were distributed to people who inject drugs to promote safety and reduce HIV infections.
- All **95,005** KP who accessed HIV testing services were reached with Respect-K, an Evidence Based Intervention integrated into KP clinical visits that is used for risk assessment and risk reduction counseling.
- **1,324** KPs and their partners living with HIV received care and treatment services. Of these, 972 (93%) had a viral load sample taken. Results from 936 (96%) samples were received with 91% being virally suppressed.

Beneficiary Testimonial

“I am surprised that people care and that being HIV positive does not make me worthless. With support from the project, I started a business of selling bananas to fend for myself and my child. I have found my self-worth, and I can smile again despite being rejected by my family when I tested positive for HIV. – *Beneficiary from Nuru II Key Populations Project in Embu County*”

Road Towards an HIV Free Society Project

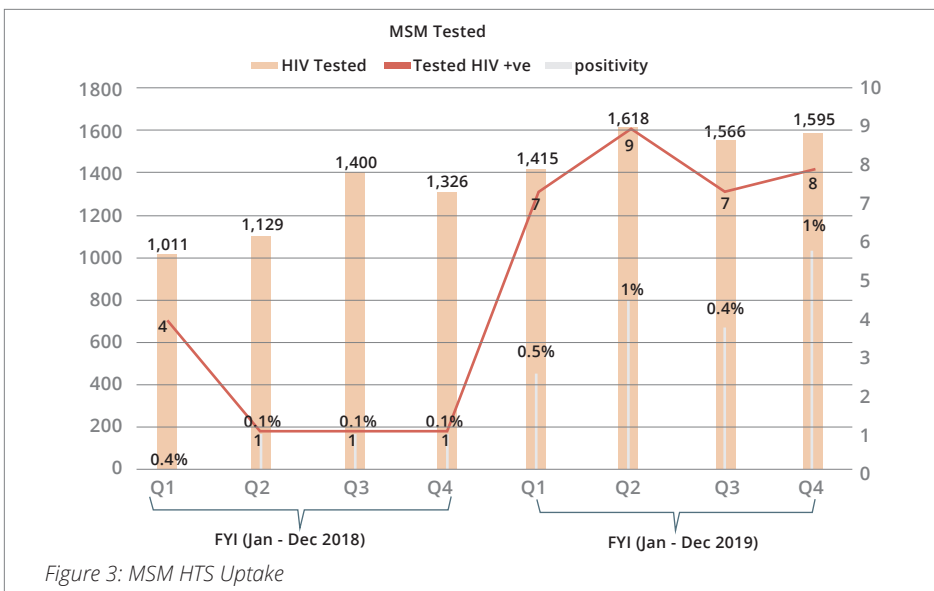
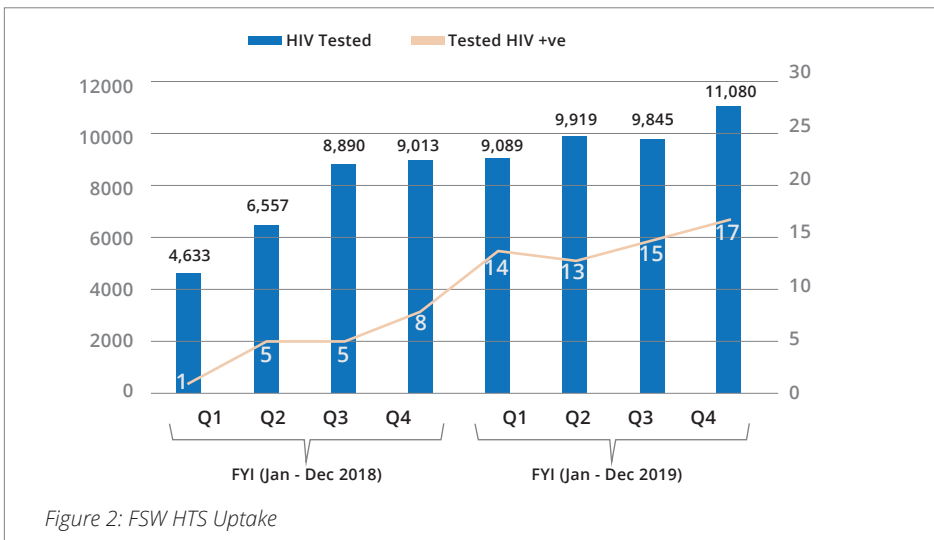
HWWK is sub-granted by Kenya Red Cross Society under Global Fund's HIV/AIDS project. Through this project, HWWK provided KP services to an additional **14,158 KPs** (12,320 FSW and 1,838 MSM). The Project aims to promote universal access to comprehensive HIV prevention treatment and care by reducing new HIV infections by 75% and reducing HIV related mortality by 25%. HWWK provided HIV services through Wellness Centers, also referred to as Drop-In Centers (DICEs), and through activities at KP hotspots in Machakos, Kajiado, and Nakuru Counties. In the last quarter of the year, the Project coverage expanded to include Nyeri County.

Through a well-guided Peer Educators Duty Roster, there was an improved service uptake at the DICEs from an average of 5 clients per

day to 19 clients per day. The staff and peer educators were engaged in various capacity building activities and sensitizations that resulted in scale-up of interventions such as DTG transition for people living with HIV (PLHIV), and Pre-exposure Prophylaxis (PrEP) uptake for HIV negative clients.

HTS for FSW and MSM

To increase the identification of HIV positive cases, the project adopted HIV Testing Services (HTS) as a point of entry to care, and treatment at the DICE, and beneficiaries were encouraged to know their HIV status. The HTS counselors provided HIV health education to increase basic HIV knowledge to the clients. By the end of FY2, 11,080 sex workers had been tested, and 74 of them were HIV positive. Sixty-four FSWs were successfully linked to care and treatment, while ten clients were still being followed up on and continued to receive ongoing counseling.



HTS Services for MSM

Uptake of HTS services among MSMs improved from 74% (1,326) in FY 1 to 90% (1,595) in FY2. A total of 38 positive cases

were identified, with 34 (89%) of these successfully linked to comprehensive care and treatment. Four MSMs not linked received ongoing counseling and follow up.

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

- **14,158** KPs (12,320 FSW, 1,838 MSM) were reached with comprehensive HIV prevention services.
- **12,675** KPs were tested for HIV and taken through HIV risk reduction counseling. Out of these 904 (7%) tested HIV positive and 867 (96%) were linked to care.
- **14,173** KP were screened for TB .

Beneficiary Testimonial

Renewed hope

Njeri*, a Global Fund Project beneficiary living with HIV shares her journey of living positively since her diagnosis in September 2014 at the age of 15.

There was a HTS camp just next to the hotel my friends and I were eating. The lady at the HTS camp kept calling people to get tested, and one of our friends suggested that it would be nice to know our status. I was not interested, but due to peer pressure, I decided to join my friends. Upon arrival, the counselor took me through the pre-test counseling session.

After a lengthy engagement, I was tested. Never in my worst imagination did I imagine I could be positive, yet right before my eyes, the kit was proving me wrong. As he did the confirmatory test, I crossed my fingers, hoping the results would be negative, but no, I was HIV positive. My whole life crumbled before my eyes. As I left the clinic, a heavy cloud of darkness lingered in my heart, and I knew right there, life was never going to be the same.

As the months went by, I isolated myself from my peers, close friends, and relatives. I was young and had no support system. How could I tell my grandmother, who was my guardian, that I was positive? I left home and found myself in the streets working as a fulltime sex worker. I was bitter and resorted

to living a wild life. After all, how much worse could it get? Within two years, my health had deteriorated. As I was lying on my bed waiting to die, Maggy (not her real name) came and took me to Gilgil Sub-County hospital, where I was counseled and offered ARV treatment.

It was still difficult for me to adhere to the treatment regimen until my friend Maggy who I later learned is a peer educator, introduced me to HWWK Gilgil Wellness Centre, where I was enrolled as a client. I started attending a support group where I regained hope with support from my fellow PLHIV. After a series of discussions with the nurse at the DICE, I was supported to identify a treatment buddy who would support me in adherence to treatment.

“I am forever grateful to HWWK for giving me hope when I needed it most.”

I am now virally suppressed and living a full and productive life.

**Not her real name.*

Adolescent Girls and Young Women (AGYW)



Fashion and design is one of the marketable skills offered to AGYW in the DREAMS Project

DREAMS Project

HWWK has continued to implement the DREAMS Project. DREAMS is an acronym for Determined, Resilient, Empowered, AIDS-Free, Mentored, and Safe lives. The Project serves 10 – 24-year-old AGYW in 10 wards in 6 sub-counties in Nairobi County. These are Ruben (Embakasi South Sub-County), Viwandani (Makadara Sub-County), Eastleigh South (Kamukunji Sub-County), Mathare North and Utalii (Ruaraka Sub-County) Mabatini, Hospital, Nairobi South and Landimawe (Starehe Sub-Counties) and Embakasi – Tassia (Embakasi East Sub-County).

The Project enrolled 19,368 AGYW, out of which 16,138 AGYWs were reached with combined prevention services that respond

to needs in each age category. A total of 14,571 (90%) AGYW received at least one of the prescribed services, which include services that directly empower AGYW, mobilize communities to support and protect AGYW, strengthen AGYW's families, and provide services that decrease risk in the male sexual partners of AGYW.

The Project engaged 110 mentors, where each oversees up to 80 AGYWs. The AGYWs met weekly at Safe Spaces. They received health education using a health and life skills curriculum adopted from Population Council, Evidence-based behavioral interventions, HIV testing services, linkage to family planning services, and Pre and Post – Exposure Prophylaxis (PrEP and

PEP). The project also provides education subsidies, vocational skills training, and entrepreneurship training and linkage to employment.

A total of 7,825 AGYW tested for HIV with 13 testing HIV positive. Of these, 11 (84%) were successfully linked to care and treatment. Sixteen (16) AGYWs were enrolled with a known HIV-positive status and are all on care and treatment at various linkage facilities. A total of 287 Male Sexual Partner (MSP) outreaches were conducted where 4,782

MSP were reached with HIV testing and counseling and referred to other services. Twenty-nine tested HIV positive, with 25 (86%) of them being effectively linked to care and treatment. Four MSP (4) were linked to VMMC. STI screening was provided to 2,469 MSP, whereby 14 tested positive and were treated. For those not linked, follow up, and continued counseling was employed to ensure the linkage of those not linked.

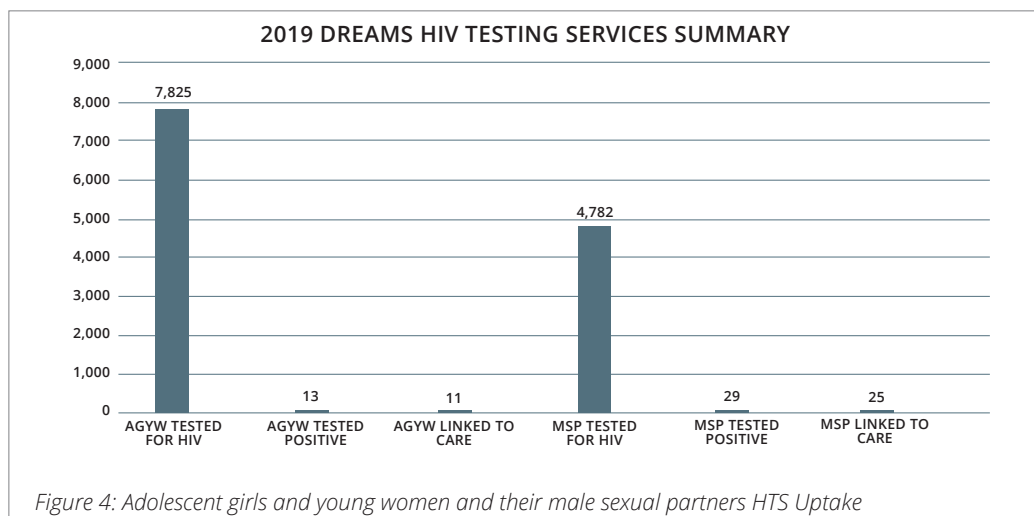


Figure 4: Adolescent girls and young women and their male sexual partners HTS Uptake

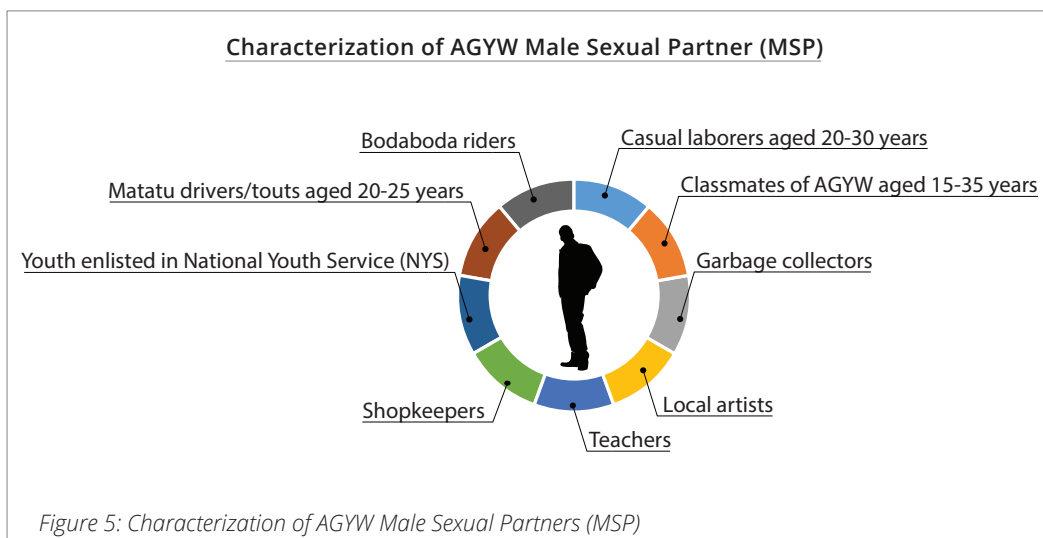


Figure 5: Characterization of AGYW Male Sexual Partners (MSP)

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

- **7,825** AGYW were tested for HIV and taken through HIV risk reduction counseling. Out of these 13 tested HIV positive and 11 (84%) were linked to care.
- **4,535** AGYW were reached with family planning education and 288 received a contraceptive method.
- **10,108** AGYW were screened for Gender-based Violence, 777 reported having experienced some form of violence. Of these, 26 reported having experienced sexual violence and were referred for post GBV care services.
- **3,282** AGYW were screened for PreP and 509 (16%) were identified as being eligible to access the service and 252 (50%) were newly enrolled and received PreP.
- **5,224** (101%) 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.
- **1,120** AGYW were supported to join vocational skills training, 4,699 completed financial capability training, 4,847 completed entrepreneurship training, and 168 were linked to employment and internship opportunities.
- **1,124** (98%) out of the expected 1,151 caregivers of AGYW aged 10 -14 years, completed Family Matters Program I. **799** (119%) out of the expected 669 caregivers of AGYW aged 15-19 years, completed Family Matters Program II. This program aids in improving parent-adolescent communication, especially on sexuality.
- **45,171** community members were reached with SASA messages which aim to facilitate community mobilization and norms change.
- **2,074** AGYW aged 13 – 17 years and their 1,473 male peers completed their required 5 sessions of My Health My Choice. There was 100% retention of girls reached with this intervention.
- **1,448** AGYW aged 10 – 14 years and 704 adolescent boys completed 7 sessions of Healthy Choices for a Better Future (HCBF) - a school based HIV and Violence prevention intervention. All girls enrolled for this intervention completed the sessions recording a 100% retention.

Beneficiary Testimonial

Mary* is 22 years old. She lives in Mathare with her mum in a single-parent household. She is the only child, and her mum works as a casual laborer. Before being enrolled in the DREAMS Project, Mary was involved in drug abuse and drinking illicit brew, which was readily available in her village. She didn't care about her life. She dropped out of school and was sexually involved with older men and was not aware of the risk to which she was exposing herself.

After enrolling in the DREAMS Project in January 2018, she began to participate in the Social Asset Building (SAB) group where

she received information on HIV prevention, family planning services, correct and consistent condom use, financial capability, and entrepreneurship skills which completely transformed her life. Her confidence was built, she was making better decisions, and within six months, she was invited to train as a mentor. She went back to school for her Kenya Certificate of Secondary Education (KCSE) and graduated in 2019 with a C+ average score.

She now mentors a group of 30 girls on behavior change. The Project has provided opportunities for vocational skills training

so that they can have decent employment instead of being involved in the illegal business of selling illicit brew for quick money. She has empowered the girls to speak about cases of gender-based violence and get help. She supports young girls between 10 - 14 years by encouraging them to be focused, stay in school, and avoid early pregnancies. Their behavior has changed, and they no longer seek for attention from men, and they regularly attend the SAB group meetings.

Mary points out that many girls below 15 years are already young mothers, an issue that is perceived to be usual in the informal settlements and village areas. She attests

that the DREAMS project came to rescue young girls and help them to be responsible in the community. She also engages parents through the Families Matter Program and encourages them to dialogue and support adolescent girls. She also speaks to the men to get them involved in preventing Gender-Based Violence (GBV) and its effects.

Mary is currently pursuing a certificate course in Community Development from the Kenya Institute of Social Work, which is partly sponsored by the DREAMS Project. She looks forward to her graduation in July 2020 and would like to further her studies.

**not her real name*

Kenya Youth Empowerment and Opportunities Project (KYEOP)



A beneficiary of the Kenya Youth Employment & Opportunities Project during her internship at a salon in Nairobi

KYEOP is a World Bank-funded project implemented through the National Industrial Training Authority (NITA). It aims to increase employment and earning opportunities for youth between the ages of 18-29 years through various skills and entrepreneurship training. In partnership with government vocational training centers, HWWK provides 2-months job-specific skills training, a 3-months internship, and 6-months of employment.

HWWK implements the Project through a joint venture with Local Entrepreneurship Development and Education Project (LESDEP) East Africa limited.

Summary of Key Achievements for Kenya Youth Employment and Opportunities Project (KYEOP)

- **65** trainees were enrolled for job specific skills training under Cycle 2 in 2019 in Nairobi and Nakuru Counties, with a 93% transition to internship and 35% transition to employment.
- **102** trainees were enrolled for job specific skills training under Cycle 3 in 2019 in Nairobi, Kitui, and Nakuru Counties, with a 77% transition to internship.

Strengthening Community Health & Related Structures



Community Library was launched at the HWWK Mukuru Kwa Ruben Center, providing children with access to a safe and conducive environment for their studies

Community Library Initiative

HWWK, in partnership with Badili Zone, launched the Mukuru Community Library at Mukuru Center of HOPE during the International Youth Day on 10th August 2020. The library was established to provide accessibility to books, and a safe space and conducive environment for learning to children who live in Mukuru Informal Settlement. Other partners included Akili Dada, Makadara Sub-County, Jomo Kenyatta Foundation, and General Electric.

Child Protection and Legal Support

HWWK, through the social workers and community health volunteers, continues to support and work closely with the Department of Children's Services, local government structures such as Local Area Advisory Council, Quality Improvement

(QI) teams, Chief Barrazas, and other local players to strengthen child protection systems at the community level and to improve access to child protection services at the household level.

Community Safe Spaces for AGYW

A community space is considered 'safe' if it provides an environment where there is physical and emotional safety for the AGYW. In 2019, Safe Spaces were set up in schools, churches, mosques, at project sites, community halls, vocational training centers, and Chief's camps. A total of 14,571 AGYW met in 130 Safe Spaces during the financial year. Partnership with communities to provide Safe Spaces have strengthened the commitment of community members to support vulnerable AGYW. Social Asset Building groups

disaggregated by the age of participants met weekly at their designated Safe Spaces to interact, share, learn together, and bond. Because of these interactions, the AGYW have been integrating various projects within the SAB groups, including dancing, modeling, soccer teams, singing groups, table banking groups, cooking, and theater groups.

HIV and Gender-Based Violence (GBV)

AGYW, who experienced gender-based violence, were identified through the Social Asset Building (SAB) sessions at the Safe Spaces and routine screening by mentors and Project staff. Of the 10,108 AGYW screened for violence, 777 reported having experienced some form of abuse. Of these, 26 reported having experienced sexual abuse.

Key populations are exposed to various forms of violence—the violence emanates from law enforcement agencies, their clients, and other partners. GBV education sessions

were held with both the potential victims and/or perpetrators of GBV to sensitize the participants on the risks and effects of sexual and physical abuse. Sex workers were educated on the appropriate responses to sexual gender-based violence (SGBV). A total of 7,972 KPs reported having experienced different forms of GBV, including physical, sexual, and other forms of violence. There was an improvement in the reporting of GBV cases among KP and also in response to incidents reported. Formation of violence response teams in each county and the use of hotlines at every DICE, strengthened GBV mitigation efforts.

Table 1: Distribution of GBV incidences reported by KPs

| KP | Physical | Sexual | Other | Total |
|--------------|--------------|------------|--------------|--------------|
| FSW | 3,659 | 107 | 3,766 | 7,532 |
| MSM | 172 | 44 | 216 | 432 |
| PWID | 4 | 0 | 4 | 8 |
| Total | 3,835 | 151 | 3,986 | 7,972 |

Other forms of violence include emotional, illegal arrests and discrimination

Partnership Building



Dr. Owino, Embakasi Sub-County Medical Officer of Health, Ms. Venessa, Embakasi Sub-County AIDS & STI Coordinator, and Ms. Jackie, Sub County Educational Health representative meeting with the HWWK DREAMS Program Team for quality improvement at the Mukuru kwa Ruben Community Center

AGYW Engagement

Thirty AGYW were trained and engaged as mentors to the younger girls in the DREAMS Project. They received a stipend that would enable them to facilitate the Social Asset building sessions effectively.

Involvement of Women, Youth, Persons With Disabilities, People From Minority Clans or other Vulnerable Groups

The involvement of marginalized and vulnerable groups is mainstreamed in all projects to ensure inclusion and equitable access to services in the communities served. Women are actively involved in advising girls. Kids Clubs activities ensured that children's services were provided to all and that their views were included in project planning and implementation. Health services targeting the youth were provided in youth-friendly centers and administration roles in the centers assigned to youth. Persons with disabilities were facilitated

to register with the National Council for Persons with Disabilities (NCPWD).

Government, Civil Society, and Private Sector Engagement:

Government health facilities, departments, civil society, and the private sector were engaged in delivering services to the AGYW and children. The partnerships supported the Project in many ways. The services provided included education subsidies and learning materials; career and talent development; vocational skills training at a subsidized cost; training on agri-business; mentorship; sexual and reproductive health services such as family planning services, menstrual hygiene packs and antenatal care; nutrition support; and National Hospital Insurance Fund enrolment. There was also MTIBA, a mobile 'health wallet' that allows people to save, borrow, and share money for healthcare at lower than average costs; and support to train clinical

officers on PreP, and training on financial literacy, including savings, among others.

The KP Project engaged the County Health Management Teams (CHMT), National AIDS and STI Prevention Program (NASCO), National AIDS Control Council (NACC), Government of Kenya (GOK) health facilities, Department of Children's Services (DOC), the Police Force, NHIF, PEPFAR funded projects, private organizations, and other stakeholders for support supervision and drugs supplies, condom supplies, GBV support mechanisms, care and treatment services, cervical cancer screening, and nutrition support, among others. HWWK worked with North Star Alliance to reach KPs along the Transport Corridor from Mombasa to Uasin Gichu and Kajiado Counties.

In addition, children's projects engaged caseworkers, caregivers, and community religious leaders through participating in meetings and consulting on the best approaches to ensure the best outcomes.

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

Support for County-Level KP Technical Working Groups (TWGs)

HWWK participated in quarterly KP TWG meetings that took place in various quarters and took the lead in the formation of KP TWGs in all counties of coverage if they were not already in place. The process involved the sensitization of County Health Management Teams (CHMTs) on KP programming, developing the Terms of References for the TWGs at the county level, and providing the resources required to facilitate this forum.

Increased Integration Efforts

In partnership with the county governments of Muranga, Tharaka Nithi, and Kirinyaga, satellite DICES were identified where services could be provided within county government facilities. These were selected in consultation with the beneficiaries and health facilities managements mainly in areas that are within project coverage but far from the Drop-in Centers

HWWK transitioned KP work in 8 counties, including Muranga, Nyeri, Makeni, Uasin Gichu, Mombasa, Kajiado, Meru, and Nakuru. The work transitioned to lead clinical partners in the county in the effort to integrate HIV prevention for KPs within the existing county health system to effect program sustainability.

Partnerships with funding Agencies and Sub-Granting Organizations

HWWK participated in and benefited from regular forums hosted by CDC Kenya, Kenya Red Cross Society, Plan International, Christian Aid, and CARE International in Kenya for progress reviews, held site meetings and advised the project quality improvement plans.

Improved Livelihoods

KPs Alternative Livelihoods Activities

Sex workers are encouraged to identify and pursue alternative sources of livelihood, which allows them to reduce dependency on sex work as the only source of income.

Alternate sources of income empowers sex workers to negotiate for consistent condom use and to reduce the number of clients, which in turn reduces the risk of HIV infections. The Project supported the formation of 82 groups engaged in Table Banking. They have more than KES 1.4 million in savings. Other income-generating activities include poultry-rearing, soap-making, and bead-making, etc. There were six young KPs identified and supported through partnerships to pursue vocational skills training, and four groups linked to Women's Enterprise Fund and Solution SACCO, where they benefit from loan facilities. The Eldoret Sex Workers Alliance was supported to apply for funding from Kenya Sex Work Alliance (KESWA)—an umbrella organization of the Kenyan sex worker-led groups, and Kenya Legal & Ethical Issues Network on HIV and AIDS (KELIN).

Combination Social Economic Approaches (CSEA)

HWWK, through the DREAMS Project, used multiple complementary CSEAs in the year. These included training AGYW in financial literacy and entrepreneurship, training in vocational skills, and linking AGYW to internships and job opportunities. A total of 1,120 AGYW were supported to join vocational skills training against a target of 2,010. Since the beginning of the Project in 2016, 14,337 AGYW have completed Financial Capability (FC) training. During the year under review, 4,699 AGYW completed FC training. Cumulatively, a total of 9,886 AGYW above 15 years old have completed entrepreneurship training, 4,847 of which completed the training in 2019.

The job and internship opportunities that the AGYW were engaged in include hairdressing and beauty, cyber café attendants, interior designing, and mechanics. Several AGYW were engaged as mentors or facilitators in HWWK's DREAMS Project.

Table 2: A summary of combined socio-economic approaches

| Types of CSEA Support | 10-14 ears | 15-17 years | 18-24 year | TOTAL |
|-----------------------|------------|-------------|------------|-------|
| Financial Capability | 1,153 | 1,040 | 2,506 | 4,699 |
| Entrepreneurship | 19 | 2,098 | 2,749 | 4,847 |
| Vocational training | 0 | 100 | 1,020 | 1,120 |
| Linked to employment | 0 | 2 | 166 | 168 |
| Linked to internship | 0 | 3 | 52 | 55 |

Voluntary Savings and Loans Associations (VSLAs)

VSLAs are voluntary savings and loans association groups where caregivers take part in table banking. In 2019, 3,555 caregivers caring for 7,948 OVC were members of 208 VSLA groups. The total membership is from two child-serving projects – Nilinde and CASE OVC. Cumulatively, the VSLA groups mobilized savings worth KES 7,335,103 with an accumulated loan fund of KES 2,882,642.

The loans to members were mainly used for food items, education, and equity to support income generating activities. Through mentorship and training provided at a group level on entrepreneurship and financial management, 80% of the groups were legally registered with the government and 25 groups linked with microfinance institutions and Savings and Credit Cooperative Organisation (SACCOs).



HWWK employee facilitating training on the use of passbook to Matey VSLA Members

Story: Voluntary Savings and Loaning Association, a Strategy for Sustainable Development

Yikivuthi is an OVC caregivers' group in Kambu Region in Kibwezi East Sub-County. The group consists of 20 female caregivers with 41 OVC (19 M, 22 F). The group started in 2015 and was enrolled in the OVC Project in the year 2017. They benefitted from direct project support through uniforms for primary school children, payment of early childhood development classes (pre-primary school), secondary school fees, and household economic strengthening support (HES).

In 2018, CASE OVC organized a Trainer of Trainers (TOT) training on VSLA where the members of the group who also double as community health volunteers (CHVs) attended. The knowledge acquired helped the members to form a functional VSLA. HOPE *worldwide* Kenya staff also sensitized caregivers on record-keeping, managing group dynamics, and the use of passbooks through capacity building forums. The group members were linked to financial institutions and applied for Uwezo Funds, where they qualified and received a loan of KES 100,000. This fund provides loans and is available to

women and youth groups. It is distributed at the constituency level to promote youth and women businesses and enterprises.

In 2019, the group qualified for another loan from the Tetheka Fund of KES 50,000. The Makueni County government established a fund for youth, men, women, persons with disabilities, and table banking groups. It is an empowerment fund that aims at providing a fund that is accessible to all groups in the community. The efforts of the caregivers enabled them to pay KES 56,000 for secondary school fees for 5 OVC (2 M, 3 F) and KES 12,000 fees for one female OVC in college and contributed to households being able to afford their basic needs. Nine female caregivers started small income-generating activities.

The group members thank the CASE-OVC Project for the VSLA strategy, which has enabled them to have OVCs that are thriving within their households.

Children's Services



Teenage mothers are equipped with parenting skills to support their children optimal brain development

MWENDO Project

HWWK began implementing the MWENDO Project in October 2019. MWENDO is an acronym for Making Well-informed Efforts to Nurture Disadvantaged OVC, and is funded by USAID through Catholic Relief Services. The Project is supporting OVCs in 23 wards within Embakasi and Kasarani sub-counties

in Nairobi County. The MWENDO Project continued to offer support to 16,357 (7,748 M, 8,609 F) children who were served under the Nilinde Project after it closed down in March 2019. Out of 16,357 children enrolled, 440 (210 M, 230 F) were Children Living with HIV while 753 (314 M, 412 F) OVC had unknown HIV status.

Summary of Key Achievements for MWENDO Project

- **16,357** OVC were transitioned into MWENDO from the Nilinde Project in 2019.
- **241** children living with HIV and **212** caregivers were reached with nutrition and health education towards viral load suppression.
- **17** link desks were established and were operational within 5 satellite offices to provide child protection, health services, and handle gender based violence cases and referrals.
- There were **144** active VSLAs that were transitioned to MWENDO Project comprising of **1,961** caregivers caring for **5,276 OVC**. The VSLA groups were linked to micro-finance institutions such as Pioneer FSA (a savings and Loan Association) and Equity Bank. The groups loaned out **KES 1,683,400** to its members against savings of **KES 6,376,531**. The purpose of loans included food security, education and start up/boosting of income generating activities.
- **440** HIV positive OVC were served, **100%** were linked to care.

Nilinde Project

HWWK began implementing the Nilinde project in July 2016 through funding from USAID through Plan International and closed out in March 2019. The project was implemented in Nairobi County in Dandora, Kayole, Ruai, Embakasi, Imara Daima, Komarock, Kware, Mowlem, Pipeline, Savannah, and Utawala Wards. The project transitioned to MWENDO through a sub-grant from Catholic Relief Services (CRS).

This project promotes 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.

Summary of Key Achievements for Nilinde Project

- **22,232** children were reached with services
- **19,406** OVC learned 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, and 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. Cumulatively, the 189 VSLA groups mobilized savings worth KES 5,762,279.
- 702 OVC received a one year supply of sanitary towels.
- 1,021 OVC received school fees support, and 201 OVC received school uniforms.
- 479 OVC were provided with unimix - a nutritious porridge taken to alleviate malnutrition.
- 438 OVC households were linked to and supported to access National Health Insurance Fund services.

CASE-OVC Project



HWWK staff addressing children and facilitators during a Kids Club meeting in Makeni County

USAID funds the Comprehensive Assistance, Support, and Empowerment of Orphans and Vulnerable Children (CASE-OVC) Project through Christian Aid. HWWK implemented the Project 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. The categories of services offered include health and nutrition, linkage to care and treatment, and adherence to antiretroviral therapy (ART). Also, the Project provided psychosocial support to households, supported the empowerment of group savings and loan associations, cash transfers, food subsidies, and contributed towards the educational achievement for

OVC by keeping them in school through the payment of school fees.

Project delivery is through 60 community health volunteers who are responsible for implementing the activities. To ensure the quality of services, the Project collaborated with the CASE-OVC regional technical team and adhered to the PEPFAR guidelines for OVC programming and the Kenya National Plan of Action. Minimum service standards for OVC were used, and quality improvement teams championed improvement in service delivery.

In November 2019, HWWK transitioned the CASE-OVC Project in Makueni to Kitise Rural Development Program to continue its implementation. We ensured that all OVCs were transferred successfully.

Summary of Key achievements for CASE-OVC Project

- **4,236** OVC were served through CASE-OVC in 2019
- **1,675** OVC were reached with health and nutrition services
- **528** OVC were reached with child protection and legal support
- **4,119** OVC obtained birth certificates
- **28** Kids Clubs were active serving **1,921** OVCs
- There are a total of 64 VSLAs comprising of **1,594** caregivers caring for **2,672** OVC. The VSLAs loaned out **KES 1,199,242** to caregivers.
- **492** HIV positive OVC were enrolled in the project and linked to care.

Beneficiary Testimonial: Mentorship Changes the Life of an OVC

Kimanthi* is a 14-year-old OVC living with his aged grandmother. He came from Kibarani Village in Kibwezi West sub-county and joined the program in 2015, where he was supported with various services, including school uniforms and psychosocial support.

In 2017, Kimanathi developed a habit of stealing money from his relatives and spending the night in unknown places without informing his guardian. A caseworker attached to Kimanathi reported the case to HWWK. Kimanathi received counseling, but the behavior persisted, prompting further intervention. HWWK partnered with the

Kibwezi West District Children's Officer (DCO) and linked Kimanathi to a school known for promoting and facilitating behavior change. Before he was enrolled in the institution, there was an agreement between the DCO, HWWK, the approved school officials, and the guardian. It was agreed that if Kimanathi did not exhibit improved behavior in the next two years, he would remain in the custody of the institution until he completed his high school education.

The HWWK staff and the DCO counseled Kimanathi and emphasized on the importance of him changing his behavior. Over time Kimanathi improved his behavior,

sat for his Kenya Certificate of Primary Education (KCPE) exams, and was released from the institution. Kimanthi shares about his experience in the correctional institution and how he was able to improve his behavior with other young people. He mentors other OVC concerning issues pertaining to positive behavior change based on the information and knowledge he acquired from his own experiences. Kimanthi and his guardian appreciate the efforts of HWWK and the community team for the support that made a significant impact on his life.

**not his real name*

Bridge to Empower Girls in Nairobi (BEGIN)

The Bridge to Empower Girls in Nairobi (BEGIN) Project aimed at providing services to 500 teenage girls. The Project focused on girls who were pregnant and/or nursing children between the ages of 0-3 years old, and who were living in the Mukuru Slums of Nairobi. The girls were provided with knowledge and skills to promote their children's brain and overall development. The Project was funded by Grand Challenges Canada and closed out in June 2019.

The Project utilized a three-pronged approach incorporating scientific, social, and economic interventions. Parenting workshops were integrated to promote self-esteem and positive parenting and to share key early childhood development messaging. Sister Walk Groups (SWG) were established that promoted support, learning, and action. The maternal outcomes were measured

using a Knowledge, Attitudes, Practices, and Behavior Tool while child developmental outcomes were measured using the 'Ages and Stages Questionnaire' and the measurement of body mass index.

The Project integrated vocational skills training and second-chance education to teenage parents to improve their social-economic status and prepare them for future opportunities.

Adolescent Empowerment Program (AEP)

HWWK is implementing a 5-year project (2015-2020) funded by the Patsy Collins Trust Fund Initiative through CARE International in Kenya. The aim of the project is that by 2020, adolescents from Mukuru Slums get empowered to exploit their potential and to take advantage of opportunities and fulfill their aspirations.

In 2019, project review meetings were conducted by 33 teachers (17 female and 16 male) implementing the project modules within 20 schools in Mukuru Kwa Rueben, Viwandani, and Rueben Wards. The review followed activities conducted within the respective schools. Adolescents in each school formed groups of 25 members each. The teachers trained the group members on sexual reproductive health and financial education using a curriculum developed by the Kenya Institute of Curriculum Development (KICD)

The Project also held school exchange visits for experiential learning on a chicken project

Summary of Key achievements for the BEGIN Project

- The number of adolescent girls with secondary education who had no income decreased to **70%** from **90.8%**.
- The pre-natal visits increased to **81.7%** from **18.2%**
- The postnatal visits increased to **77.9%** from **18.5%**.
- **502** teenage mothers were trained in parenting skills with an aim of improving the environment of the children below 3 years.
- **519** children in the target population received a full intervention package.



Adolescents and youth participating in a Social Analysis and Action (SAA) activity in Mukuru Kwa Rueben

and other farming projects conducted in schools. Life skills training was provided to 593 adolescent girls and 561 adolescent boys, while 880 adolescents both in and out of school received training on leadership and decision making on financial matters. The adolescents participated in group activities and assisted in writing the training reports,

doing the recaps before a session, and helping mobilize group members during a session. Adolescents who joined the Participatory Education Theatre (PET) group were also able to build their confidence and public speaking skills.

Summary of Key Achievements from Adolescent Empowerment Project

- **528** adolescents trained in SRH, 389 adolescents trained in Economic Citizenship Empowerment (ECE). 345 adolescents trained on both ECE and Sexual Reproductive Health.
- **3** schools were visited by Post Bank and adolescents learned about Smata Account and were encouraged to save.
- **20** schools received Savings and Loan Association training with adolescents
- **62** Social Analysis and Action (SAA) sessions were conducted with parents on topics related to gender based violence, education, drugs and substance abuse, school dropout, and gender roles.
- **223** adolescents participated in the midterm evaluation survey.

Child Sponsorship Projects

JamQuest



JamQuest sponsored students celebrate the heART to heART Initiative conducted by university students in the US.

The JamQuest Project 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 US as part of a school project.

In 2019, the Project supported 28 high school students with school fees. Mentorship events were held in April and August during the school holidays. The Project had four students who completed their high school education in late 2018 and 1 qualified for University admission. JamQuest sponsored the first-year of university fees as the student transitioned. Another student was supported with a laptop to facilitate his learning at the Technical University of Kenya, pursuing

a Bachelor of Technology (industrial and applied Chemistry) Degree. The Project has also attracted support from other young people in the US.

Some of the most impactful support has been from the 'heART to heART' Arts Movement. Students in the US hold art exhibitions to fundraise for school fees to support the JamQuest beneficiaries and also make arts & crafts to send over to the students. The arts and crafts are individually packaged and a personalized gift given to each student. The personalized gifts touch the hearts of the students in a unique way. HWWK remains grateful for the continued and sincere support from JamQuest sponsors.

Summary of Key achievements for JamQuest Project

- 28 students received school fees support in 2019.
- 4 students completed their high school education in 2018. Out of the 4, 1 qualified for and was supported to join university.
- 2 mentorship events were held over the school holidays.



Young Nathaniel receives full school uniform support from Kenya Kids

Kenya Kids

Kenya Kids is an Orphans and Vulnerable Children (OVC) Sponsorship Project which started in 2007 through an initiative of the Triangle Church of Christ. The Project serves children by supporting and strengthening their families. In 2019, Kenya Kids supported 67 children and 21 households. The children received school fees, school shoes, and uniforms. The caregivers' groups were encouraged to start voluntary savings and loan associations.

The Project also considers assisting college or university students who have been accepted into schools.

Summary of Key Achievements for Kenya Kids Project

- 8 children received full school uniforms
- 15 students in secondary school supported to pay 70% of their annual school fees
- 27 children in primary school were supported with school levies and scholastic materials
- 1 student was supported with university tuition and nutrition support
- 1 family was supported to clear outstanding medical bills for their child
- 1 caregiver was supported with a business start-up kit
- 2 households were provided support with house rent during a vulnerable time

Supporting Volunteerism



HOPE Volunteer Corps pose for a photo at Modern Green Primary School in Embu where they renovated a dining hall, painted walls, and built benches and tables for two weeks.

HOPE Volunteer Corps

The 2019 HOPE Volunteer Corps activity was held in Embu County. The Team, for the second year, served at Modern Green Primary School. There were 14 international volunteers from the United States, four local volunteers, and staff from HWWK. They spent time refurbishing the dining hall by painting the walls and constructing tables and benches. The Team also distributed water filters that were

donated through a partnership with Wine to Water, a not for profit organization based in the US.

Kakuzi Limited donated 20 desks to the school towards improving the learning experience of the pupils. The school and its neighboring community are very grateful for this support.

Good Deeds Day

HOPE worldwide Kenya was among the 200 nonprofit and corporate leaders from 23 countries who came together at the 2nd African Good Deeds Day Conference from August 6 – 8th 2019. The focus was on strategies and trends in volunteerism and partnerships with corporates and other stakeholders to boost Africa's socio-economic growth.

DREAMS Project to participate in the event. The event also provided an exhibition opportunity for HWWK.

The organization had an opportunity to share about the HOPE Volunteer Corps as a best practice in integrating the local and international volunteers in serving the rural community.

The conference was held at the Boma Hotel in Nairobi, Kenya. Good Deeds Day Global sponsored two HWWK mentors from the



HWWK DREAMS Assistant Project Associates, and mentors Delvin and Agnes, share HWWK's good deeds activities with the Nairobi County Governor, Mike Mbuvi Sonko, during the Good Deeds Day Celebrations on 7th April 2019

Volunteers Trip in Partnership with HOPE worldwide Hong Kong

On 10th August 2019, HWWK hosted a group of volunteers in partnership with HOPE worldwide Hong Kong, who generously donated two refurbished containers for housing the HWWK social enterprise and a vocational training center for vulnerable girls undertaking training in fashion and design in the Mukuru Informal Settlement. The volunteers interacted with adolescent

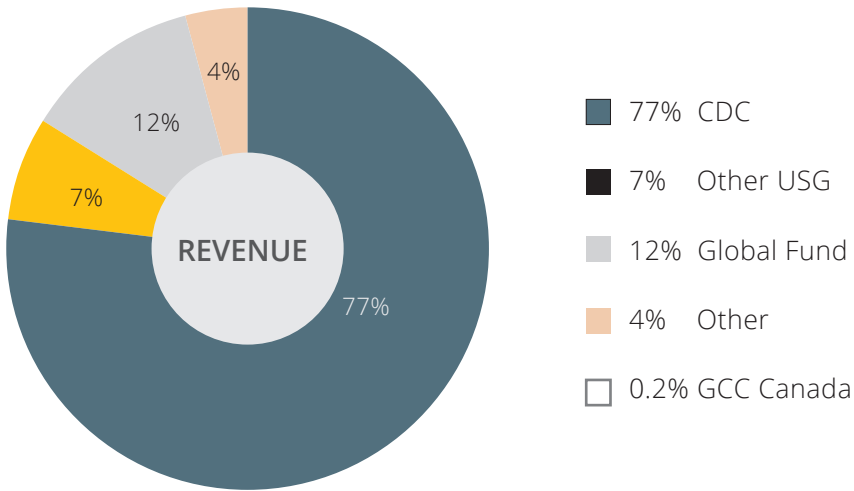
girls and young women from here. They had a cultural exchange, shared snacks, and learned words in Chinese and Swahili. The group toured the HWWK Community Center and learned about community projects being implemented by HWWK. We are grateful for the generous support and partnership with HOPE worldwide Hong Kong.



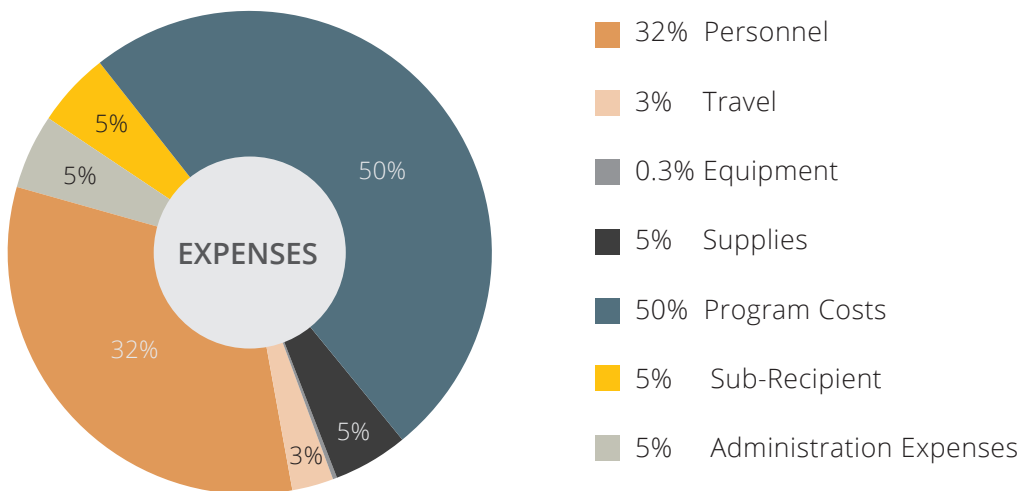
Mr. Danny Tang Chan Yee cuts the ribbon during the official presentation of two refurbished containers that were generously donated by Dr. Irene Tang of Cheong Tai International Holding, Fanny and Danny CHOI, and Teresa and Danny YU.

Financial Summaries

DONOR FUNDS



HWWK 2019 EXPENSES



| EXPENSE | Kes | US\$ |
|-------------------------|--------------------|------------------|
| Personnel | 149,104,564 | 1,491,046 |
| Travel | 13,710,300 | 137,103 |
| Equipment | 1,212,783 | 12,128 |
| Supplies | 21,614,514 | 216,145 |
| Program Costs | 233,351,231 | 2,333,512 |
| Sub - Recipient | 24,316,200 | 243,162 |
| Administration Expenses | 22,351,817 | 223,518 |
| Total | 465,661,409 | 4,656,614 |



HOPE Innovations and Empowerment Company Limited was registered in September 2019. It is a social enterprise that supports the production of school uniforms and work apparel to create employment for vulnerable youth, and will continue to explore innovative opportunities towards sustainability.

HOPE
worldwide
KENYA