



DoD HIV/AIDS Prevention Program Status Report:

Kenya



BACKGROUND

Introduction/General Information

The Kenyan population is estimated at just over 31 million, with life expectancy estimates ranging between 47 and 52 years. English and Kiswahili are the official languages, and the country has an estimated literacy rate of 78%. Kenya has a developing, relatively diversified economy, with only 25% of the domestic product coming from agriculture. Services (62%) and industry (13%) make up the other sectors, and annual per capita income estimates range from \$360 to \$1,000.

Country HIV/AIDS Statistics and Risk Factors

HIV/AIDS prevalence estimates in Kenya range from 13 to nearly 15% of the population with either HIV infection or AIDS; the number of people estimated to be living with HIV is 2.5 million. Identified significant risk factors include high-risk heterosexual contact with multiple partners, a high incidence of sexually transmitted infections (STIs), and perinatal transmission.

Military HIV/AIDS Information

Kenyan military size is estimated at approximately 35,000. Relative to the civilian population, military personnel are

at increased risk due to high mobility of troops, as well as the sexual culture found along the Trans-African Highway. The Kenya Department of Defense (KDOD) has not performed systematic screening of personnel; therefore, prevalence statistics are unavailable.

PROPOSED PROGRAM

The KDOD submitted a proposal for the prevention and care of HIV/AIDS within its organization. Objectives outlined included:

- Developing a surveillance system to monitor HIV/AIDS, tuberculosis (TB), and STIs,
- Conducting anonymous HIV testing for pregnant women and STI clients,
- Monitoring STIs in men,
- Monitoring active cases of TB along with TB prevention and control,
- Monitoring of medical discharges and deaths among military personnel,
- Implementing data management,
- Strengthening infrastructure,
- Establishing voluntary counseling and testing (VCT) programs,
- Creating programs to prevent mother-to-child transmission (PMCT), and
- Training healthcare providers in STI treatment management, with emphasis on syndromic diagnosis and treatment.

In order to provide VCT, the KDOD proposed creating and equipping 20 testing facilities scattered throughout the country, each with fully

trained staff. Whole-blood rapid tests would be introduced to provide immediate results. Comprehensive VCT would be provided to both military personnel and directly to their nonmilitary partners for premarital and dating relationships as well.

Coupled with the VCT centers would be a program of peer education designed to increase HIV knowledge and promote VCT. Peer educators would come directly from military units and would be provided 2 weeks of training; ultimately the KDOD would field 80 peer educators.

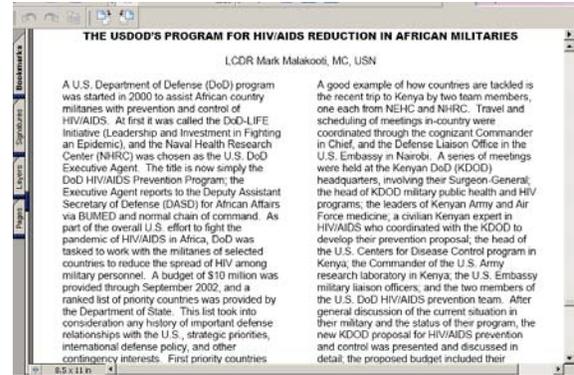
In addition to VCT and education, the KDOD proposed a program of enhanced condom availability, partly through a broad network of commercial condom dispensers, and partly through condom counseling at VCT centers.

PROGRAM RESPONSE

Military-to-Military

Program staff visited Kenya 3 times. The goal of the first visit (during December 2000) was to conduct a Nairobi-based in-country assessment. The second visit occurred during June 2001 in Nairobi, when the KDOD plan was discussed in detail and the in-country coordinator interviewed. In addition, coordination was established between the Centers for Disease Control and Prevention, the US Army Medical Research Unit (USAMRU), and the KDOD. The plan was approved and funded. Program staff also met with Kenyan delegates at the *Working Group for the Development of a Comprehensive HIV Prevention Package for the Uniformed Services of Africa* in Accra, Ghana in February 2001.

DHAPP also funded a full-time, in-country contractor for use by the KDOD in its prevention efforts. Funding was provided through the Kenya Medical Research Institute via USAMRU in Kenya.



Web-based article provided an overview to DHAPP and summary of staff visit to Kenya in June 2001. For complete text see: <http://www-nehc.med.navy.mil/downloads/prevmed/Apr-Jun01final.pdf>

Contractor-Based Assistance

In addition to the assistance described above, Kenya is also the recipient of aid from an external contractor funded by DHAPP. In 2002, Earth Conservancy was awarded a contract to produce a film aimed at changing attitudes, beliefs, and practices that affect transmission of HIV among military personnel in Kenya.

In order to develop and produce the prevention film for the Kenyan military, Earth Conservancy will conduct formative research to develop a cultural and situation appropriate script. The script will include significant prevention messages such as:

- How HIV is transmitted,
- What behaviors put KDOD troops at risk for HIV infection,
- Attitudes, beliefs, and behaviors of KDOD personnel about HIV/AIDS,
- The importance of testing for HIV, and
- Why VCT is crucial to HIV/AIDS prevention.

Clinical Provider Training

Four KDOD military medical staff traveled via DHAPP funds to the XIV International AIDS Conference in Barcelona, Spain, in July 2002. With facilitation from DHAPP staff and funding assistance from CDC, 2 KDOD medical officers will be entering the Epidemiology Masters of Public Health program at San Diego State

University, San Diego, California in the fall of 2003.

Interoperability

CDC is co-funding the HIV/AIDS Prevention Program in Kenya under a matching funds agreement with DHAPP. The USAMRU in Kenya has also provided noteworthy assistance to DHAPP.

PROGRAM IMPACT

Number of Troops Trained

KDOD HIV/AIDS prevention programs have produced 65 personnel trained as VCT counselors; 36 trained to provide PMTC services, 24 trained as HIV surveillance monitors, and 4 trained as medical data clerks. In addition, 4 KDOD personnel completed training as VCT supervisors.

Potential Number of Troops Affected

Potentially all 35,000 KDOD troops could be reached. To date, over 5,000 KDOD personnel have received HIV testing and counseling. In addition, 130 expectant mothers—both dependents and women on active duty—were screened and counseled for HIV.

Voluntary Counseling and Testing (VCT)

The VCT activity has been the most successful part of the HIV/AIDS Prevention Program for the KDOD. There were 65 KDOD troops trained as VCT counselors by the end of September 2002. Over 5,000 troops have received HIV testing and counseling at VCT centers established for the KDOD, which are 3,600 more than originally anticipated. A total of 15 VCT sites were opened by September 2002, with the 16th site opened in January 2003. Some of these sites have conducted outreach HIV/AIDS testing and counseling services to other uniformed services (e.g., National Police) and civilian communities.

Laboratory Capability/Infrastructure

Laboratory capabilities have been established for HIV diagnostics, quality assurance, data entry capabilities, and ethics.



Laboratory technician analyzed blood samples at US Army Medical Research Unit, Nairobi, Kenya.

Mass Awareness

Over 5,000 KDOD personnel have been tested, counseled and educated through programs sponsored by DHAPP.