Girls and young women account for 67 percent of new HIV infections among adolescents in sub-Saharan Africa. The original 10 DREAMS countries (Kenya, Lesotho, Malawi, Mozambique, South Africa, Swaziland, Tanzania, Uganda, Zambia, and Zimbabwe) accounted for more than half of all the new HIV infections that occurred among adolescent girls and young women globally in 2016.

With support from the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR), the Bill & Melinda Gates Foundation, Girl Effect, Johnson & Johnson, Gilead Sciences, and ViiV Healthcare, DREAMS delivers a core package that combines evidence-based approaches that go beyond the health sector, addressing the structural drivers that increase girls’ HIV risk, including poverty, gender inequality, sexual violence, and a lack of education. The DREAMS Innovation Challenge infuses additional resources and innovative approaches to meet the urgent and complex needs of adolescent girls and young women, supporting interventions with creative ideas that address the following areas:

- **Strengthening leadership and capacity of communities** and grassroots, community-based organizations to support the expansion of evidence-based services
- **Keeping girls in secondary school** and addressing underlying access, enrollment and retention issues
- **Pioneering new ways to find young and adult men and link them to HIV services**—counselling, testing, treatment, and voluntary medical male circumcision
- **Supporting pre-exposure prophylaxis (PrEP)** interventions by identifying adolescent girls and young women appropriate for PrEP initiation and adherence services
- **Providing a post-secondary school bridge to employment** for young women (ages 19-24)
- **Increasing the availability** and use of data for DREAMS to inform policy, increase program impact, and help identify and support innovative solutions

In 2017, after just 13 months of full DREAMS implementation, PEPFAR analyses showed that new HIV diagnoses among adolescent girls and young women declined by more than 25 percent in the majority (>60 percent) of DREAMS intervention regions. In 2018, preliminary findings show that new HIV diagnoses among this group continued to decline in 85 percent of the highest HIV burden communities and districts that are implementing DREAMS.

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**About JSI:** JSI Research & Training Institute, Inc. (JSI) serves as Funds Manager for 45 DREAMS Innovation Challenge grantees that are funded by PEPFAR. As Funds Manager, JSI administers these awards, monitoring and supporting grantees’ implementation and grants management and providing capacity building and technical support. Grant awards range from $700,000 to $11 million and represent a mix of international and indigenous organizations. For more information, visit [www.jsi.com](http://www.jsi.com).

**About PEPFAR:** PEPFAR is the largest commitment by any nation to address a single disease in history. Through the compassion and generosity of the American people, PEPFAR has saved and improved millions of lives, accelerating progress toward controlling and ultimately ending the AIDS epidemic as a public health threat. For more information, please visit [www.pepfar.gov](http://www.pepfar.gov).
Through the DREAMS Innovation Challenge (DREAMS-IC) project, more than 120,000 learners in secondary schools and community settings have been reached with USG education assistance, as of September 30, 2018. Modreen, for example, dropped out of school due to lack of funds. At age 20, she was recruited into HOPE worldwide Zambia’s DREAMS-IC ASPIRE club. Through the club, she has learned about HIV prevention, the dangers of drugs, how to communicate effectively, and was provided life skills. Modreen also learned how to make reusable menstrual pads – and was selected for a school bursary to resume schooling as of January 2018. “The ASPIRE Club is amazing because it has wonderful facilitators,” she said. “I enjoy the science lessons and the science kits, which make the lessons fun. The club has motivated me to go back to school.”

More than 9,000 individuals have newly enrolled in pre-exposure prophylaxis (PrEP) through DREAMS-IC. For example, the University of Washington’s DREAMS-IC project integrates PrEP in maternal and child health and family planning clinics in Kisumu, Kenya. Of women screened for behavioral risks and willingness to consider PrEP, 21% (232 of 1,122) elected to initiate PrEP during routine family planning clinic visits and 22% (1,993 of 9,171) elected to initiate PrEP during routine pregnancy and postpartum visits. Most women with partners known to have HIV, initiated PrEP (91% identified in family planning clinics and 79% in MCH clinics). Among women with partners with unknown HIV status, 34% in family planning clinics and 37% in MCH clinics initiated PrEP.

In total, more than 160,000 individuals have received standardized, evidence-based interventions that have been proven to promote the adoption of HIV prevention behaviors and the use of preventive health services. More than 80,000 received HIV testing services and received their test results.