CORRECTIONAL SERVICES

GAPS IN PROGRAMMING

MODULE	INTERVENTION	GAPS	ACTIVITIES TO ADDRESS GAPS
		HIV	
Prevention Package for People in Prisons and Other Closed Settings	HIV prevention communication, information and demand creation for prisoners	Minimal involvement of prisoners in HIV Programming	 Train Peer Educators among the prisoners Support PSSG among inmates Involve CSO's in conducting support group meetings within the prison and the community especially for the prisoners that are about to leave
		Unclear policy guidance on Information and communication on safer sex and condom use. Customize and update Prison specific IEC materials and the	 Engage Prison administration to provide guidance necessary to scale up information and communication on safer sex, condom use and distribution as part of an exit package for released inmates. Distribute and strategically place Posters in Prisons plus within the community areas. Procure Condom dispensers

		Procure Envelopes for Condom dispensing for exiting Prisoners upon release
Pre-exposure prophylaxis (PrEP) programing for prisoners	Knowledge gaps on PrEP which inhibits its scale up to those at Risk	 Sensitization of Prison Leadership on PrEP and involve CBO in feedback sharing for Ex-prisoners Train Prison Health Providers and ex-prisoners on PrEP and other forms of Prevention targeting persons at substantial risk of HIV Train Prisoners as Peer Educators to scale up Sensitization and demand generation for HIV preventive services
	Poor PrEP programming for persons at risk among Prisoners	Development of PrEP programming for those already on PrEP and a package for those exiting prisons and link them with CSO's before exit for them to know where to access them and ensure continuity of the program.
Reproductive health STI, Hepatitis and Post Violence care	Sub-optimal screening for Hepatitis B & C among prison population	 Conduct Baseline survey on state of Hepatitis cases in Prison Conduct Hepatitis testing and vaccination. Train Health providers in Prison to identify and provide wound and Post Violence care

Harm reduction interventions for drug use for prisoners Removing human rights related barriers to prevention for prisoners	Inadequate sensitization programs targeting prison staff on emerging human right barriers on TB/HIV	 Train Health providers on STI screening and syndromic management Procure and distribute STI treatment commodities for prisoners Harm reduction interventions for drug use for prisoners Continuity of care for Medically Assisted Therapy programs Scale up MAT sites in prison (Nyanza and Coast) Link ex-prisoners to MAT clinics and counseling services Train ex-prisoners on drug and alcohol elimination
		 Train ex-prisoners on drug and alcohol elimination Train Prison Leadership and target staff on emerging human right barriers affecting HIV prevention Train Prison Documentation and Welfare Officers, Chaplains and Health Providers Sensitize ex-prisoners on MAT and other harm reduction products.

interventions for drug use for prisoners	MAT services in prison facilities especially in regions with high drug use prevalence Poor systems to identify for overdose prevention and management for PWID among prisoners Knowledge Gap on management of Drug use disorders	 Scale up MAT sites in Prison (Nyanza and Coast) Train Prison Health Providers on screening, identification and management of drug use adverse events; (overdose, Acute withdrawal syndromes and drug use disorders Source for Naloxone and Buprenorphine towards of drug overdose Conduct feedback sharing forums between CSO for Ex-convicts, Prison Leadership and other stakeholders Develop CBO in reach programs to prison Sensitize Prison Officers on handling cases of drug use disorders among (Staff, inmates and community)
Removing human rights related barriers to prevention for prisoners	Negative societal stigma and discrimination for Ex-Prisoners	 Train ex-prisoners to be stigma and discrimination champions Engage community leaders on stigma and discrimination against ex-prisoners Train ex-prisoners on mental health Provide ex-prisoners with mental health support to be champions.

	Community Empowerment for Exprisoners	Negative Treatment Outcomes for exprisoners	 Train ex-prisoners to be adherence counselors Train ex-prisoners HIV champions Train ex-prisoners on treatment literacy Train ex-prisoners on safe sex practices Provide ex-prisoners with linkages to facilities for prevention, care and treatment Train ex-prisoner PrEP Champions Train ex-prisoners on positive living Provision of HIV prevention commodities e.g condoms
	TUBERCU		OSIS
Key and Vulnerable Populations (KVP) -TB/DR- TB	KVP - People in prisons/jails/detention centers	Poor implementation of prison exit programs necessary for TB/HIV continuity of care	 Strengthen Discharge Boards in prison to support continuity of Care to TB/HIV services for inmates exiting prisons and Link CBOs to participate in continuum of care Develop an exit package for clients on TB care
	TB/HIV - Screening, testing and diagnosis	Long waiting time for TB diagnosis and poor treatment follow up diagnosis for client on TB treatment	 Renovation of Existing prison Laboratories Procurement of Trunat machines and Portable X-ray machine component for target prison regions Train Prison Laboratory personnel on quality sample collection and referrals

Poor Sample networking and long Turnaround time to testing laboratories in prison facilities Poor uptake of TB Preventive Therapy (TPT) Missed opportunities	 Support sample networking and tracking systems in prison facilities Develop a mechanism to track samples in prisons Train Prison laboratory staff on TB Laboratory testing (Microscopy, TB LAM) Prioritize TPT commodities for prison population Sensitize Prisoners and staff on TPT Train health providers on TPT management Print PF 10 Forms for TB screening in prison
for ACF among prisoners	 Track TB cascade mechanisms Contact quarterly screening at least in all TB high burden stations and annually in all other stations Scale up Bi-annual screening of Persons working in prisons
Inadequate TB screening skills for Documentation providers who are the frontline initial contact personnel with new prisoners	 Train Frontline Prison Officers (Documentation Officers) on initial TB screening using Prison Form 10 Form Provide Technical visits on TB screening
Poor uptake of TB Preventive Therapy (TPT)	 Prioritize TPT commodities for prison population Sensitize Prisoners and staff on TPT

			Train health providers on TPT management
		Missed Opportunities for reporting of TB Cases	Train Prison Data Officers and Documentation clerks to report all forms of TB and have them linked to National reporting system
		Limited opportunities for Active case finding programs in Prison	 Prioritize GeneXpert Cartridges for Prisons and increase the number of in reach ACF screening in prison stations
		Provider Knowledge Gaps on management of DR TB in prison settings	 Sensitize Prison staff on standard basic SOPs of handling inmates diagnosed with DR TB Train Prison health providers on management of DR TB including provision of DOTs
relat	noving human rights ted barriers to vention for prisoners	Inadequate sensitization programs targeting prison staff on emerging human right barriers on HIV Limiting involvement of prisoners towards TB control in prisons	 Train Prison Leadership and target staff on emerging human right barriers affecting HIV prevention Train prisoners as Cough monitors and TB Champions within prison cells Involving people in prisons in awareness activities
Lega Your Righ		settings Poor dissemination of Right based information and	 towards prison staff and prison health providers. Customize Prison specific IEC materials on patient rights

	TB/HIV - Treatment and care	Educative materials targeting prisoners Knowledge gap in TB case management High number of TB patients with deranged nutrition	 Training of Peer Educators to enhance communication and information sharing (Right to breathe trainings) Train Prison Health Providers on TB case management Support facility-based MDT sessions among Prison Health workers to discuss emerging TB difficult case Support Nutritional supplement for Prisoner
		MALAR	IA
Vector Control	Insecticide treated nets (ITNs) – Mass Campaign universal	Poor access to Insecticide treated Nets	Distribute Nets to all Pregnant and Breastfeeding prisoners including all children under five years accompanying their mothers to prison
	Indoor Residual spraying (IRS)	Poor Environmental programs towards vector control	Sensitize Prison administration and general staff on Environmental compliance and waste management train CSO to conduct the same in the communities surrounding the prison.
		Little access to IRS programs in prisons cells and compounds	 Conduct occasional IRS activities within prisons targeting prisons in regions with high malaria burden and the community surrounding the prison.

	Social and behavior change (SBC)	No joint supervision visits on malaria to prison	Conduct joint supervision visits to prison stations to strengthen implementation of preventive programs together with the CSO.
Case Management	Facility based treatment	Inadequate capacity building programs targeting prison health providers	Train Prison health care providers on Malaria case management and updates

END OF GAP TABLE

II: OPPORTUNITY FOR PROGRAMMING:

MODULE	INTERVENTION	OPPORTUNITY	ACTIVITIES TO ADDRESS GAPS		
	HIV				
Prevention					
Package for	HIV prevention	Involvement of prisoners in	Train Peer Educators among the prisoners and ex-		
People in	communication,	TB/HIV and Malaria Programming	prisoners through CSOs.		
Prisons and	information and				
Other Closed	demand creation for	Development of Policy guidance	Engage Prison administration to provide guidance		
Settings	prisoners	on Information and	necessary to scale up information and		
		communication on safer sex and	communication on safer sex, condom use and		
		condom use.	distribution as part of an exit package for released		
			inmates and link the prisoners exiting from prison		
			to CBo's to ensure continuity.		
		Customize and update Prison	Distribute and strategically place Posters in Prisons		
		specific IEC materials	and the community surrounding the prison area		
			and surrounding community areas.		
	Pre-exposure	Scale up uptake of PrEP through	Sensitization of Prison Leadership on PrEP		
	prophylaxis (PrEP)	sensitization and demand	Train Prison Health Providers on PrEP and other		
	programing for	generation	forms of Prevention targeting persons at		
	prisoners		substantial risk of HIV		
			Train Prisoners as Peer Educators to scale up		
			Sensitization and demand generation for HIV		
			preventive services		
			Development of PrEP programming for those		
			already on PrEP and a package for those exiting		

		prisons linking them with CBO's to ensure good continuity.
Reproductive h STI, Hepatitis a Post Violence	B & C among prison pop	patitis Conduct Hepatitis Screening and vaccination
Harm reduction interventions for prisoner Removing hum	n Sensitization programs ta or drug prison staff on emerging ers right barriers on HIV	human prisoners Continuity of care for Medically Assisted Therapy programs Train Prison Leadership and target staff on
rights related I to prevention prisoners		emerging human right barriers affecting HIV prevention
Harm reduction interventions for prisoned	or drug and Prison towards sharir	for Ex-convicts, Prison Leadership and other
Removing hun rights related I to prevention	nan Inadequate sensitization programs targeting prisor	
prisoners KVP - People i prisons/jails/de		Train prisoners as Cough monitors and TB Champions within prison cells risoners Involving people in prisons in awareness activities
centers	towards TB control in pris	
	TUBERCU	LOSIS

Key and	KVP - People in	Development of a prison exit	Strengthen Discharge Boards in prison to support
Vulnerable	prisons/jails/detention	programs necessary for TB/HIV	continuity of Care to TB/HIV services for inmates
Populations	centers	continuity of care	exiting prisons with assistance of CSO's.
(KVP) -		Addressing the Long waiting	Renovation of Existing prison Laboratories
TB/DR-TB		time for TB diagnosis and poor	Procurement of Trunat machines and Portable X-
		treatment follow up diagnosis for	ray machine component for target prison regions
		client on TB treatment	
		Improving the Sample	Support sample networking and tracking systems
		networking and long Turnaround	in prison facilities
		time to testing laboratories in	
		prison facilities	
		Scaling up uptake of TB	Prioritize TPT commodities for prison population
		Preventive Therapy (TPT)	Sensitize Prisoners and staff on TPT
			Train health providers on TPT management
		Enhancing quality TB screening	Train Frontline Prison Officers (Documentation
		skills for Documentation	Officers) on initial TB screening using Prison Form
		providers who are the frontline	10 Form
		initial contact personnel with new	
		prisoners	
		Scaling up uptake of TB	Prioritize TPT commodities for prison population
		Preventive Therapy (TPT)	Sensitize Prisoners and staff on TPT
			Train health providers on TPT management
		MALARIA	
Vector	Insecticide treated	Increasing access to Insecticide	Distribute Nets to all Pregnant and Breastfeeding
Control	nets (ITNs) – Mass	treated Nets	prisoners including all children under five years
	i	1	

	Indoor Residual	Addressing Environmental	Sensitize Prison administration and general staff
	spraying (IRS)	programs towards vector control	on Environmental compliance and waste
			management.
		Scale up of IRS programs in	Conduct occasional IRS activities within prisons
		prisons cells and compounds	targeting prisons in regions with high malaria
			burden
	Social and behavior	Establishing joint supervision	Conduct joint supervision visits to prison station to
	change (SBC)	visits on malaria to prison	strengthen implementation of preventive programs
Case	Facility based	Enhancing provider capacity and	Train Prison health care providers on Malaria case
Management	treatment	skills through training programs	management and updates
		targeting prison health providers	