

KENYA

PROGRAM/ RESEARCH GROUP: **FACES (Family AIDS Care and Education Services)**

LOCATION: Western Kenya and Nairobi

INSTITUTIONAL PARTNERS:

Kenya: Kenya Medical Research Institute (KEMRI), Kenya Ministry of Health, CDC-Kenya, Kenya National AIDS and STD Control Program (NASCO), Kisumu City Council & Health Department.

UCSF: AIDS Research Institute, Bixby Center for Global Reproductive Health, Positive Health Program/ASPIRE, Center for AIDS Prevention Studies (CAPS), Department of Ob-Gyn & Reproductive Sciences, Global Health Sciences (GHS), CFAR, Center for HIV Information (CHI)/HIV Insite.

OBJECTIVES:

- Provide accessible comprehensive care and support services to HIV-affected families and other vulnerable populations, reinforce prevention practices, and train Kenyan health workers in scientifically sound HIV/AIDS care.

PRINCIPAL INVESTIGATOR(S): Craig Cohen (UCSF); Elizabeth Bukusi (KEMRI)

KEY PROGRAM STAFF: KEMRI: Patrick Oyaro, Director
UCSF: Kyle Pusateri, Operations Manager;
Jayne Kulzer, Information Systems Coordinator

PROJECTS:

- Implementation and expansion of high-quality HIV prevention, care, and treatment activities at the facility and community level serving, 120,000+ patients in Western Kenya and Nairobi.

PRIMARY FUNDING: U.S. President's Emergency Plan for AIDS Relief (PEPFAR)

AFFILIATED STUDIES:

Lost to Follow-up from Care in HIV Positive Adolescents in Kisumu, Kenya – *Hilary Wolf* (UCSF Reproductive Infectious Disease fellowship)

ART Treatment Effects on HIV-associated Neurocognitive Impairment – *Ana-Claire Meyer* (KO1 through FIC)

Treatment of Early Cryptococcal Infection – *Ana-Claire Meyer* (KO1 through NINDS and FIC)

Improving Uptake of Early Infant Diagnosis of HIV for PMTCT: A Randomized Trial of a Text Messaging Intervention – *Thomas Odeny* (FIC Clinical Research Scholars Fellowship)

Acceptability, Feasibility and Efficacy of Vaginal Insemination for Conception in HIV Discordant Couples Desiring Pregnancy in Kenya – *Okeoma Mmeje* (CFAR-RAP pilot award)

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Pilot Agricultural Intervention for Food Security and HIV Health Outcomes in Kenya – *Sheri Weiser* (R34 through NIMH)

Agricultural Intervention to Improve Health of HIV-infected and Affected Children – *Lisa Butler* (R21 through NIMH)

Identifying Opportunities for HIV Prevention among Female Migrants in Kenya – *Carol Camlin* (KO1)

Integration of Family Planning Services into HIV Care and Treatment – *Sara Newmann* (the Tides and Gates Foundations)

Cervical Cancer Screening and Treatment in HIV-infected Women – *Megan Huchko* (CFAR, CTSI)

Effect of HAART on Surgically Treated High-Grade Cervical Intraepithelial Neoplasia (HGCIN) in HIV-infected Women – *Megan Huchko* (UCSF discretionary funds)

Application of weighted time-series to address bias in evaluation of clinic- and community-level research – *Starley Shade* (CAPS Innovative Grants)

Prevention of Tuberculosis in HIV-Infected Children – *Lisa Dillabaugh* (UCSF discretionary funds)

Engagement in Care among HIV-Infected Patients in Resource-Limited Settings – *Elvin Geng* (IeDEA supplement, CFAR)

Fertility Desires and Family Planning among HIV-Infected Couples – *Sara Newmann* (Hellman Foundation, CFAR)

Formative Research for Intervention of HIV/AIDS Service Providers on Gender-Based Violence – *Megan Huchko* (CFAR pilot award)

Parallel Comparison of Tenofovir and Emtricitabine/tenofovir Pre-Exposure Prophylaxis (PrEP) to Prevent HIV-1 Acquisition within Discordant Couples – *Jayne Kulzer* (UCSF-KEMRI in Kisumu is one of 9 sites in this trial funded by the Gates Foundation and coordinated by University of Washington)

PROGRAM/ RESEARCH GROUP: **STEP (Student Training Education Program)**

INSTITUTIONAL PARTNERS:

Kenya: Kenya Medical Research Institute (KEMRI), University of Nairobi
North America: UCSF, University of British Columbia

OBJECTIVE: FACES training program for medical students and residents

PRINCIPAL INVESTIGATOR(S): Craig Cohen

PRIMARY FUNDING: Infrastructure support through PEPFAR; primary support through self-sponsorship by students and residents

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PROGRAM/ RESEARCH GROUP: leDEA-East Africa Regional Consortium (International Epidemiologic Database to Evaluate AIDS)

LOCATION: Sites throughout Kenya, Tanzania, and Uganda

INSTITUTIONAL PARTNERS:

- USA: UCSF, Indiana University, Columbia University, New York University, NIH
- Kenya: Moi University School of Medicine, Kenya Medical Research Institute (KEMRI)
- Tanzania: National AIDS & STI Control Programme (NASCOP)
- Uganda: Mbarara University of Science and Technology (MUST), Rakai Health Sciences Program, Infectious Diseases Institute (IDI)
- Ministries of Health of Kenya, Tanzania, and Uganda
- Seven regional cross-continent leDEA consortia (East Africa plus Central Africa, West Africa, South Africa, North America, South America, and Asia)

OBJECTIVES:

- Establish an international research consortium in East Africa to address unique and evolving research epidemiologic and clinical questions in the field of HIV/AIDS which are unanswerable by single cohorts;
- Establish protocols to harmonize routine data collected during the course of clinical care at a variety of care facilities for HIV throughout East Africa;
- Develop methods to overcome limitations in accuracy and completeness of data collected in routine care sites in resource-limited areas;
- Provide training and mentoring to emerging African scientists and data managers;
- Share data within the leDEA worldwide consortium (7 regions throughout the world)

PRINCIPAL INVESTIGATOR(S) at UCSF: Jeffrey Martin and Craig Cohen

PROJECTS/ SPECIFIC AIMS:

This dynamic cohort follows over 120,000 HIV-infected adults and 20,000 HIV-infected children who receive their clinical care at one of 42 different health care facilities throughout Kenya, Uganda, and Tanzania. Data collected during the course of routine clinical care are captured in electronic medical record systems at each site and then harmonized centrally. These data plus other enhanced measurements made for purposes of research form the basis of the leDEA database. A wide array of projects are ongoing, including:

- Trends over time in which patients begin ART
- Sampling-based approaches to eliminate biases conferred by losses to follow-up
- Durability of first-line ART regimens and predictors of treatment failure
- Patterns of pregnancy and reproductive outcomes
- Incidence and determinants of mortality after starting ART
- Time and motion studies in the evaluation and treatment of TB
- Impact of ART on the incidence of KS and survival after KS diagnosis.
- Cost-effectiveness strategies for optimizing HIV infection management

PRIMARY FUNDING: NIAID, NCI, NICHD

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PROGRAM/ RESEARCH GROUP: Prevention & Public Health Group (PPHG)

LOCATION: Nairobi, with impact nationally; development of UCSF Global office; full-time in-country staff

INSTITUTIONAL PARTNERS:

CDC-Kenya, Kenya Medical Research Institute (KEMRI), Kenya National AIDS & STI Control Programme (NAS COP), Kenya Ministry of Public Health & Sanitation (KMOPHS), Field Epidemiology & Laboratory Training Program (FELTP)

OBJECTIVES:

- Cooperative Agreement with CDC-Kenya to provide in country technical assistance and capacity building on establishing and enhancing national HIV/STI surveillance systems, improving knowledge of epidemiologic trends, and tracking burden of disease in Kenya.

PROJECTS:

- Capacity development through technical assistance and mentoring in surveillance methodologies, core and ancillary survey design, implementation, evaluation, and use.
 - Kenya AIDS Indicator Survey (KAIS)
 - Support to national level Most At Risk Pops Technical Working Group for integrated bio-behavioral surveillance and size estimation among key populations at risk for HIV
 - Assessment of PMTCT program facilities to replace routine ANC surveillance
 - Bio-behavioral HIV surveillance among fisherfolk communities
- Training of in-country professionals in surveillance and evaluation for data collection, conduct of research, and scientific manuscript preparation.
 - Mentoring and twinning with MOH / NAS COP staff
 - Training workshops in surveillance methods, protocol development, research training
 - Workshops and mentoring in data use, report preparation and manuscript writing

PRINCIPAL INVESTIGATOR(S): George Rutherford

KEY PROGRAM STAFF: Sandy Schwarcz, Henry Raymond, Gail Kennedy, Joy Mirjahangir, Wanjiru Waruiru

PRIMARY FUNDING: CDC - PEPFAR

AFFILIATED STUDIES:

- Utility of Prevention-of-Mother-to-Child HIV Transmission Program Data for HIV Surveillance
- Kenya AIDS Indicators Survey II (KAIS II)

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PROGRAM/ RESEARCH GROUP: Global Health Group

LOCATION: Various

INSTITUTIONAL PARTNERS:

UCSF Bixby Center for Global Reproductive Health; Marie Stopes International, Population Services International

OBJECTIVES:

- The UCSF Global Health Group is an “action tank,” dedicated to translating major new paradigms in global health into large-scale action, to positively impact the lives of millions of people. Since its establishment in 2007, the Global Health Group has conducted new research, synthesized evidence, and convened high level groups of experts to inform critical policy decisions and answer practical questions. Leveraging the expertise of its small team based in San Francisco, the Global Health Group works with a wide network of partners to gain insight, forge broad consensus, catalyze action, and implement solutions in countries. The Group’s three core initiatives focus on:
 - Providing practical and intellectual support for the **elimination of malaria**
 - Strengthening the **role of the private sector** in delivery of healthcare
 - **Translating evidence into policy** to support informed debate on current global health issues

PRINCIPAL INVESTIGATOR(S): Sir Richard Feachem
Gavin Yamey (E2Pi)
Dominic Montagu (PSHi)

KEY PROGRAM STAFF: Elizabeth Brashers
Anna De La Cruz (PSHi)

PROJECTS:

- The **Evidence to Policy Initiative (E2Pi)** is partnering with the UCSF Bixby Center for Global Reproductive Health to conduct policy analysis and outreach related to two clinical trials on integration led by UCSF and the Kenya Ministry of Health, and to a resulting Integration for Impact conference in Nairobi in September 2012 (<http://integration2012.org>), to increase awareness and uptake of study findings.
- The **Private Sector Healthcare Initiative (PSHi)** specializes in documenting and advancing understanding of innovative platforms to engage the private sector in strengthening delivery of health services in low- and middle-income countries. Since 2008 the Initiative has conducted a significant program of research on social franchising, in collaboration with implementers and other partners, to document and evaluate this innovative platform, including: supporting a community of practice of 55 social franchises around the world, documenting scope, scale and impact of services provided, evaluating service expansion and cost effectiveness, and supporting development and implementation of quality standards and reporting. In Kenya, the PSHi liaises with a series of social franchises:

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- Marie Stopes International's *AMUA Family Planning Clinic*, launched in 2004, which provides reproductive health, HIV screening and treatment and maternal child health services through 250 outlets in 5 provinces
- The HealthStore Foundation Child & Family Wellness (CFW) Clinics, launched in 2000, which provides reproductive health, maternal child health and malaria testing and treatment services through 71 outlets in 4 provinces
- fhi360 Gold Star Network, launched in 2006, which provides reproductive health, and HIV and TB screening and treatment services through 192 outlets in 3 provinces
- Population Services International's (PSI) Tunza Family Health Network, launched in 2008, which provides reproductive health, HIV screening and treatment and maternal child health services through 258 outlets in 8 provinces

PRIMARY FUNDING: Bill & Melinda Gates Foundation (E2Pi/Bixby); Rockefeller Foundation; Results for Development (Gates)

PROGRAM/ RESEARCH GROUP: Global Health Sciences – Aga Khan University Collaboration

LOCATION: Nairobi, Kenya, and other regions in East Africa

INSTITUTIONAL PARTNERS:

Aga Khan University (AKU) Faculty of Health Sciences, consisting of the Medical College and the School of Nursing and Midwifery

OBJECTIVES/ PROJECTS:

- Family Medicine: Assist AKU-Department of Family Medicine in the implementation of a family medicine residency program [PI: Meghan Mahoney]
- Integrated Primary Health Care: Develop and testing a model of Integrated Primary Health Care initially centered in Kenya that examines strategies for building an integrated system of community-based comprehensive primary health care services that encompass community education, nursing, midwifery, family medicine, and provides preventive care and primary medical care including access to essential referral services [PI: Sarah Macfarlane]
- Regional Centre of Regenerative Medicine: Planning and support for establishing an AKU regional Centre of Regenerative Medicine focused on education, training, and advanced, basic and translational research [PI: TBD]
- Inter-Professional Curriculum Planning: Assist in the planning for the new health sciences inter-professional curriculum to be taught by the AKU Faculty of Health Sciences [PI: Sylvester Quevedo]
- Other collaborative research, training and education initiatives of mutual benefit

PRINCIPAL INVESTIGATOR(S): As above

KEY PROGRAM STAFF: Chuck Smukler

PRIMARY FUNDING: Aga Khan University

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PROGRAM/ RESEARCH GROUP: Organic Health Response (NGO)

LOCATION: Mfangano Island, Suba District, Kenya

INSTITUTIONAL PARTNERS:

- UCSF-FACES Program
- UC Berkeley Environmental Science
- MicroClinic International (MCI)
- Kenya Medical Research Institute (KEMRI)
- Oxford University, Department of Medical Anthropology
- Rhodes Scholar Southern Africa Forum

OBJECTIVES:

The OHR Research Department is a community-based research collaboration, headquartered within the Ekialo Kiona Center on Mfangano Island, Lake Victoria in Kenya. This department was established in 2009 to:

- 1) Gather systemic data regarding the diverse health, social, and environmental challenges facing rural Kenyan populations on Lake Victoria.
- 2) Translate longitudinal data into meaningful pilots and durable health programs.
- 3) Rigorously evaluate innovative HIV, sanitation, agriculture and education interventions on Mfangano Island.
- 4) Build local research capacity among the remote Island communities.
- 5) Facilitate U.S. and Kenyan graduate student, resident, and post-doc research opportunities and improve research and service relationships between U.S. institutions and local partners

PRINCIPAL INVESTIGATOR(S): Chas Salmen, Mphil (Oxon.), Founding Director, Organic Health Response and Senior VP of Special Project, MicroClinic International

KEY PROGRAM STAFF: Katie Fiorella, OHR Co-Director of Research
Matt Hickey, OHR Co-Director of Research
Dan Omollo, OHR Research Dept. Manager
Richard Magerenge, EK Center Exec. Director

PROJECTS:

- The Ekialo Kiona Center: solar-powered community resource hub
- The Cyber-VCT Pilot: free internet access through biannual HIV counseling and testing
- Mfangano MicroClinic Pilot: innovative social networking intervention for improved HAART and HIV prevention
- Ekialo Kiona Community Radio Station: youth-led Suba Language Radio Station
- EK Organic Demonstration Farm: sustainable agriculture training and business development
- EK Emergency Boat and Triage Clinic: First response and emergency services for remote island population

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- EK Mountain Bike shop: income generation and sustainable transportation for EK members
- EK Positive Crafts Group: HIV-positive women's artisan cooperative
- EK Scholarship Program: secondary school support for local youth

PRIMARY FUNDING:

NSF-PEER, Google Corporate Giving Council, Craigslist Charitable Fund, UCSF PACCTR, UCSF/Fogarty Global Health Frameworks Program, MicroClinic International, Berkeley Big Ideas, Rotary International

AFFILIATED STUDIES:

- **Mfangano Island Healthy Networks Impact Study (MIHNIS):** An 18-month longitudinal cohort study (ongoing) to evaluate the impact of a novel social networking pilot designed to improve HAART adherence, clinical outcomes, social support, and risk behaviors among people living with HIV/AIDS and their associated social support networks on Mfangano Island, Suba District, Kenya.
- **Healthy Networks Water Treatment Study (HNWT):** A 12-month longitudinal cohort study (ongoing) to evaluate an innovative social networking pilot to improve household drinking water sanitation and water-borne illness on Mfangano Island.
- **Research on Environment and Community Health Study (RECH):** A 3-year longitudinal cohort study to assess environmental links between access to the Lake Victoria fishery and household health among villages on Mfangano Island.
- **Mfangano Health Baseline Study (MHB):** Cross-sectional Demographic and Health Survey among 110 households to establish local baseline for long-term evaluation of OHR's health, nutritional, livelihood, and environmental programming on Mfangano Island.

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PROGRAM/ RESEARCH GROUP: I-TECH (International Training and Education Center for Health)

LOCATION: Sites throughout Kenya

INSTITUTIONAL PARTNERS:

University of Washington's Department of Global Health, CDC-Kenya, Kenya National AIDS & STD Control Program (NAS COP), Kenya's Ministry of Medical Services and Ministry of Public Health and Sanitation

OBJECTIVES:

- Development of a skilled health workforce and well-organized national health delivery systems to make progress toward long-term health goals, including the Millennium Development Goals. Most projects follow a Partnership Model, a project cycle in which sustainability and transition to local ownership are key project outcomes.

Technical areas include:

- Health system strengthening
- Health workforce development
- Operations research and evaluation
- Prevention, care, and treatment of infectious diseases

PRINCIPAL INVESTIGATOR(S) at UCSF: Michael Reyes

KEY PROGRAM STAFF: Tom Foster

PROJECTS:

- Improving the Use of Health Management Information Systems: development and implementation of a standardized Kenya Electronic Medical Record (EMR) System for the management of national HIV and AIDS care and treatment data.
- Fifteen new "model" EMR sites will demonstrate standardized implementation, generate best practices, and provide detailed information on the costs and efficiencies of using EMR systems, followed by a larger EMR rollout in 300 health facilities throughout Kenya.
- Technical assistance for the development and implementation of a national gender-based violence database.

PRIMARY FUNDING: HRSA, USAID, CDC, DOD, PEPFAR, and others