



Differentiated Service Delivery for Key Populations

Virtual Meeting: August 25-26 and 30-31, 2021

Monitoring and Evaluation for Key Populations in Kenya

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National AIDS and STI Control Programme
(NAS COP)

26 August 2021

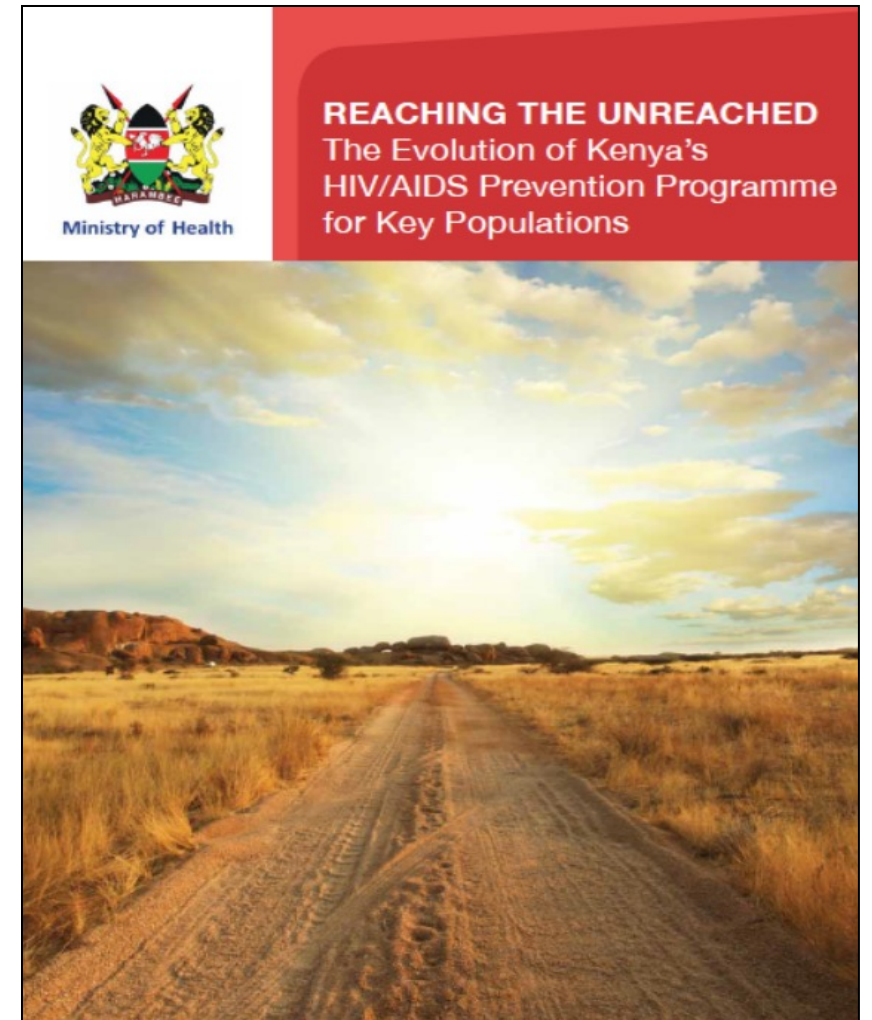


HIV Learning Network
The CQUIN Project for Differentiated Service Delivery



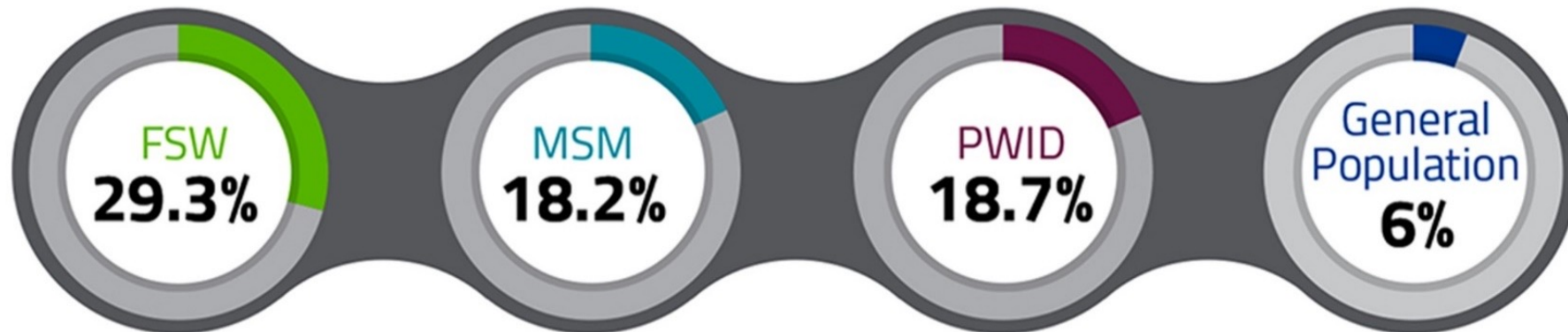
The Key Population Programme: at a Glance

- Led by Ministry of Health (MOH) - NASCOP and NACC since 2008, provides strategic direction, technical support and coordination, and evidence; sets standards; mobilises resources, and establishes an enabling environment
- Technical Support Unit implemented by UoM established to support scale-up of interventions in 2012
- Funding through MOH, PEPFAR, GFATM, and other funders to 95 implementing partners (IPs) in 36 counties
- MOH leadership instills confidence in IPs to implement a prevention programme for KPs, though sex work, same sex relationship and drug possession and use are criminalized in Kenya



Role of Key Populations in Kenya

- Kenya Modes of Transmission study (2008) identified key populations as groups disproportionately affected by HIV, contributing to 33% of all new infections
- IBBS results (2010), showed a higher burden of HIV among key populations, prevalence 3–5 times higher than the general population
- Population size estimates in 2012 estimated considerable number of FSW, MSM and PWID in the country

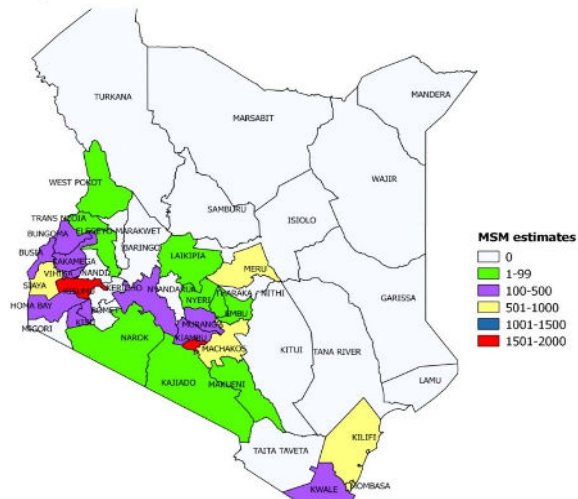


Estimating the Size of the Population

- Used the evidence to advocate with stakeholders within the government and outside including funders
- Developed a scale up plan using the population size estimates of 2012. Mapping and size estimated repeated in 2018.
- Developed national guidelines and standards to ensure quality implementation
- Set up coordination and management structures

ESTIMATES

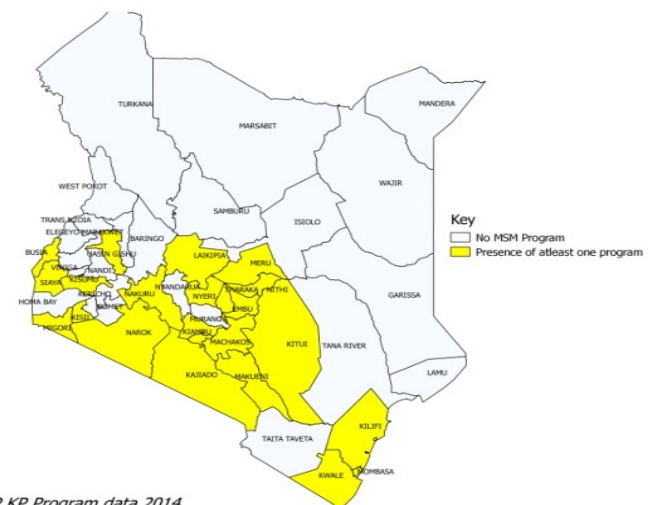
County Estimates of Men Who have Sex With Men



Source: Geographic Mapping of Most at Risk Populations for HIV (MARPs) in Kenya, 2012

IMPLEMENTATION

County Distribution of MSM Programs



Source: NASCOP KP Program data, 2014

New Mapping Information leads to Innovation

- Evidence around MSM seeking partners in virtual spaces necessitated mapping and size estimation of MSM in virtual sites
- Virtual mapping (2018) indicated that 25% of MSM use virtual sites to meet sexual partners.
- This led to designing and piloting intervention in selected counties to reach out to MSM who seek partners in virtual spaces
- Evidence of young KP established during Mapping and size estimation in 2018 facilitated development of Young KP guidelines to programme with Young key populations



Number of MSM who used virtual sites by county

KISUMU	MOMBASA	KIAMBU
1567	1469	3635

Data Sources in the Kenya KP Programme



Mapping of IP and Development of Reporting Tools



CQUIN Key Populations Meeting, August 25-26 and 30-31, 2021

Mapping of Implementing Partners

- NASCOP mapped all the KP implementing partners in the country in 2012

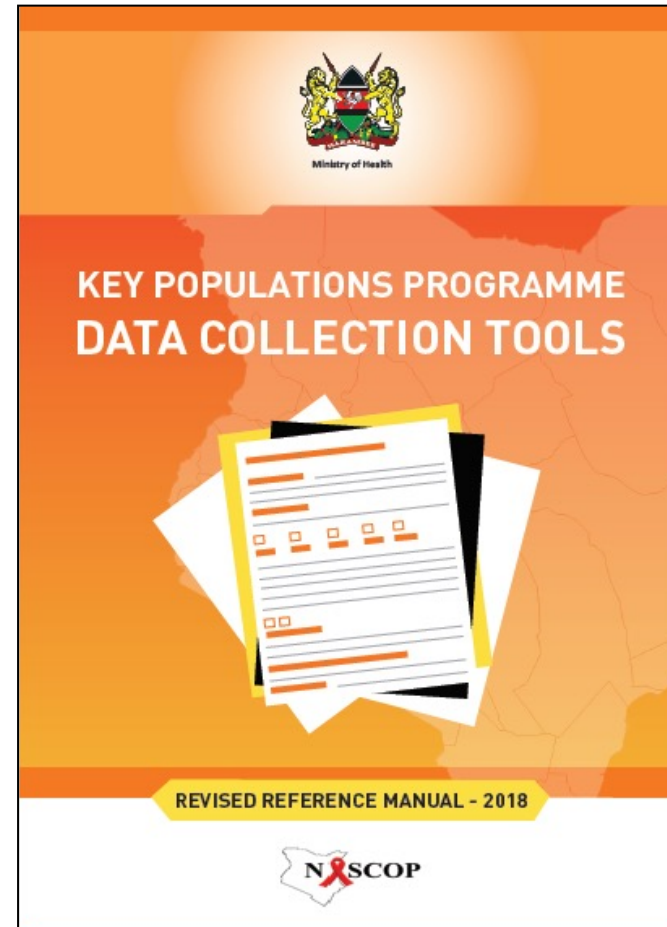
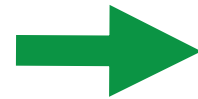
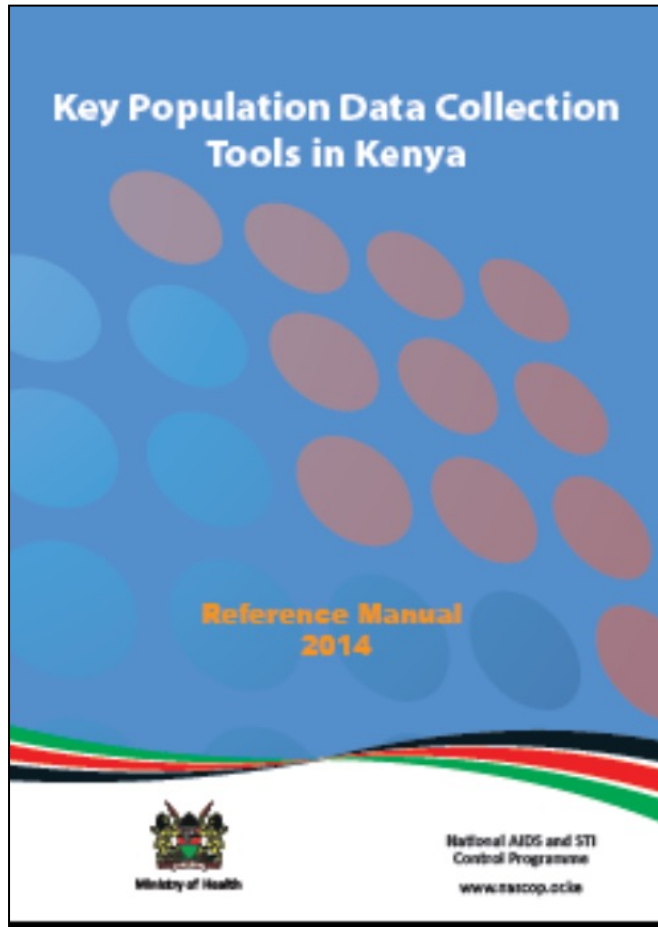
Development of Reporting Tools

- Developed a set of KP reporting tools in 2014 partnership with
 - Members of key populations
 - Donor agencies
 - Implementing partners
- Tools were revised in 2018

Output

- 22 data collection tools
- Monthly and quarterly tools
- 100% reporting since 2014

Ensuring Uniform Understanding of the Tools and Indicators



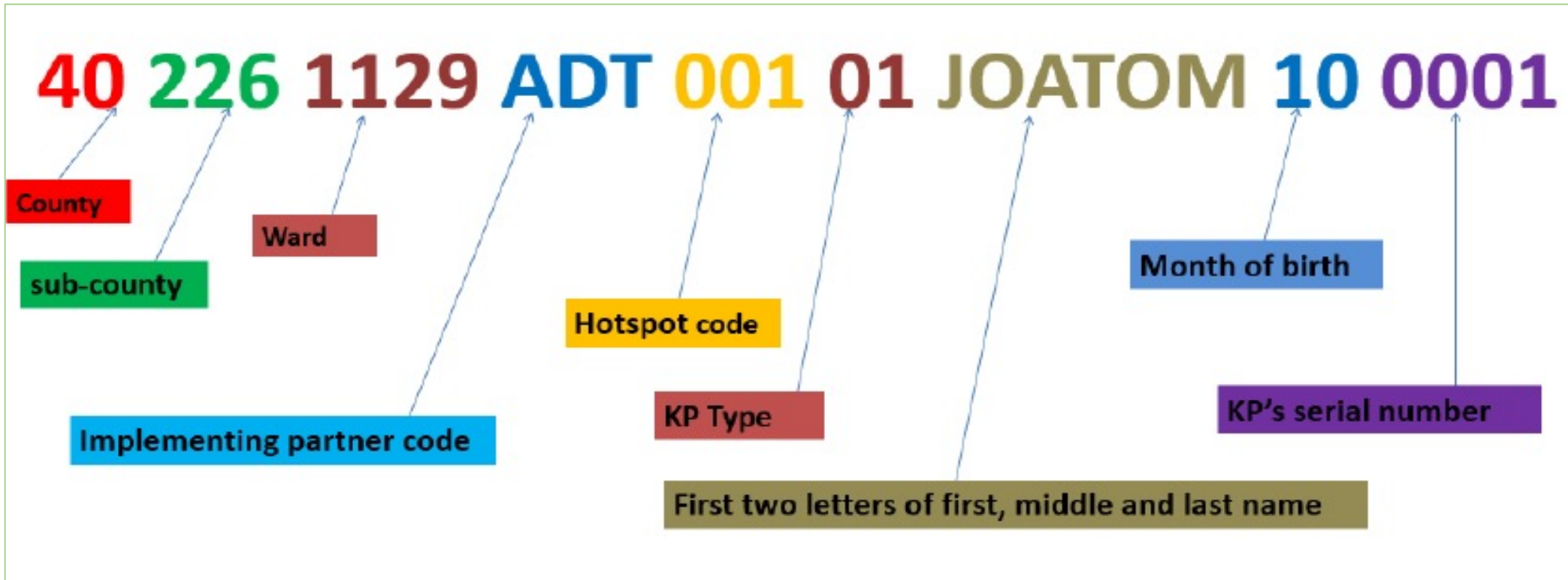
Series of Trainings Conducted

- Definition of indicators and variables
- Responsibility of various staff cadres in tool completion
- Periodicity of filling the tools

Quality of Reporting Checked

- Desk review on receipt of reports
- Regular RDQA
- Analysis and sharing of data to the IPs and County and national managers
- Presentation of data in TWG and COE

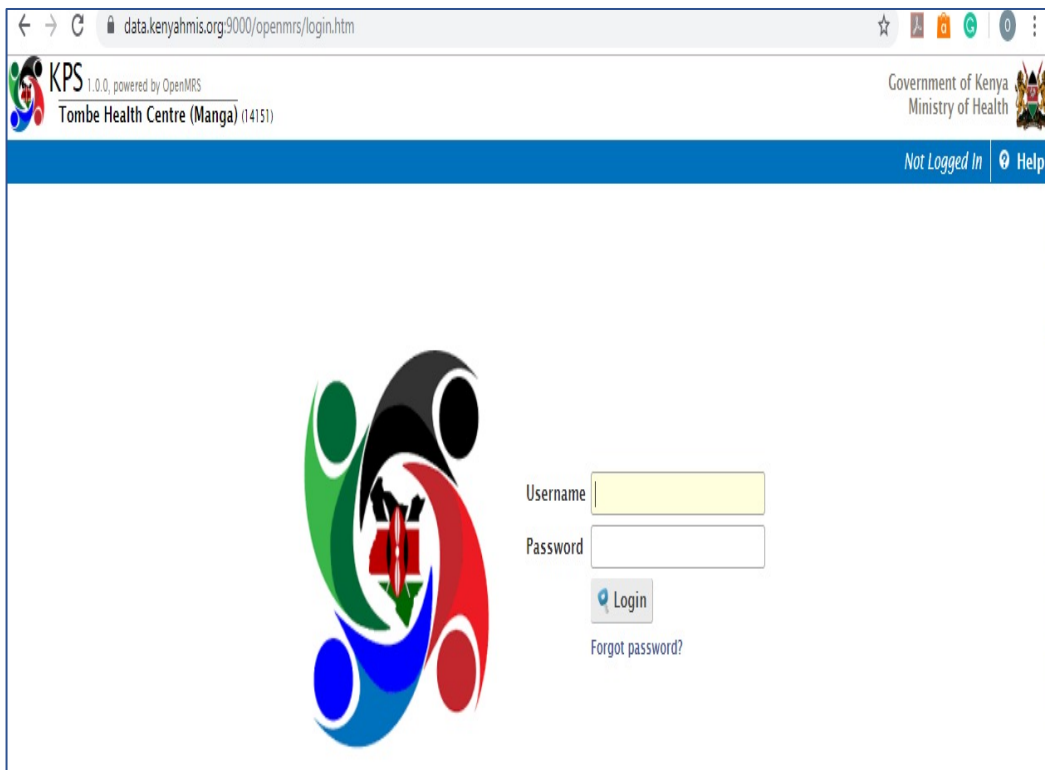
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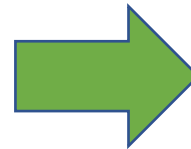
Source: UIC guidance note, NASCOP

One National Reporting System

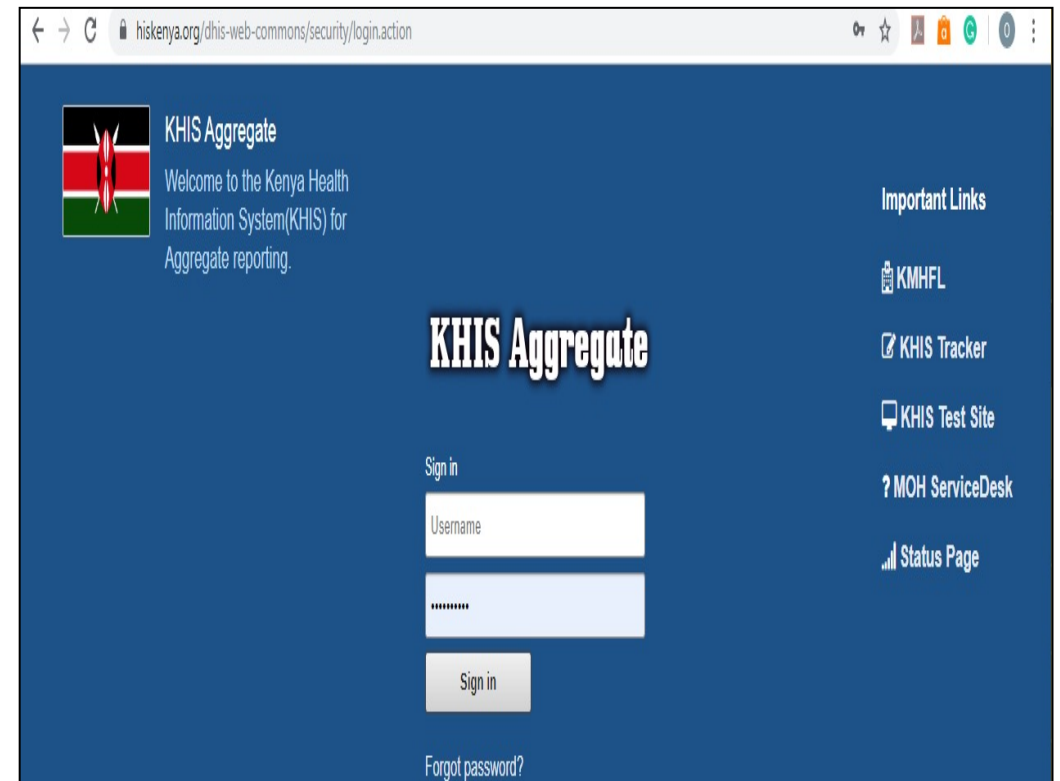
Data Management: Kenya Electronic Medical Record System (Kenya EMR)



The screenshot shows the login page for the Kenya EMR system. The browser address bar displays 'data.kenyahmis.org:9000/openmrs/login.htm'. The page header includes the KPS logo (1.0.0, powered by OpenMRS) and the text 'Tombe Health Centre (Manga) (14151)'. On the right, it says 'Government of Kenya Ministry of Health' and 'Not Logged In Help'. The main content area features a large logo on the left and a login form on the right with fields for 'Username' and 'Password', a 'Login' button, and a 'Forgot password?' link.

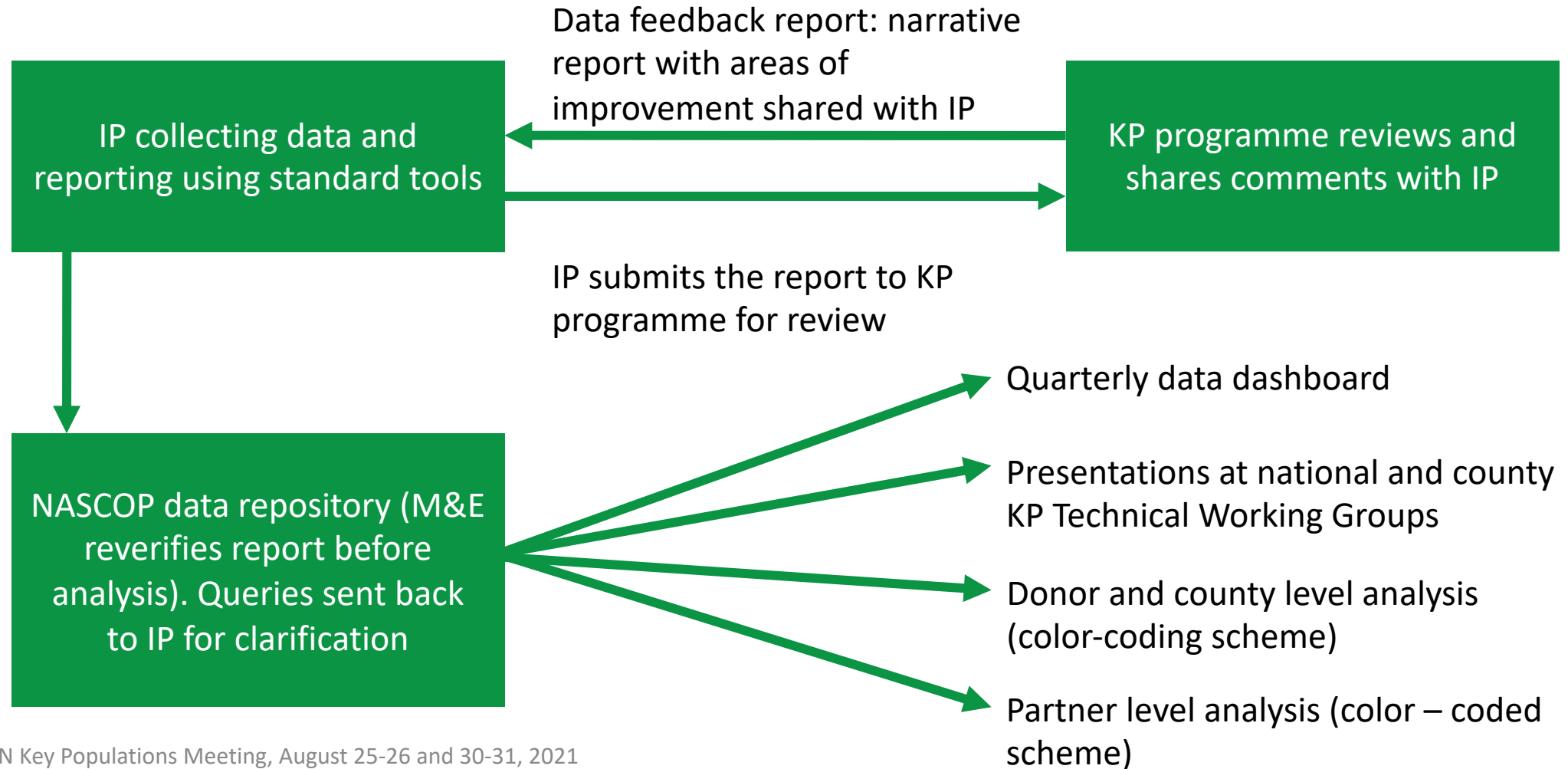


Reporting through Kenya Health Information System (KHIS)



The screenshot shows the login page for the KHIS Aggregate system. The browser address bar displays 'hisenya.org/dhis-web-commons/security/login.action'. The page header includes the Kenyan flag and the text 'KHIS Aggregate' and 'Welcome to the Kenya Health Information System(KHIS) for Aggregate reporting.'. On the right, there is a section for 'Important Links' with links to 'KMHFL', 'KHIS Tracker', 'KHIS Test Site', 'MOH ServiceDesk', and 'Status Page'. The main content area features a large 'KHIS Aggregate' logo and a login form with fields for 'Username' and a password field (masked with dots), a 'Sign in' button, and a 'Forgot password?' link.

Routine Monitoring System: National Reporting and Feedback Framework



Analysis and Information Use: Hotspot Levels to IP level to sub national and national level by sub population

Analysis at hot spot level

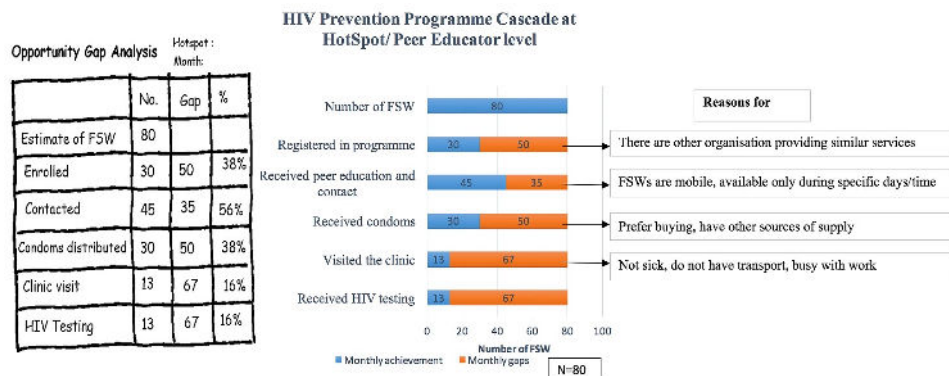
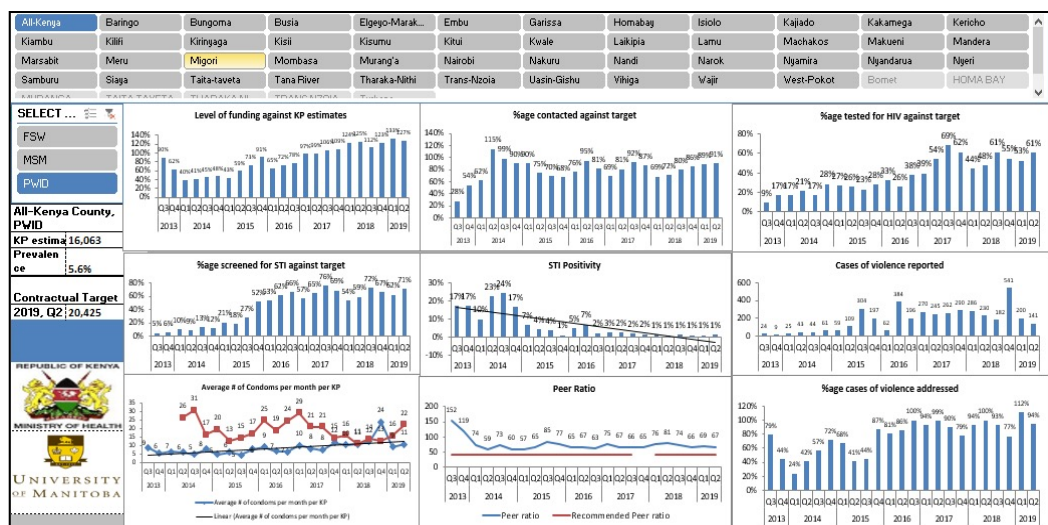


Figure 3: HIV Prevention Programme Cascade for Implementation Partner at Hot Spot level, Learning Site, Nairobi

Implementing Partner-level analysis: color coded based on performance

Row Label	Peer ratio	% contacted	average condoms	% STI screening	STI positivity	HIV Testing	HIV Positivity	Total tested positive	Currently on ART	Linkage to ART	Cases of violence addressed	Lubes distributed	Average needle exchange meetings	Number of KPs who have been on care for more than 6 months and have	Number of KPs with Viral load results	Number of KPs on ART with viral load suppression	
BHESP	105	87%	33	39%	3%	35%	2%	15853	10655	87%	4650	89%	201855	252	7275	6892	6429
EGPAF	68	90%	15	34%	5%	48%	8%	358	358	100%	84	100%	639	1	140	136	
HWWK	104	90%	31	80%	3%	45%	1%	832	934	112%	225	54%	1263	7	836	798	
IFDD	84	65%	14	35%	3%	32%	2%	2371	1763	75%	751	110%	78	1	1494	1333	
KVC	83	94%	35	73%	3%	33%	0%	2871	2010	70%	50	100%	0	688	652	477	
LVCT	144	77%	35	28%	4%	25%	2%	203	51	25%	19	100%	0	19	19	19	
Manlyand	72	81%	54	52%	3%	42%	3%	3251	1823	56%	878	100%	179	5	1124	976	
NORTHSTAR	104	71%	55	60%	3%	64%	2%	268	125	47%	11	100%	946	3	36	36	
SWOP	84	37%	74	63%	5%	50%	1%	773	519	67%	188	10%	198744	1	434	431	
CHS	201	102%	10	23%	2%	30%	1%	4252	2676	63%	2369	81%	0	219	2206	2004	
GF	98	54%	28	54%	4%	58%	2%	674	376	56%	75	100%	0	10	247	244	
BHESP	77	101%	53	96%	2%	88%	0%	2316	2077	90%	223	103%	0	19	963	974	
HWWK	62	100%	40	10%	1%	98%	0%	277	252	91%	105	98%	0	24	19	18	
IFDD	72	96%	69	90%	3%	91%	0%	489	468	96%	7	214%	0	3	402	361	
KANCO	52	91%	51	91%	5%	58%	2%	7	16	223%	1	100%	0	3	338	334	
NAK	75	105%	57	102%	5%	96%	0%	162	150	93%	66	100%	0	64	105	90	
NOPE	81	96%	38	81%	3%	58%	2%	141	134	95%	14	100%	0	20	18	18	
TEENSWATC	80	104%	39	93%	1%	74%	1%	57	42	74%	7	100%	0	24	24	24	
REACHOUT	70	100%	58	88%	2%	74%	0%	46	44	96%	12	100%	2	23	2	2	
ADEO	80	101%	30	97%	0%	96%	0%	147	127	86%	0	100%	0	23	22	18	
NEPHAK	73	95%	39	82%	1%	81%	0%	84	64	100%	0	100%	0	42	42	42	
UMFPA	86	76%	27	49%	7%	49%	1%	78	72	92%	19	97%	63	45	35	30	
ICRH	86	76%	27	49%	7%	49%	1%	78	72	92%	19	97%	63	45	35	30	
USAID	103	78%	41	28%	3%	23%	2%	3371	2898	86%	632	97%	1163	16	600	565	
ACE AFRICA	101	75%	50	15%	1%	1%	1%	116	113	97%	51	100%	0	39	39	39	
ADT	85	98%	34	46%	6%	4%	1%	125	117	94%	33	100%	0	20	20	20	

National/Sub national dashboard



- Help identify national, sub national, implementation partner and hotspot level gaps and opportunities for each sub population
- Informs development of strategies to address gaps
- Prioritizes counties and IPs for technical support

Conducting Annual Surveys to Measure Outcomes

- The KP programme conducts annual surveys to measure outcomes using Polling Booth Survey Methods
- This data is used to understand programme outcomes like condom use, PrEP use or prevalence of violence at the population level
- Monitoring data and survey data is used to develop prevention and treatment cascades at subpopulation and county levels to understand programme gaps and develop strategies to address the gaps

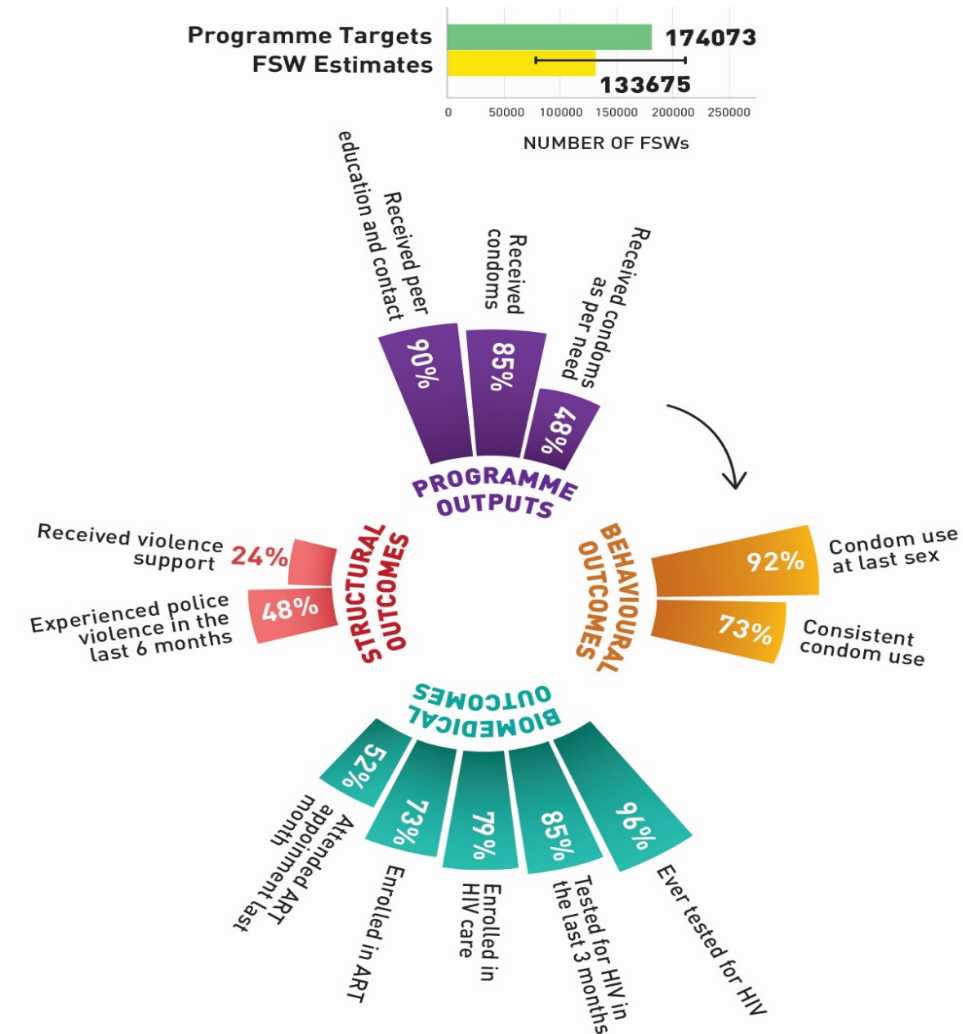
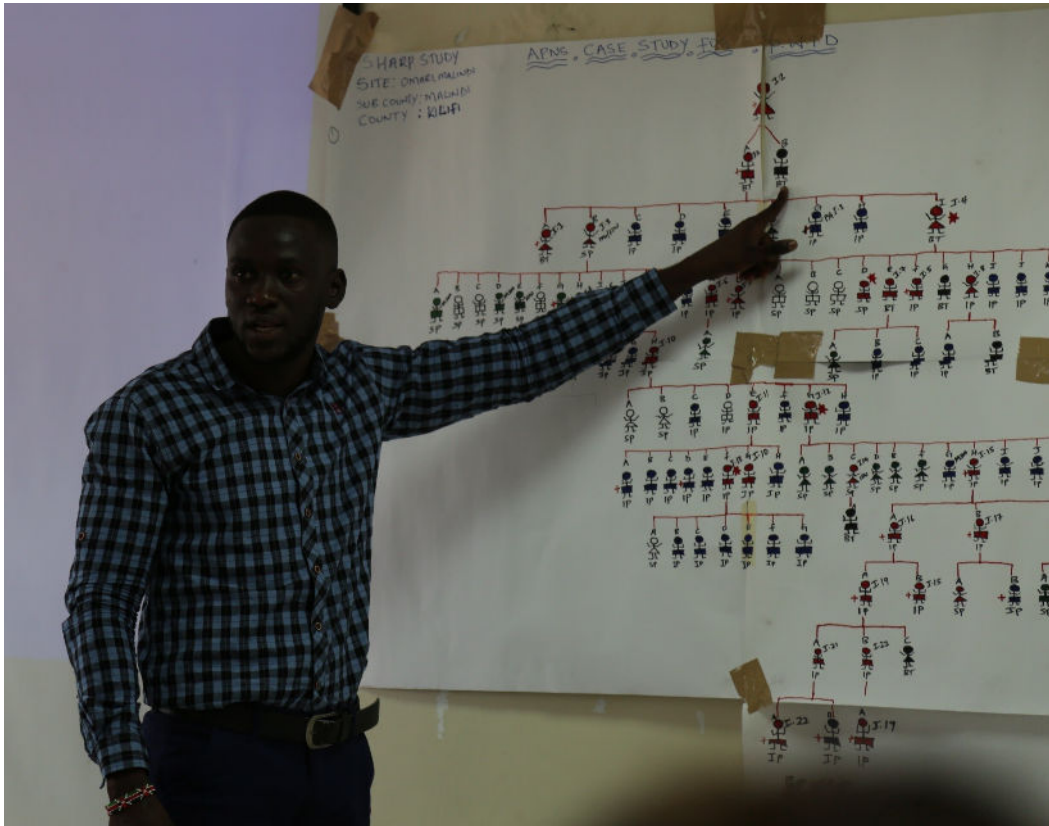


Figure 1: HIV Prevention Programme Cascade for FSW at National Level

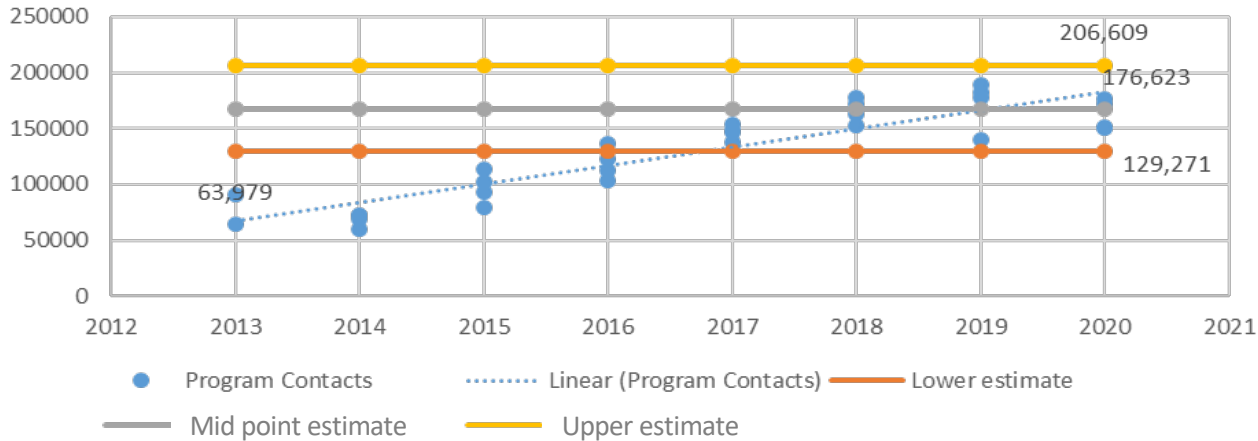
Coordination and Management



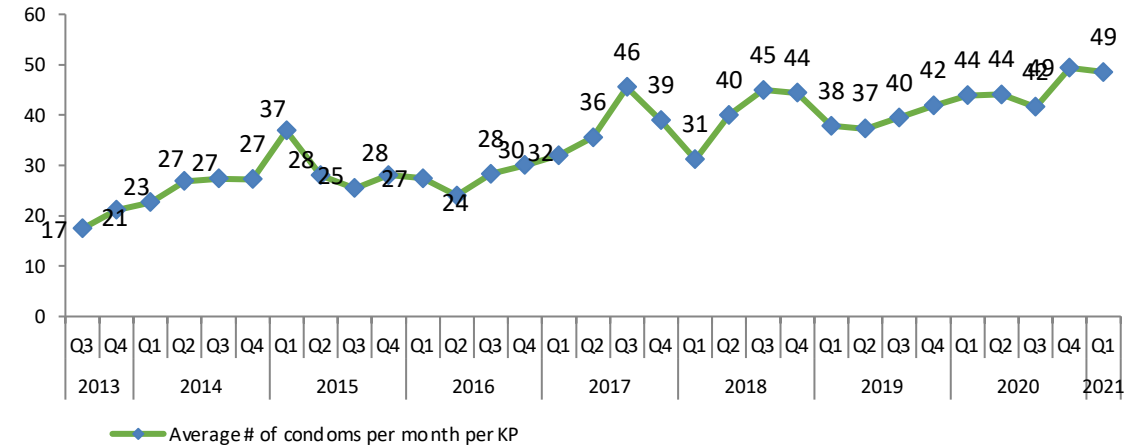
- At the national level, a M&E sub-committee has been formed to coordinate the monitoring and evaluation issues.
- Chaired by NASCOP, member representation is drawn from :
 - Donor agencies
 - Members of key populations
 - Implementing partners
- The Sub Committee reports to the national KP TWG
- The sub committee supports technical decisions related to reporting tools and guidelines, analysis of data, development of protocols etc.

Quick Gains in Coverage : FSW Programme Data — 2013 to 2020

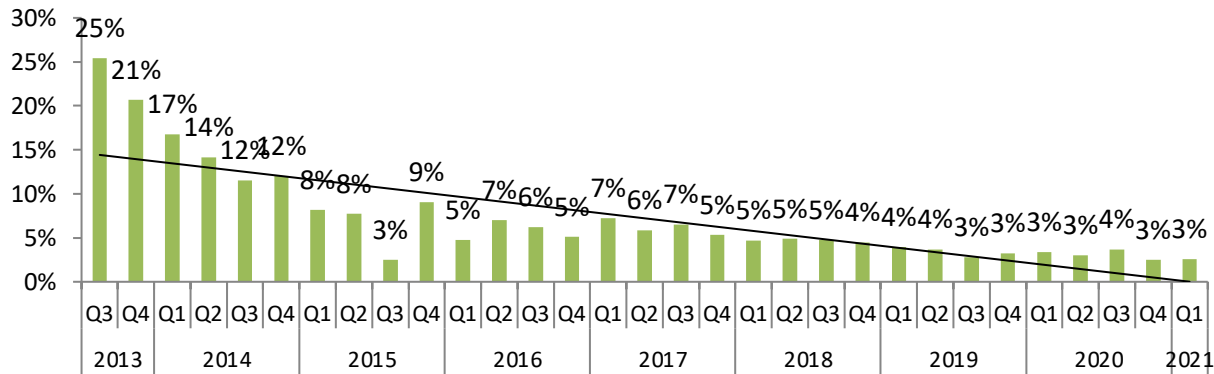
Program contacts per quarter



Average # of Condoms / Needles and syringes per month per KP



STI Positivity



- Improvement in peer ratio
- Increase in programme contacts
- Increase in number of condoms/new needles distributed
- Increase in HIV testing and STI screening
- Increase in reporting and addressing of violence
- Reduction in STI cases

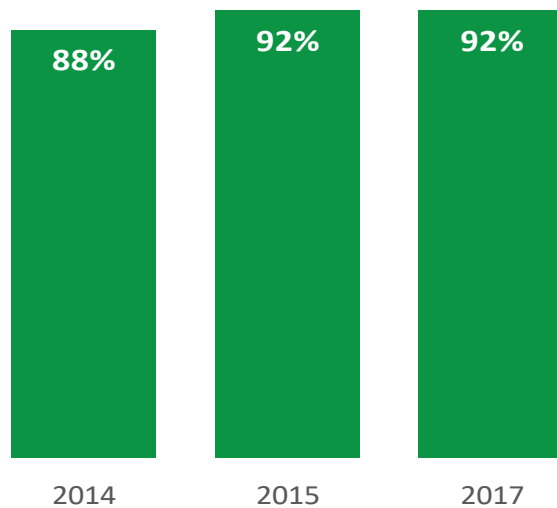
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Source: NASCOP Quarterly reports, 2020

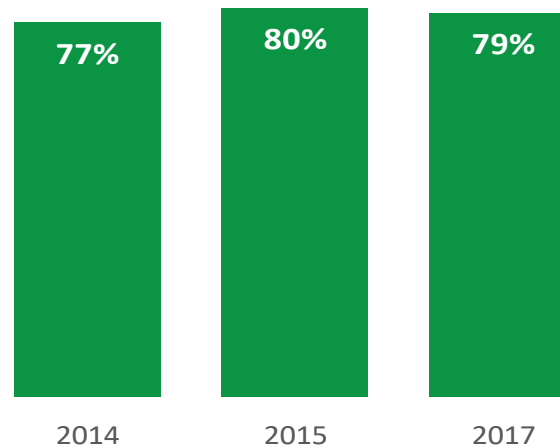
Progressing towards achieving Global Targets

- The annual outcome survey shows that condom use or needle use has either increased or maintained
- HIV testing and linkage to ART has also increased
- Though prevalence of violence has reduced among MSM, it is still high among FSW and MSM

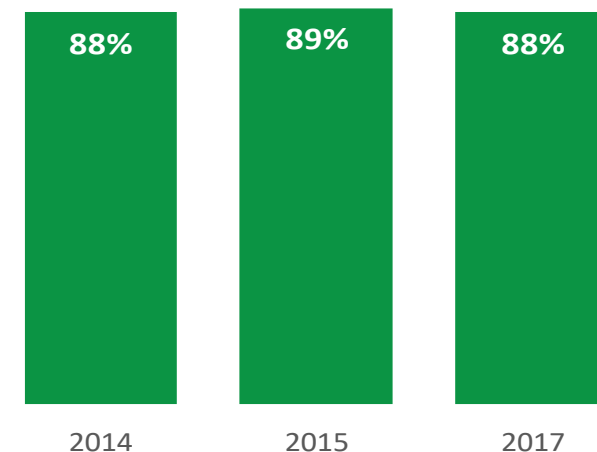
Proportion of FSWs who used a condom at last paid sex



Proportion of MSM who used a condom at last anal sex



Proportion of PWID who used a new needle at last injection episode



Thank you

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