

MP3/Girls Study Dissemination Workshop Report

Venue: Cold Springs Hotel, Homabay

Date: July 29, 2022

Invitees: NACC representative, Study participants, Homabay CHMT, Study CAB members, Study team (PI, Co-Investigators, Research Administrators, Internal Research Monitor, Research Assistant, and the Communications Officer)

The dissemination workshop of the MP3 and Girls study results included attendees from the national level to the study participants.

Dissemination Objectives and Output:

1. The main objectives of the dissemination workshop were:
 - To present the findings to the stakeholders in Homabay County.
 - To discuss whether and how some of the research findings can be translated to practice in our health systems.
 - To discuss whether and how some of the identified research gaps can be included as priority research areas in Kenya.
2. The expected outputs from the dissemination workshop were:
 - Attendees to familiarize with the study findings.
 - Research team to receive feedback from the attendees on study process and areas of future improvement.
 - Roadmap for policy development from the study findings for policy development.
 - Receive proposals on possible areas for further research in the community and Kenya at large and possible collaborators.

Results dissemination and discussions

The dissemination was very interactive and these are some of the discussions that follows:

- Participants especially the CHMT were concerned that boys were left out in the Girls study yet the risk is high equally the same for both boys and girls when they drop out of school.
- It was noted that self-testing among young people is highly accepted because they have information about it, due to peer pressure, the discordant couples and fear of being infected.
- Of concern was the legal age of accessing SRH services. The current legal age to access SRH services is 18 years which attendees felt that it is a barrier for young people below 18 years to access those services and yet they are in need of them.
- Mental health was also an issue among the youth and young adults and this could translate to low linkage to care and treatment.
- PrEP uptake due to poor interaction with Health care providers, judgmental attitude and lack of confidentiality, fear of being perceived of having multiple sex partners or being HIV positive, low HIV risk perception and fear of side effect from the medication.

Group Discussions and presentations

The workshop participants were divided into 4 groups to discuss areas of focus that were brought about during study findings presentation and discussions.

Group 1

Qn1. Retention of youth people both for PrEP and treatment is low, what intervention can we put in place to improve this?

- Education of safe and unsafe sex
- Peer support system
- Introduction of multiple PrEP delivery models
- Provision of enough commodities to the youth (enough supplies)

Qn2. School attendance was not optimum despite cash transfer (CCT), what could be contributing to this problem?

- Leakage to non-intended beneficiaries (the family)
- Pregnancy and even early marriages
- Lack of interest in education and engaging in economic activities at early stages of their lives (fishing)
- Peer pressure and engaging in sexual activities

Group 2

Qn1. In this study, there was retesting of negative participants throughout the year but this was at 50% at month 12, how can we encourage the youth to test?

- Capacity building and community testing
- Encourage youth friendly seminars
- Encourage peer to peer engagements
- Ensure that there is enough commodities to carry out tests
- Encourage the strengthening of linkage of youth by the chiefs
- Ensure there are special days for adolescents only to encourage free conversations
- Encourage continuous tests on risk reduction

Qn2. How do we support abstinence/delay sexual debut for adolescents in compliance with the law?

- Have consistent behavior change communication to youth and parents
- Ensure provision of items such as sanitary towels to avoid the adolescence seeking them for sexual favors
- Work in harmony with partners to improve on the outcome
- Strengthen SRH education in the learning institutions
- Follow guidelines on parental involvement in ASRH

Group 3

Qn1. Identify at least 2 research priority areas for youth and young adults in Kenya?

- Psychosocial support on HIV care and treatment among youth and young adults including those who are HIV negative
- The determination of the low condom uptake youth and young adults

Qn2. Health mental issues are on the rise among young people, depression and substance use. How can we address this?

- Routine mental health screening to identify and offer early prevention and management
- Parental involvement on mental health educations
- Strengthening strategies towards reducing teen pregnancy
- Health education on the side effects of drugs
- Psychosocial counselling and support
- Organizing program events towards mental health awareness creation
- Integration of mental health education in primary schools, secondary schools and tertiary institutions

Group 4

Qn1. IPV is significant among the youth, what systems can we put in place to identify and address this?

- The causes of IPV include: Drugs and Substance Abuse, Poverty, Power Inequality and Cultural beliefs, among others.
- Systems to be put in place include:
 - Sensitization of the community on IPV and retrogressive cultural beliefs
 - Enforcement of existing laws e.g. laws on assault, and human rights
 - Economic empowerment through organizations that offer income generating financing to vulnerable groups. Therefore linking the vulnerable to such organizations that can empower them.
 - Community engagement and dialogue on alcohol and substance abuse.

Qn2. The CAB supported both community and the study very efficiently, how can we sustain community engagement in research?

- There should be community involvement from the start of the study to the end to ensure community engagement.
- Inclusion of the CAB during dissemination of study findings so that it can take the findings to the large community.
- Recognized the role of the community in research.
- Assess the community needs and counter check if the study is able to meet their needs

Closing Remarks

- NACC Representative Kevin Huihu expressed gratitude for NACC's involvement in the dissemination workshop. He was also impressed by the structure of the dissemination, mainly the group work.
- Homabay CHMT representative Mr. Justus Ochola appreciated everyone and highlighted the following:
 - That the situation among adolescents has since changed to when the study was conducted.
 - Retention in PrEP is now high due to the fear of getting HIV infected, engaging in transactional sex with older men who do not want to use condoms.
 - There has been low VMMC uptake among young boys below 15 years is due to lack of donor funding.

- The CAB representative expressed concern that their involvement in the research has gone down being that they are people who are closest to the community and their involvement ensure partnership between the community and researchers is successful.
- The study PI, Dr. Inwani informed the meeting that the dissemination workshop objectives were met and the study team has gotten feedback on the way forward and noted the following:
 - That it is important for collaborators to work together to drive relevant research with equal commitment.
 - That CAB member are equally important and get involved in every stage of the research study.
 - NACC to be involved and be engaged with the findings for country policy development.
 - That a formal report will be shared with all the stakeholders.
- Everyone was appreciated for attending the workshop and participating well in all sessions of the day.

AGENDA

TIME	TOPICS	FACILITATORS
8:00 – 9:00	REGISTRATION & BREAKFAST Session Chair: Dr. Irene Inwani	Secretariats
9:00 – 9:15	WELCOME & INTRODUCTION REMARKS	MoH/County Representative
9:15 – 9:25	WORKSHOP AGENDA OVERVIEW AND GOALS	Mr. Paul Macharia
9:25 – 10:30	MP3 STUDY STUDY OVERVIEW Methodology & Baseline RESULTS Qualitative Cohort (Sexual behavior, HIV, Conditional Cash Transfer, PrEP Cohort) Questions & Answers	Dr. John Kinuthia
10:30 – 11:30	GIRLS STUDY STUDY OVERVIEW Methodology & Baseline RESULTS Qualitative Cohort (Sexual behavior, HIV, Test Options, Pregnancy, Retention, SMART Design) Questions & Answers	Dr. Irene Inwani
11:30 – 12:00	BREAK Session Chair: Dr. Irene Inwani	
12:00 – 13:45	GROUPS DISCUSSIONS & FEEDBACK	CAB Member Dr. John Kinuthia Mr. Paul Macharia Jacob Onyango
13:45 – 14:00	CLOSING REMARKS	MoH/County Representative NACC Representative Study Representative (Dr. Irene Inwani)
14:00 – 14:00	LUNCH	