Targeted Community Programs: Populations at Highest Risk of HIV

In response to the evolving HIV epidemic in Malawi, GAIA is focusing on current areas of greatest need: HIV prevention among youth and other high-risk populations; targeted, home-based HIV testing; and rapid linkage to HIV treatment and adherence support for those newly testing HIV-positive. In Malawi, adolescent girls and young women are at much higher risk of acquiring HIV than their male peers. In 2014, there were an estimated 112,269 young people aged 15-24 years living with HIV, of whom 62% were female. In 2015 in Sub-Saharan Africa, young women age 15-23 represented 23% of all new infections compared with 11% among young men of the same age. By targeting young women and their adult male partners we aim to break the transmission cycle, decreasing HIV incidence, and for those found positive, improving rates of viral suppression to break the HIV epidemic by 2020 in accordance with UNAIDS 90-90-90 treatment targets.

Inputs

1. Funding (WFF, GRS, Congregational support)
2. Project supplies: school, hygiene and menstrual supplies
3. Motorbikes/ fuel

Outputs

1. Orphans enroll in and attend school regularly
2. Girls specifically are empowered to continue with schooling
3. Boys and girls empowered to prevent HIV, malaria and make healthy SRHR decisions
4. Improved HIV status awareness and testing is normalized
5. HIV positive individuals know were to seek care and treatment

Activities

1. Provide supplies and school fees to orphans in Standard 5 through high school
2. Provide food relief and micro enterprise starter pack for orphan headed households
3. Support out of school female youth and high school graduates with vocational training
4. Provide SRHR education through SKILLZ GIRL
5. Provide HIV education through GAIA SKILLZ
6. Provide youth centric HIV testing opportunities
7. Provide targeted (males and population at risk) home based HIV testing
8. Support legacy village youth clubs & HIV support groups
9. Link all individuals found positive to care
10. Make home visits to PLHIV to ensure adherence to treatment

Monitoring & Evaluation

Assumptions (Program Focused):
1. Funding for community programs is maintained or increases.
2. Increased education and increased opportunities for income reduce HIV infection risk.
3. Participants are motivated to use new health knowledge and improve health.
4. Cost of key inputs (fuel, supplies, tuition) do not increase dramatically.

External Factors (Environment Focused):
2. International donors continue to provide funding for/donations of medications, specifically ARVs.
3. Government (MOH) and community support for HIV programming continues.

Needs Assessment
Process Monitoring
Outcome Evaluation
Impact Evaluation

Impact

Results achieved with Partners

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3. Government (MOH) and community support for HIV programming continues.

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