



Photo: EGPAF, 2023

# DREAMS: An Urban Model

USAID-RHITES SW



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# Introduction

Adolescent girls and young women (AGYW) in urban settings are particularly vulnerable to HIV acquisition due to structural drivers like poverty, gender inequality, sexual violence, and lack of education.

These young girls and women face diverse challenges, including finding decent sources of income. Some jobs, such as commercial sex, expose girls and young women to a higher risk of acquiring HIV, while other jobs offer meager pay that does not allow them to meet their basic needs, causing them to get involved in transactional sex. Many of these women have some knowledge of HIV; however, the information they hear is often distorted by misinformation. Furthermore, many young girls and women receive reproductive health and relationship advice from the elderly that can be judgemental and informed by social and gender norms.

The Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe (DREAMS) model was created to address these concerns by implementing a core set of interventions to keep AGYW safe and AIDS-free. DREAMS was founded on the premise that when evidence-based interventions are scaled and targeted to the most vulnerable adolescent girls, they could alter the trajectory of the worldwide HIV epidemic. DREAMS interventions included gender-based violence (GBV) prevention, mitigation, and response; adolescent-friendly health services, such as HIV testing and post-rape care; and families and community building, such as offering parenting/caregiver programmes and providing safe places for girls.

Although the DREAMS model has often been implemented in rural areas, the Elizabeth Glaser Pediatric AIDS Foundation introduced evidence-based adaptations in Mbarara City, Uganda to address the unique challenges of urban girls and women to reduce HIV infections and unwanted pregnancy. By the end of 2022, Regional Health Integration to Enhance Services in Southwest Uganda (RHITES –SW) successfully mobilized, screened, and enrolled almost 29,702 adolescent girls and young women (AGYW) into DREAMS programming.

## Integrated interventions for girls and young women

Skill-building activities designed to generate economic opportunities for girls and women were integrated into the DREAMS program in Mbarara City and Mbarara District. These activities integrated components of existing government programs such as the Youth Livelihoods Program, which offered skill-development modules but lacked HIV prevention interventions. This integration enabled the delivery of a more effective intervention for AGYW by addressing key challenges within the community.

## Implementation process

The implementation consisted of different processes that prioritized engaging with the community and community leaders, developing a curriculum, and delivering activities in determined safe spaces:

- **Local leadership and ownership of the DREAMS program:** Community meetings were held between local leadership, including the chairman, division leaders, and community development officers, to determine the criteria for participation and enrollment as well as to plan key interventions to address key aims of the program.
- **Collaboration in program delivery:** The technical team developed the DREAMS program implementation plans in consultation with the community, incorporating feedback from the local leaders into the plans. Collectively, the technical team and local leaders determined how the training and clinical services would be delivered due to the diverse mix of AGYW, including literate and non-literate participants.

- **Identifying and training peer facilitators:** To foster a peer-to-peer learning and skill-building environment, girls and young women who were early adopters of the DREAMS program were identified, trained, and equipped with mobilization skills and facilitation skills to provide DREAMS curriculum sessions and psychosocial support to their peers. This approach empowered the AGYW, who worked closely with community development officers, health workers, and probation officers to mobilize, screen, enroll AGYW, and provide a DREAMS comprehensive service package during clinical outreaches.
- **Provision of integrated clinical services:** To address the clinical needs of the AGYW enrolled in the DREAMS programs, services including HIV testing, HIV prevention methods like condoms and PrEP, family planning, and post-GBV services were integrated in the routine curriculum community activities for the AGYW.
- **Relevant skill building of beneficiaries:** Multiple skill-building programs were integrated into the urban DREAMS model: crafts, baking, bookmaking, production of liquid soap, and sandal making. Life skills sessions included communication and confidence-building, gender-based violence discussions, family planning, HIV testing services, and financial literacy. These were delivered in safe spaces (community center, a school, a church) identified by the girls and young women and were informed by evidence-based global curricula like Aflateen, Journeys Plus, SINOVIUYO, and Steppingstones. The sessions were tailored to the age of the participants. After the sessions, a health worker was able to refer the participants to other health service providers for additional support, as needed.
- **Graduation:** Upon completion of all the sessions, each AGYW graduate received a start-up kit with equipment and essentials and can voluntarily become a DREAMS ambassador in the community, sharing her knowledge and skills with her peers.

## Implementation outputs over two years

- In COP20 [Oct 20-Sept 21], we enrolled 14,738 AGYW, and in COP21 [Oct 21-Sept 22], we enrolled 4,964 AGYW.
- We provided 23,448 AGYW with HIV prevention life skills and were fully layered as per the Uganda DREAMS layering table.
- 14,066 AGYW receive family planning counseling services and 928 began using a family planning method of their choice.
- 17,052 AGYW were trained in financial literacy, and 8,346 AGYW were supported to form village saving and loan associations.
- Over 12,563 AGYW benefited from Social Economical start kits; these include baking kits, sandal-making kits, soap-making kits and tailoring kits.



Annita Ainembabazi (22 years) and Shadia Nalubowa (18 years) successfully graduated from the DREAMS program in Mbarara City, Photo: EGPAF, 2023.

**Table 1.** FY 2022 AGYW\_PREV achievement across age categories

Age Categories	Number of AGYW that received a full primary package only	Number of AGYW that received a full primary package and relevant secondary package	Number of AGYW that did not receive a full primary package	Percent of AGYW who at least completed the preliminary DREAMS package
9-14	162	6,789	206	<b>97%</b>
15-19	27	4,333	454	<b>91%</b>
20-24	23	2,305	641	<b>78%</b>
25-29	0	21	3	<b>88%</b>
<b>Total</b>	<b>212</b>	<b>13,448</b>	<b>1,304</b>	<b>91%</b>

There was a good uptake of the DREAMS services package during the implementation period. For example, the number of AGYW enrolled in the program exceeded the allocated targets for two of the age groups: The highest enrollment rates were among 9- to 14-year-olds (116%) and 15- to 19-year-olds (108%). Young women ages 20 to 24 experienced the highest dropout rate, which was attributed to deterrence by their sexual partners, who thought that the DREAMS activities offered no value to their relationship. Moreover, participation posed a barrier to young women who were balancing jobs in the informal sector with the intensive DREAMS activities. Young women ages 20 to 24 did feel that social-economic strengthening packages were more important when compared to the curricular-based packages.

## Key success factors

A few of the factors that contributed to the successful reach and participation in the DREAMS skill-building program included:

- Facilitating planning entry meetings with community leaders and aligning the program with government programs to secure leadership buy-in for the sustainability of the interventions.
- Using a data-driven approach to determine the best locations for implementation and the required activities.
- Building the program utilizing peer facilitators for easy sharing and uptake of services by AGYW.
- Integrating clinical services within skill-building sessions to ensure that those who cannot attend all the sessions acquire knowledge on preventative interventions for HIV.
- Identifying locations within communities to act as safe spaces where girls and young women can share openly and discuss key issues.
- Building human resource capacity within the community for mentorship and coaching following graduation from the program to ensure that the participants maintain their skills and that any challenges can be resolved quickly.

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