COUNTRY PROFILE*

**Population**
44,354,000

**Number of people living with HIV**
1,517,707

**Adult (15-49 years of age) HIV prevalence**
5.9%

**Women (15 years and older) living with HIV**
825,024

**New HIV infections (15 years of age and older)**
71,034

**HIV-related deaths (15 years of age and older)**
30,817

**Mother-to-child HIV transmission rate, at breastfeeding cessation**
8%

**Children (0-14 years of age) living with HIV**
98,170

**AIDS-related deaths in 2015**
30,817

**Orphans due to AIDS (0-17 years of age)**
660,000

* Sources: Joint United Nations Programme on HIV and AIDS (UNAIDS), Kenya HIV and AIDS estimates (2015)

** Data as of June 2016

**EGPAF IN KENYA**

The Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) began working in Kenya in 2000. The program started as a small, privately-funded prevention of mother-to-child HIV transmission (PMTCT) initiative and has since grown into one of the largest HIV prevention, care and treatment programs in the country. EGPAF-Kenya aims to implement sustainable programs that support Kenya’s government toward its mission to end pediatric AIDS. To succeed in this, EGPAF collaborates with multiple partners, including Kenya’s Ministry of Health at national and county levels, supporting implementation of PMTCT and HIV care and treatment services. EGPAF-Kenya also provides essential technical and organizational capacity-building assistance to community-based organizations throughout our supported regions.

**KEY PROGRAM ACCOMPLISHMENTS**

Since 2000, EGPAF-Kenya:

- Provided HIV testing to over 3.5 million individuals, including more than 1.8 million pregnant women
- Enrolled over 230,000 adults and 31,000 children in HIV care, and initiated over 136,000 adults and 21,000 children on ART
- Supported more than 10,000 orphans and vulnerable children
- Achieved average viral suppression of 82% among HIV-positive persons in all EGPAF supported sites

**EGPAF-KENYA PROGRAM GEOGRAPHIC COVERAGE**

* Sources: Joint United Nations Programme on HIV and AIDS (UNAIDS), Kenya HIV and AIDS estimates (2015)

** Data as of June 2016
ViiV Nakinae Akiyar Project: Supporting Community adolescents who are retained in treatment and are virally suppressed.
number of adolescents receiving care and treatment and support for HIV/AIDS adolescents; 2) increase identification of HIV-positive children; 3) increase the and generate demand for HIV/AIDS and reproductive health services among and; 6) strengthened county health systems for sustainable HIV service delivery

Improving Linkage to Care and Optimizing Early Retention of Adolescents with Newly Identified HIV Infection in Homa Bay County, Kenya (2015-2017)

Timiza 90 (2016-2021)
The U.S. Centers for Diseases Control and Prevention (CDC)-funded Timiza 90 project supports the implementation and expansion of high-quality, sustainable and comprehensive HIV prevention, care and treatment programs in Kenya. Timiza 90 aims to bring Kenya closer to achieving the ambitious UNAIDS 90-90-90 targets.

Through Timiza 90, EGPAF-Kenya is working in high-HIV prevalence Homabay and Turkana counties to provide 1) comprehensive HIV prevention and treatment services (HIV counselling and testing, PMTCT, adult and pediatric care and treatment), 2) laboratory systems strengthening, 3) voluntary medical male circumcision; 4) comprehensive HIV prevention services to key populations (female sex workers, men who have sex with men, orphans and vulnerable children); 5) Enhanced care services for vulnerable children and their families and; 6) strengthened county health systems for sustainable HIV service delivery.

Funded by ViiV Healthcare Positive Action for Adolescents Fund, this project aims to improve the long-term health outcomes of adolescents (ages 14-18) and young adults (ages 19-24) living with HIV in Homabay County, Kenya. The project implements adolescent- and youth-specific comprehensive HIV care and early retention programs utilizing interlinked facility and community-level components. The program intends to strengthen meaningful involvement of adolescents and young people in their HIV prevention, care and treatment programs, while increasing the capacity of health care workers in the provision of these services.

Support for Enhanced Identification, Linkage and Retention to Care and Treatment for Children and Adolescents (2015-2018)

Through this project, funded by ELMA, EGPAF works to increase access to life-saving HIV care and treatment services among children and adolescents through scale-up of pediatric HIV testing, treatment and retention support services. The project implements a hybrid model of intensified case finding and HIV testing services in epidemic “hotspots”, with the goal of identifying HIV-positive children that have fallen out the PMTCT cascade. To increase access to HIV services, EGPAF utilizes several methods, including: task shifting to ensure a greater number of health workers are offering HIV testing to children and adolescents, procurement of rapid HIV test kits, community stakeholder engagement, and alignment with pre-existing pediatric HIV initiatives.

Improve collaboration with UNITAID. The aim of the project in Kenya is to improve access to early infant diagnosis (EID) and early initiation of ART among HIV-positive infants and young children by placing point-of-care EID platforms in high-volume facilities. Initial implementation will occur in Homabay and Migori regions. The project will then be scaled up to other counties in collaboration with the National AIDS and Sexually Transmitted Infections Control Program, county governments, and other partners and donors.


‘Nakinae akiyar’ is a Turkana phrase that means ‘Give life’. This project will support community activities aimed at strengthening PMTCT and care and treatment services. It will increase coverage of HIV testing, improve adherence rates, and increase retention of mother-infant pairs and their families in care by implementing appropriately designed community-driven interventions that engage clients and existing community health structures. This project will complement efforts of Timiza90 project in Turkana county and implementation will be done in partnership with AIC Lokichogio, Kakuma Mission Hospital and Lodwar District Hospital.

ADVOCACY

EGPAF-Kenya participates in national HIV and AIDS technical advisory committees for PMTCT, adult and pediatric treatment, HIV prevention, and monitoring and evaluation. EGPAF is a member of the technical advisory team that supports the national steering committee for elimination of mother-to-child HIV transmission and the First Lady’s Beyond Zero campaign that advocates for programs to reduce maternal and infant mortality rates in Kenya. EGPAF supports the Kenyan government to develop policies, guidelines, and health worker training curricula that enhance the scale-up of national HIV and AIDS programs.

RESEARCH

EGPAF-Kenya is dedicated to advancing basic and operations research to strengthen the effectiveness of the global HIV and AIDS response. EGPAF’s past research activities have included:

• Exploring the Use of Mobile Phone Technology for the Enhancement of the Prevention of Mother-to-Child Transmission of HIV Program in Nyanza, Kenya: A Qualitative Study (BMC Public Health, 2013): This preliminary study was used to inform the development of a cluster randomized trial on the effectiveness of mobile phones for support of PMTCT.

• Provision of Services and Care for HIV-Exposed Infants: A Comparison of Maternal and Child Health Clinic and HIV Comprehensive Care Clinic Models (JAIDS, 2012): This study compared infant follow-up results when HIV-exposed infant services, including HIV testing, care and treatment, were provided within maternal and child health clinics or in specialized HIV comprehensive care clinics in Kenya.

The activities described here were made possible by UNITAID, the United States Agency for International Development, ViiV Healthcare’s Positive Action for Children Fund, ELMA, the Elton John AIDS Foundation, and the generous support of the American people funded by the U.S. Centers for Disease Control and Prevention. The content included here is the responsibility of EGPAF and does not necessarily represent the official views of these donors.