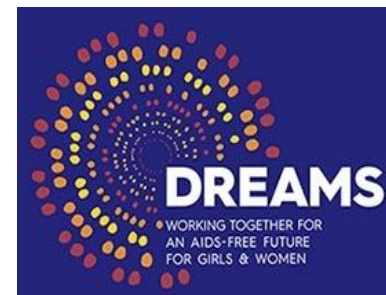


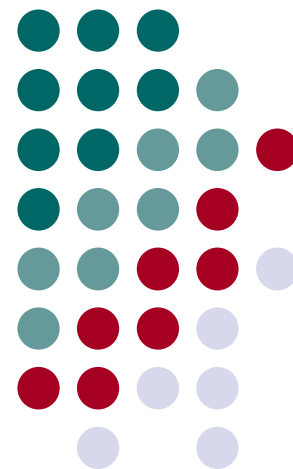
# DREAMS PROJECT



**Zandile Mthembu**  
**Programme Manager**

**AWACC 2016**

**06 October 2016**



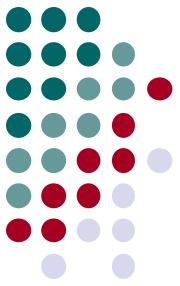
health

Department:  
Health

PROVINCE OF KWAZULU-NATAL

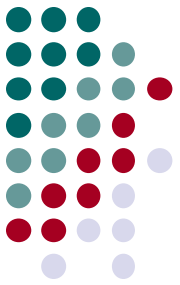


# Presentation outline



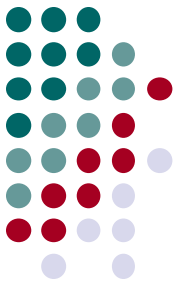
- Background and Objectives
- Implementation Approach
- Interventions/Tools
- Progress
- Conclusion

# QUIZ QUESTION 1



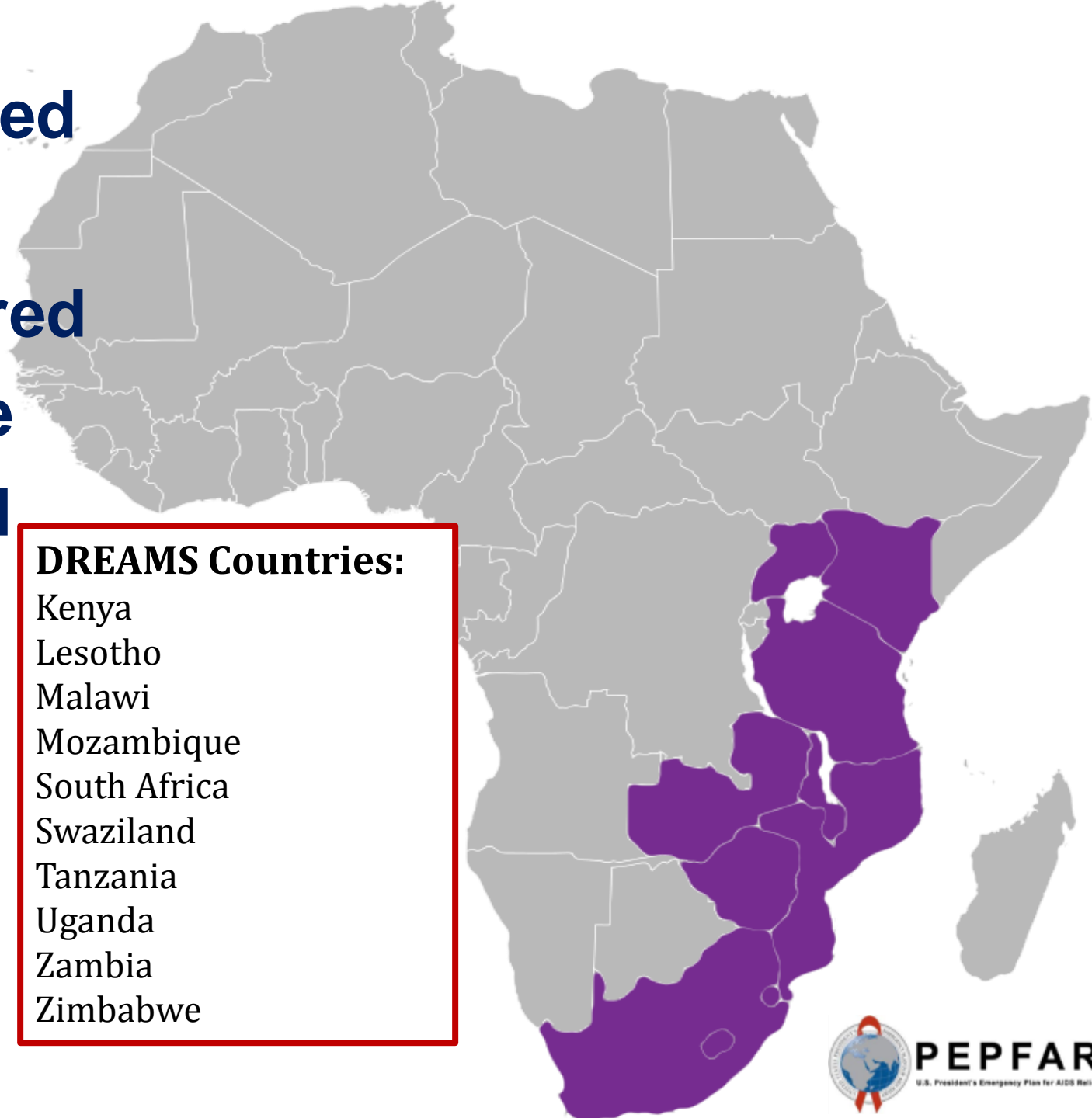
- DREAMS is an acronym for:
  1. Determined, Resilient, Empowered, Matured and Safe AGYW
  2. Determined, Resilient, Empowered, Mentored and Strong AGYW
  3. Determined, Resilient, Empowered, Mentored and Safe AGYW

# Background



- Partnership between PEPFAR, Bill & Melinda Gates Foundation, and Girl Effect
  - Announced on WAD 2014
- 10 eligible countries in Southern & Eastern Africa (ESA) were selected based on HIV burden
  - Plan for DREAMS in SA was developed jointly by PEPFAR, SAG and UNAIDS
  - Coordination by SANAC & DACs

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



**DREAMS Countries:**

- Kenya
- Lesotho
- Malawi
- Mozambique
- South Africa
- Swaziland
- Tanzania
- Uganda
- Zambia
- Zimbabwe

# HIV Leading Cause of Death among AGYW in SSA

In Eastern and Southern Africa, *HIV is the leading cause of death in girls aged 15-19*



Worldwide	%
1 Self-harm	11.1
2 Maternal disorders	8.2
3 Road injury	7.3
4 Malaria	5.3
5 Fire	5.6
6 HIV/AIDS	4.6

Eastern Africa	%
1 HIV/AIDS	15.9
2 Malaria	16.7
3 Maternal disorders	10.3
4 Road injury	5.6
5 Lower respiratory infections	5.0

Southern Africa	%
1 HIV/AIDS	34.6
2 Interpersonal violence	5.3
3 Maternal disorders	5.1
4 Tuberculosis	4.7
5 Lower respiratory infections	4.2

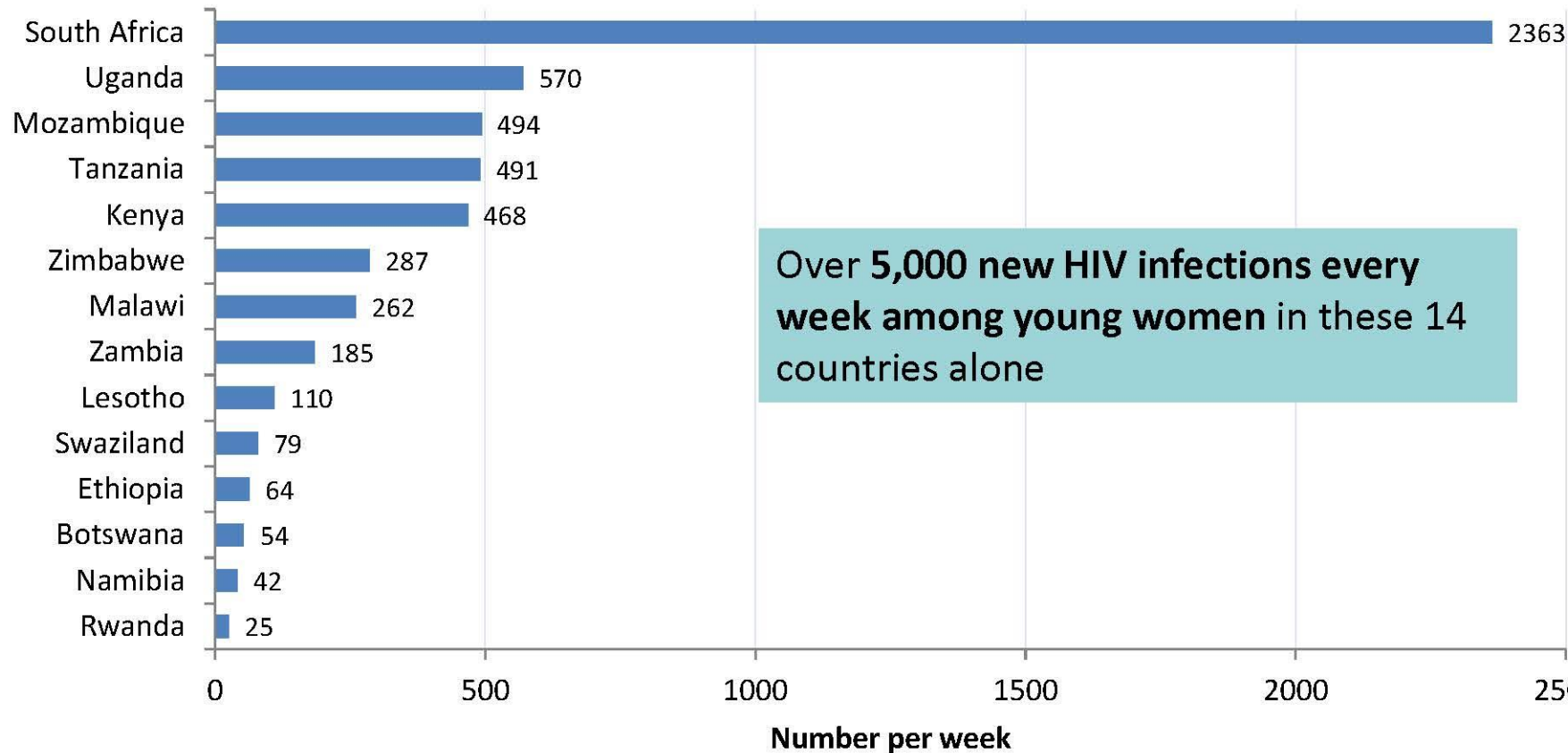
Source: Global Burden of Disease 2010

# HIV Incidence among Young Women

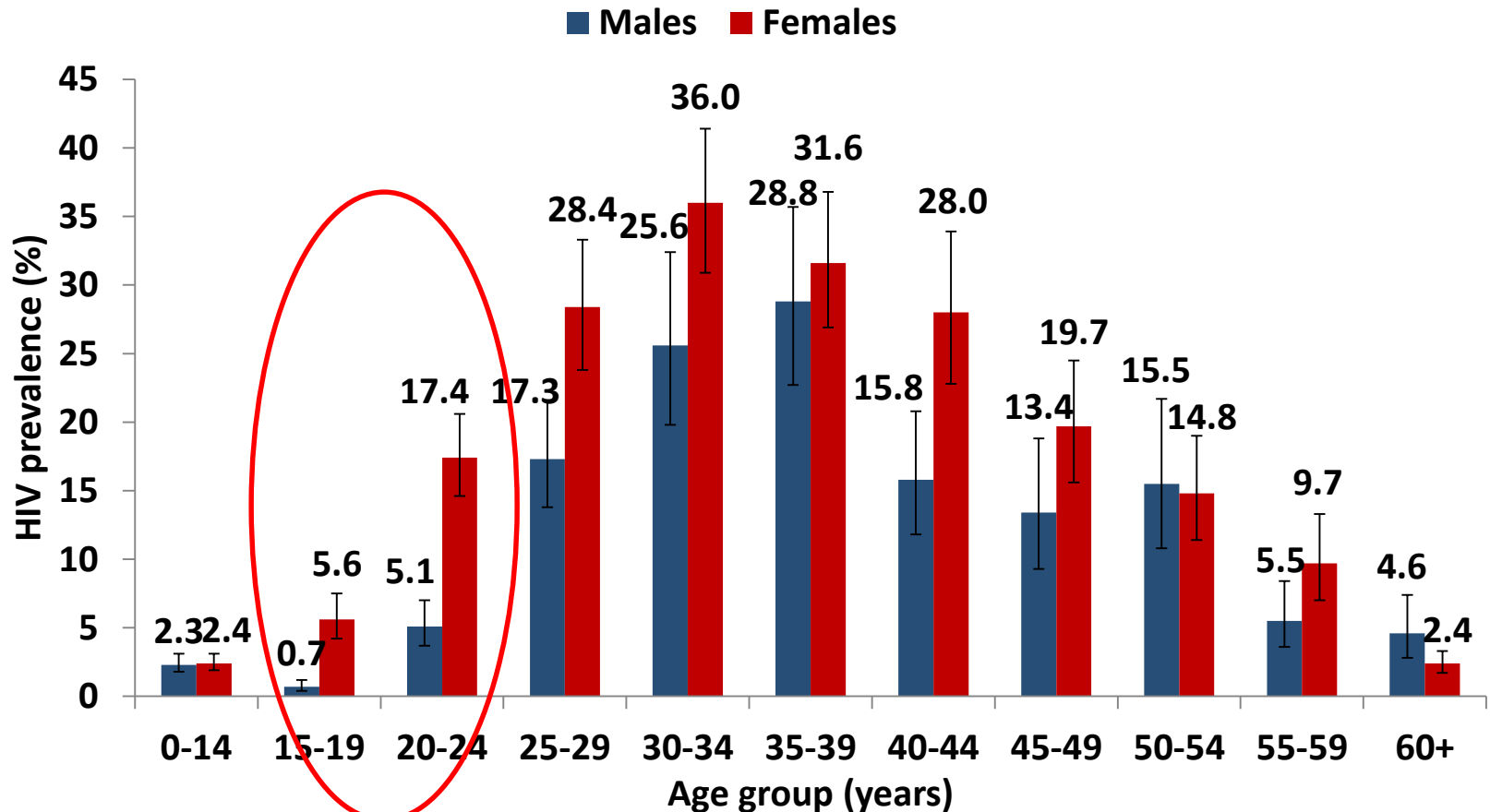
More than 1/3 New HIV Infections Globally Occur among Young Women in Africa

Estimated number of new HIV infections *per week* among young women aged 15-24 years in East and Southern Africa, 2012

Data source: UNAIDS 2013



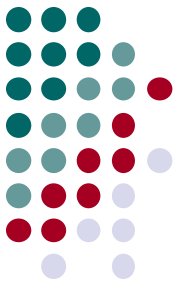
# HIV Prevalence by Age, Gender (2012) in South Africa



Adolescent girls 15-19 are up to 8 times, while young women 20-24 are more than 3 times, more likely to be infected with HIV than their male peers.

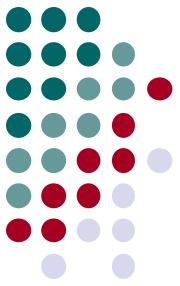


# Aim and Goals



- **Aim**
  - Reach the most vulnerable adolescent girl and young woman (AGYW) and their sexual partners.
- **Goal**
  - Reduce new HIV infections in 15-24 year old AGYW 25% by end of 2016
  - Reduce new HIV infections in 15-24 year old AGYW 40% by end of 2017

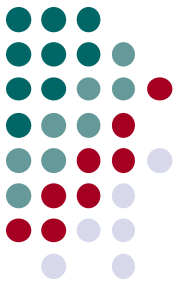
# Project Objective



- **Objective**

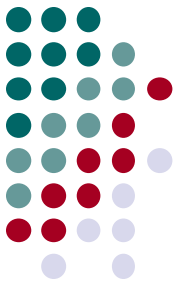
- Improve the lives of AGYW by empowering them and decreasing their risk for HIV
  - Increasing secondary school enrolment, attendance and completion
  - Decreasing violence
  - Decreasing unintended pregnancy

# Target populations



- Adolescent girls 10 – 14yrs
  - In and out of school
- Adolescent girls 15 – 19yrs,
  - In and out of school
- Young women 20 – 24yrs,
  - Including female sex workers
- Male sex partners 20 – 49yrs

# How are we addressing HIV among AGYW?



- Right Places
  - Focus on finding the most vulnerable in the highest burden areas
- Right Things
  - Core package of interventions to prevent HIV infection and address comprehensive needs of girls and young women
- Right Time (Now)!!
  - The population of AGYW growing rapidly – NOW
- Right Way

# DREAMS Approach: Combination Prevention



- Systematic implementation (layering) of evidence based biomedical, behavioral & structural change interventions
  - **Level of intervention:** Individual, familial, community and societal
  - **Relevance and dosage:** Respond to the specific needs of particular audience,
  - **Specificity and sensitivity:** Modes and risks of HIV transmission, and
  - **Coordination & synergistic:** Efficient use of resources through partnership and engagement of affected communities.

# QUIZ QUESTION 2

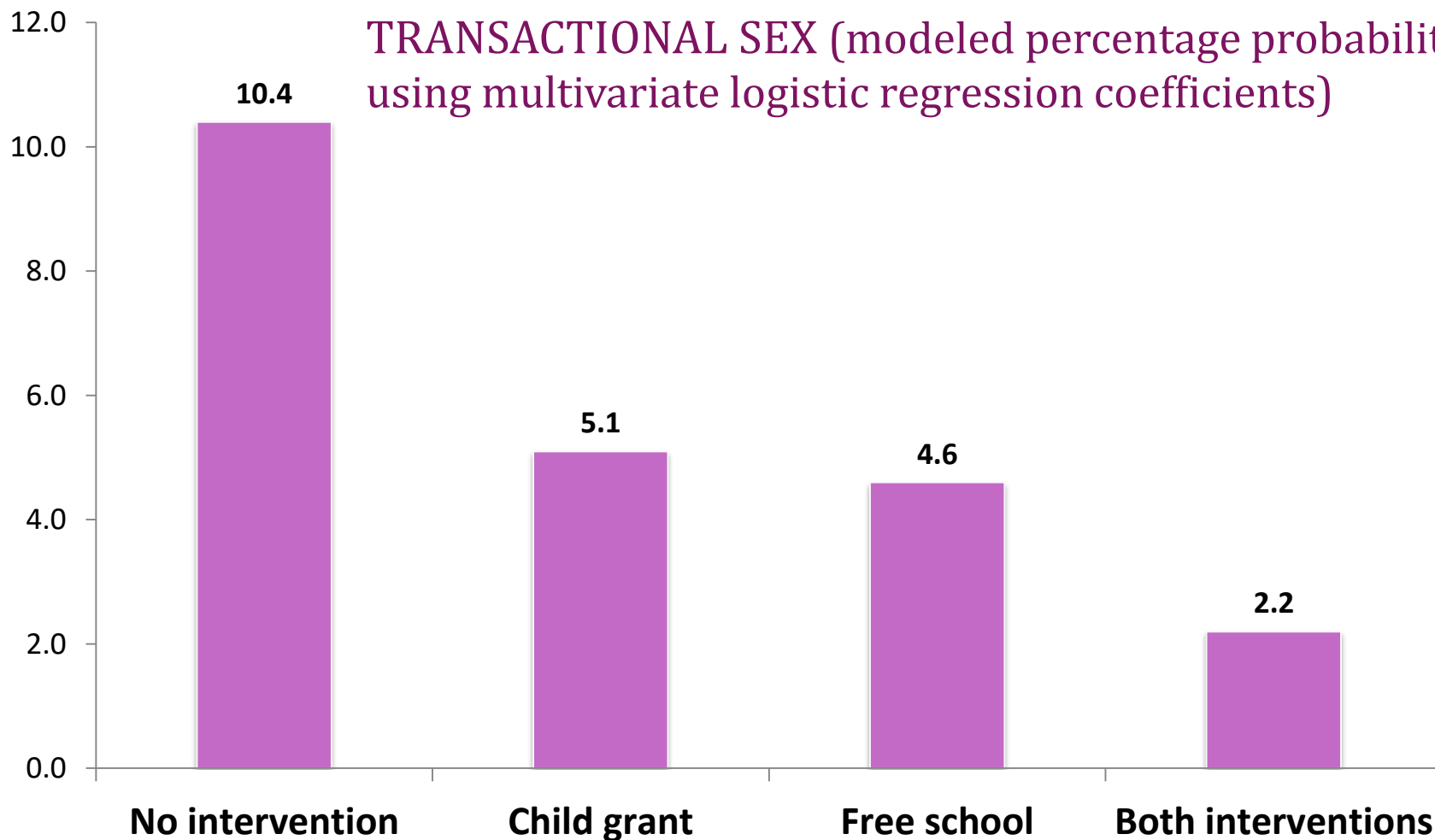


- Combination prevention refers to;
  1. Combining Western and Traditional approaches
  2. Strategic simultaneous use of different classes of evidence-based prevention interventions/tools that operate on multiple levels.
  3. Combined HIV prevention programming for young and old in a given setting.

# How is DREAMS Different?

## The Importance of “Layering” Interventions

FEMALES: % PROBABILITY OF INCIDENCE OF TRANSACTIONAL SEX (modeled percentage probabilities using multivariate logistic regression coefficients)



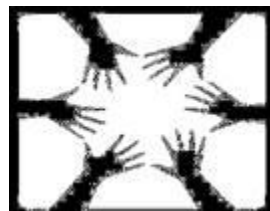
# DREAMS Interventions/Tools



Category & Code	Intervention
Empower Girls and Young Women	<ul style="list-style-type: none"> <li>• Condom promotion and provision (male and female)</li> <li>• HTS with active referral &amp; linkages</li> <li>• PrEP (demonstration project)</li> <li>• Post-violence care</li> <li>• Expand and improve the contraceptive method mix (Comprehensive SRHR Services &amp; strengthen AYFS)</li> <li>• Social Asset Building</li> </ul>
Mobilize Communities	<ul style="list-style-type: none"> <li>• School-based HIV and violence prevention</li> <li>• Community mobilization and norms change</li> </ul>
Strengthen Families	<ul style="list-style-type: none"> <li>• Parenting/Caregiver programs</li> <li>• Social protection                             <ul style="list-style-type: none"> <li>• Cash transfers</li> <li>• Educational subsidies</li> <li>• Combination socio-economic approaches</li> </ul> </li> </ul>
Decrease risk in sex partners	<ul style="list-style-type: none"> <li>• Characterization of male partners</li> <li>• Targeted HTS for male partners (and active linkages)</li> <li>• Condom promotion and provision for male partners</li> </ul>



# DREAMS requires a multi-sectoral approach



**Education**

**Psycho-Social**



**Economic**



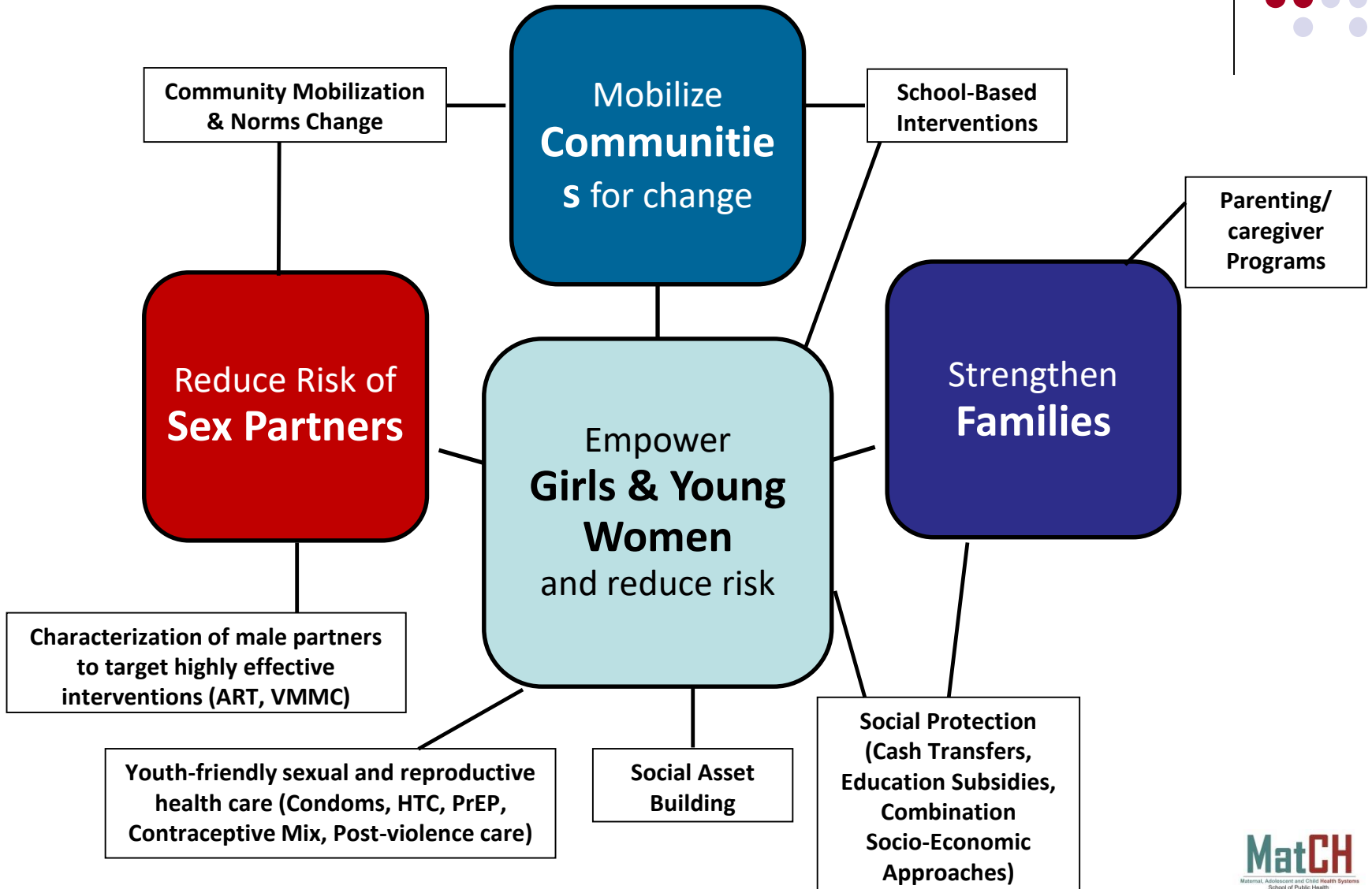
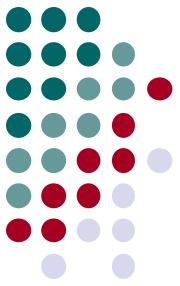
**Health**



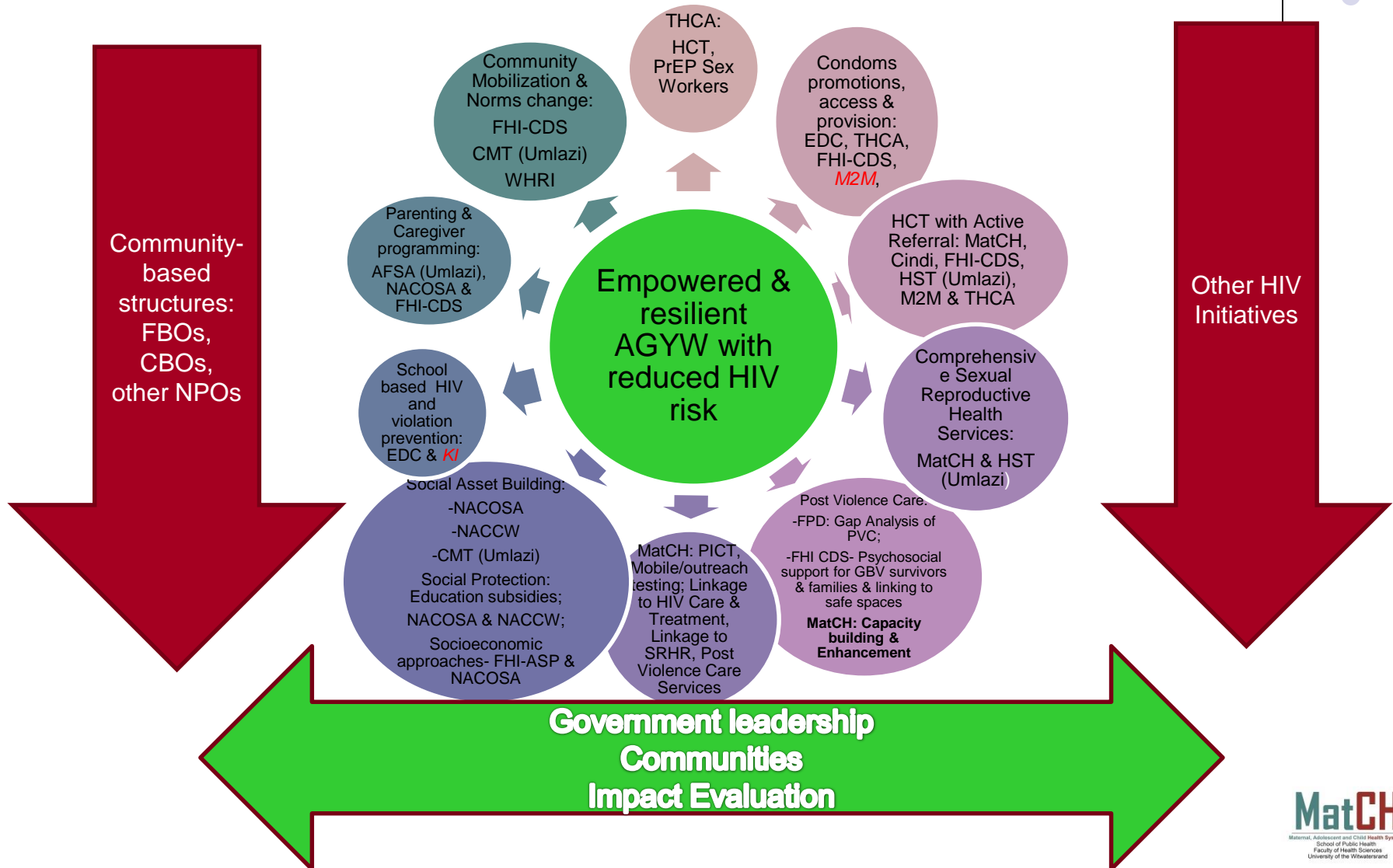
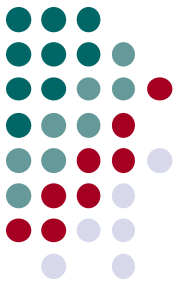
**Community/  
Civil Society**



# DREAMS Core Package



# Partnerships for Layering interventions



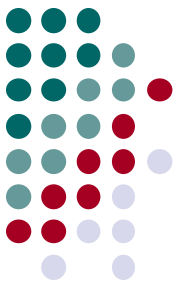


## Quiz Question 3

- In South Africa, DREAMS is implemented in;
  1. 2 provinces, 5 districts
  2. 3 provinces, 3 districts
  3. 5 provinces, 5 districts
  4. 1 province, 6 districts

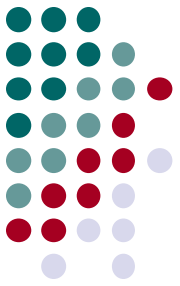


# Criteria for District, sub-district and ward selection



- Epidemiological data
- A combination of rural and urban areas
- Presence of hotspots
- Existence of functional sub-national coordination structures (e.g. Operation Sukuma Sakhe in KwaZulu-Natal [KZN] and Tirisano in Gauteng Province [GP])<sup>1</sup>

# DREAMS MER



- Population level surveillance through DIMES
- Male characterization study
- Impact Evaluation
- Implementation Science: AGYW Male Study

# MatCH DREAMS Project update (1)

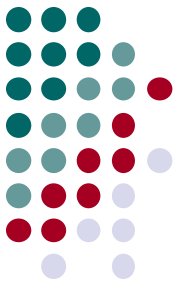


- Implementing activities in eThekweni and uMkhanyakude districts
- 25 facilities in eThekweni Metro
- 16 Facilities in uMkhanyakude district
  - Mtubatuba and Hlabisa sub-districts

Objective	Intervention
Empower Girls and Young Women	<ol style="list-style-type: none"><li>1. HTS with active linkage to Pre-ART</li><li>2. Post-violence care</li><li>3. Expand and improve the contraceptive method mix (Comprehensive SRHR Services)</li></ol>
Decrease risk in sex partners	<ol style="list-style-type: none"><li>4. Targeted HTC for male partners (and linkages)</li></ol>



# MatCH DREAMS Project Update (2)

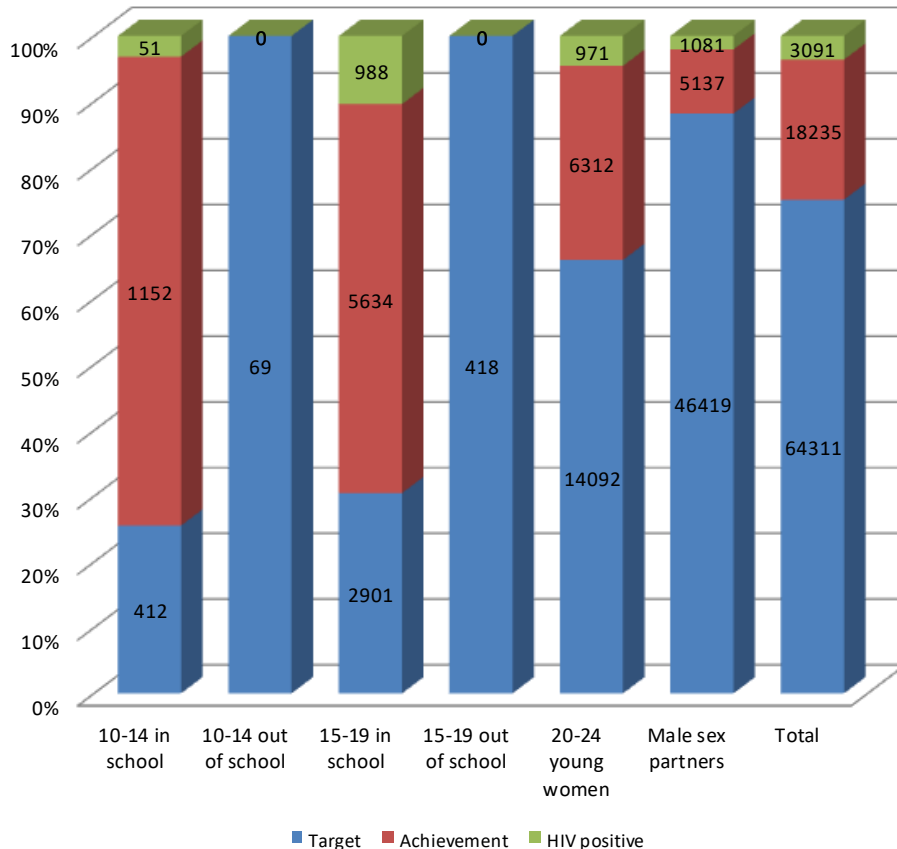


- DREAMS pre-program implementation baseline assessment
  - 1858 household interviews conducted to understand program barriers and enablers;
    - HIV Testing
    - PVC
    - Sexual and reproductive health
- Capacity Building Activities
  - Adolescents and Youth Friendly Services
  - SGBV/Post-Violence Care Services

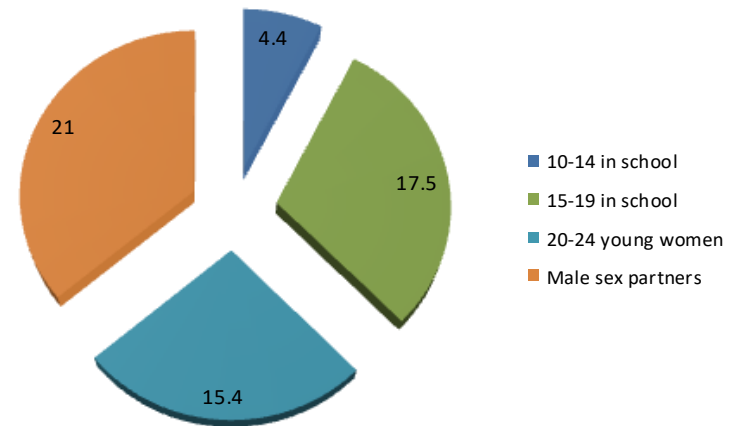
# HTS Achievements: EThekwin



**EThekwin District HTS Achievements  
vs Assigned Targets**

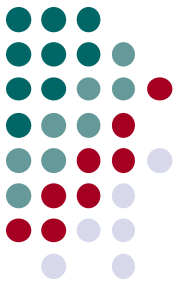


**EThekwin District Positivity rate**

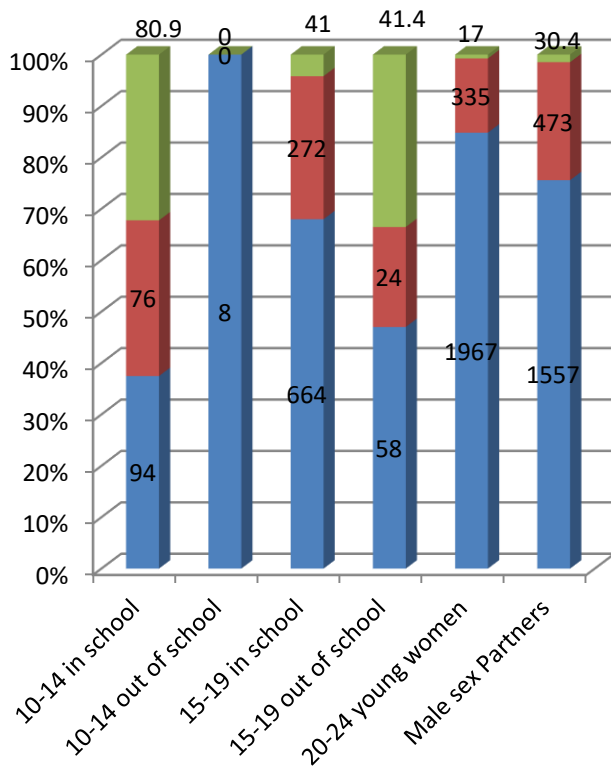


- **21% HIV positivity** → in Male Sex Partners,
- **17.5%** → Adolescent girls 15-19 (
- **15.4%** → 20-24
- **Achieved linkage rate: 96%**

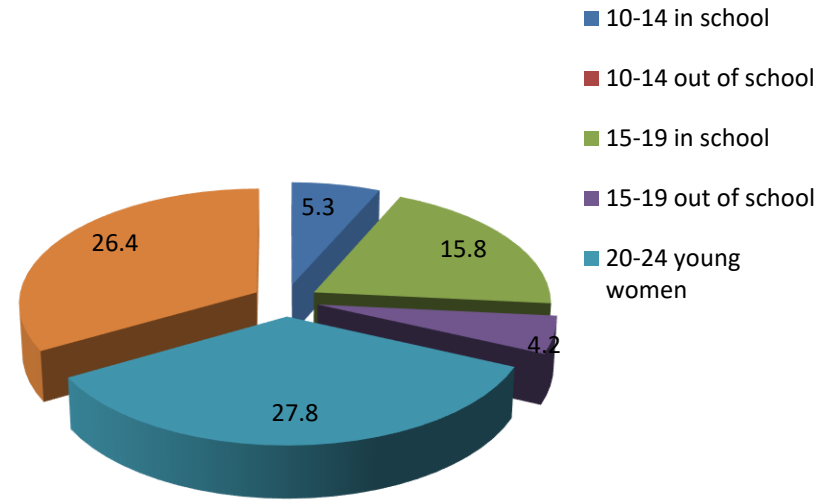
# HTS Achievements: uMkhanyakude



## Achievement vs targets

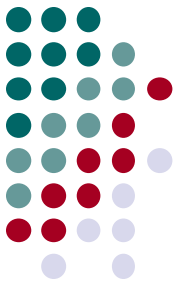


## HTS Positivity

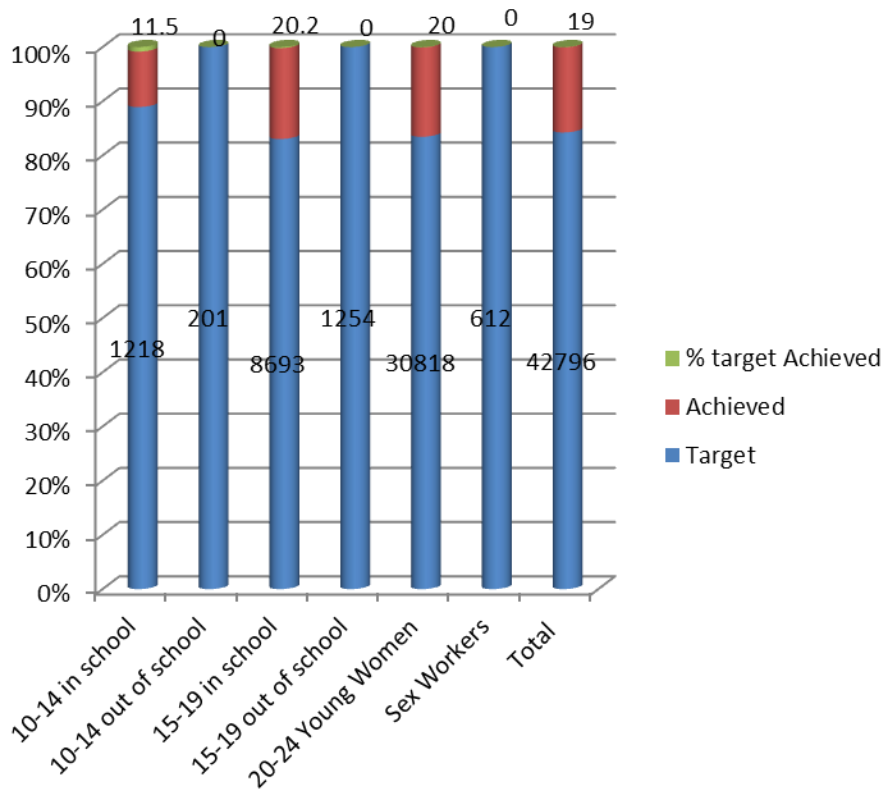


- 26.4% HIV Positivity → male sex partners
- 27.8% → 20-24
- 15.8 → 15-19 in school

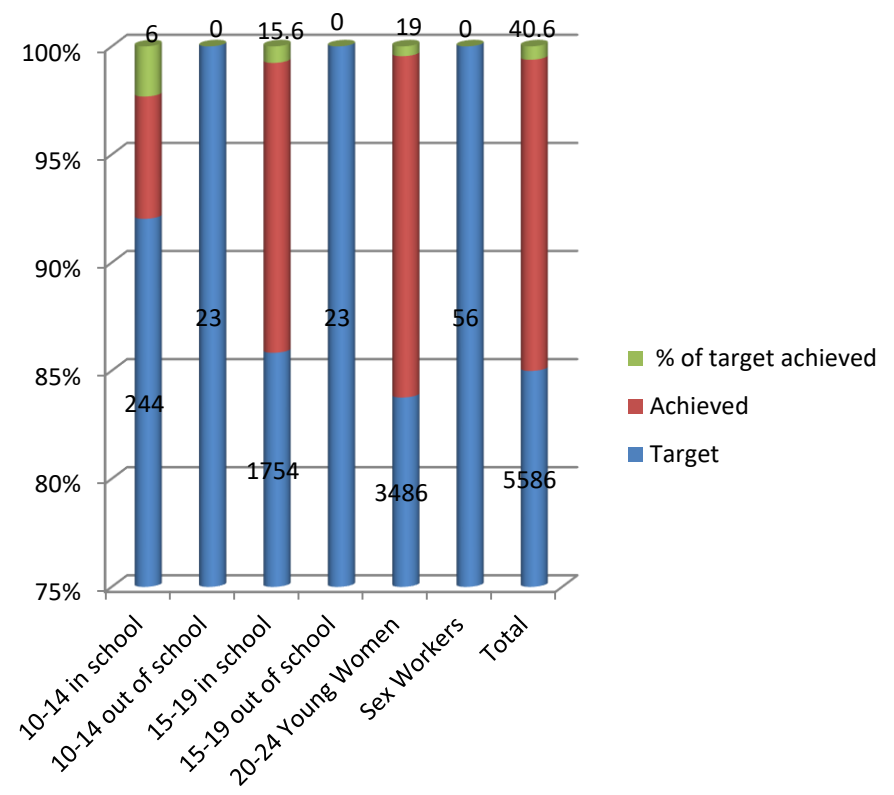
# Comprehensive SRHR



## EThekweni



## UMkhanyakude



# Clients Tracking and Linking



- DREAMS Passport
  - Works similar to Road to health booklets
  - Documents linkages
- DREAMS patient file identifiers
  - Stickers: simplification of file retrieval
- Data clean-up process on a daily basis
  - Real time data using tablets per provider
  - Site level data collation on a daily basis

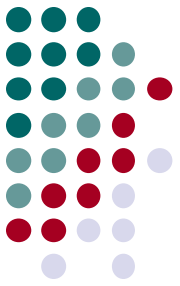


# Conclusion

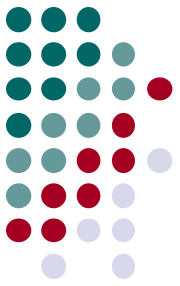


- Delay in program implementation
  - Extensive mapping and stakeholder consultation conducted
- Lessons from DREAMS will be used to benchmark future AGYW investments and programming
  - Expansion and sustainability??

# Acknowledgements



- Colleagues and collaborators at MatCH Systems.
- DREAMS Collaborators
- Funding support from USAID, PEPFAR



**Thank you!**