

KARGENO MONTHLY

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From the Director's Desk

July came with a full calendar and a suspicious number of “*small requests*”-some with several attachments and deadlines that appeared to have started before the request arrived. Haya, we handled them.

A new financial year gives us a chance to reset and be deliberate about where we place our energy. Being busy is not the goal; doing good work is. Progress is found in the tasks completed well, the decisions made thoughtfully and the colleagues who step in without being asked twice.

Thank you for bringing commitment, patience and humour to the Hub. August will arrive with its own deadlines and plot twists, but we will deal with what matters, ask for support when necessary and keep moving. Tuko pamoja-and if we finish before the tea gets cold, even better.

Dr. Maricianah Onono

Director, Kargeno Research & Policy Hub

July at a Glance

540 / 600 Tunawiri enrolled 90% of target	463 + 466 VSM caregivers + AGYW enrolled across 12 sites	153 MSD participants enrolled from 194 screened
9 KEN SHE exits 82% of target	393 kg VSM produce cumulative harvest by 27 July in Ratta and Obwolo	24 Psychiatry sessions completed for 10 participants in Tunawiri

Study Spotlight

MK-8527: One Month, One Tablet - Could It Be That Simple?

What if HIV prevention could be as simple as taking one oral medication a month? That is the question MK-8527 is working to answer.



By this July, 153 participants were part of that journey. The team kept in touch through scheduled visits, reminder calls and regular follow-up. The same month on the side, monitoring activities were also taking place, which meant revisiting documents, reviewing study processes and making sure the details matched the work happening on the ground. When we say the Expressive team had a full plate in July, we are not exaggerating.

As at the end of July, our follow-up visits stood as below:

SCREENING	194	0	100%
DAY1	153	0	100%
MONTH1	145	5	96%
MONTH2	121	1	97%
MONTH3	71	1	79%
MONTH4	11	0	100%
MONTH5	3	0	43%
TOTAL		7	95%

July also brought another question into focus. It is one thing to study a new prevention option; it is equally important to understand how it fits into people's lives. The team submitted an ancillary study proposal to explore the acceptability and use experiences of daily and monthly oral pre-exposure prophylaxis among adolescent girls and young women participating in the trial. If approved, the qualitative study would bring participants' perspectives into the research, helping to show what feels practical, acceptable and manageable in everyday life.

Enrolment is now paused while the site awaits approval for the next cohort. There is genuine excitement about this next phase, but for now, the team is using the time to prepare and continue supporting those already enrolled.

July also came with regulatory responsibilities, submission of the biannual progress report to PPB. for the study's progress from the beginning of screening in January through mid-June. The team is also reviewing study records, resolving outstanding queries and preparing the site for quality-assurance review.

Could one tablet a month make HIV prevention simpler in the future? The clinical trial is building the evidence, while the proposed ancillary study would help explain how such an option might be experienced by the young women expected to use it. Together, these two perspectives could provide a fuller answer.

Tunawiri: 500 Was the Assignment. Tunawiri Replied with 540.

Some targets are met. Others are passed on the way to something bigger.

Tunawiri was expected to reach 500 participants by 1st August, but the team crossed that line early and kept moving. By end July, enrolment stood at 540 - proof that when this team picks up momentum, even the deadline has to catch up. The achievement has also opened the door for the NIH submission to go in early, giving the Notice of Award process a welcome head start. Behind the 540 were 382 participants in the pre-intervention group and 158 in the intervention group.

The phased targets also continued to advance: the pre-intervention phase stood at 149/150, Step 1 at 147/150, Step 2 at 143/150 and Step 3 at 101/150. At 67%, Step 3 is now the focus of the final enrolment push.

Tunawiri is about more than enrolment. The study supports women living with HIV during pregnancy and after childbirth, including through mental-health care. Participants continued their six-week, six-month and 12-month follow-up visits while teams delivered PM+, psychoeducation, case-management support and specialist psychiatric referrals. Behind every number is a participant continuing her care and a team making sure she is not left behind.

Now, only 60 participants stand between Tunawiri and its final target of 600. Attention turns to the final recruitment stretch, the early NIH submission and preparations for the MPI visit scheduled for 5–9 October.

July's scorecard: *target beaten, follow-up moving and 600 firmly in sight; but first, a moment for July's win. Five hundred was the assignment; 540 was the response. Mapema ndiyo best huku!*

Vijana Shamba: What Changed at Home

July's household visits showed what Vijana Shamba's progress looks like beyond enrolment figures and scheduled study activities. One caregiver described how the programme had changed both his relationship with his daughters and the way he supports his family:

"I can now talk more openly with my daughters about the issues affecting them. I am also growing more vegetables for food and income, which helps me provide for my family and keep my children in school."



A Harvest in the Making: Healthy vegetables thriving at a Vijana Shamba demonstration farm

The programme also continued to grow. In July, 62 caregivers and 65 adolescent girls and young women were enrolled, bringing participation to 463 caregivers and 466 young women across 12 active sites. Relationship-strengthening sessions continued, with make-up sessions planned for participants who missed the core training.

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Relationship-strengthening sessions have been conducted to 120 participants in 6 of our sites i.e. Diemo, Nyakoko, Obambo, Obwolo and Ratta. New site was launched and started off.

At Ratta and Obwolo, two of VSM's five agricultural intervention sites, progress could be seen in a 158-kilogram and 235-kilogram harvest of fresh vegetables respectively. Behind the harvest were families learning how to grow crops, manage household budgets, keep records and turn their produce into an opportunity for income.



Learn It. Plant It. Grow It: Vijana Shamba from the classroom to the field.

After school closures disrupted some activities in June, the next step is to begin recruitment at two newly randomised schools i.e Alendu mixed and Reru AIC when they reopen in late August. This will allow more families to participate in a programme where progress can be seen in productive gardens, more open conversations and households beginning to do things differently.

For Vijana Shamba, July's progress was not represented by one number alone. It was also found in a productive garden, a more open conversation and a family beginning to do things differently.

KEN SHE: Every Final Visit Is Progress

Across Kisumu, Thika and Nairobi, KEN SHE teams are helping participants complete their final visits while ensuring that those who need continued health services remain connected to care.

One clinic day at Lumumba gives a snapshot of the teamwork behind this effort. Nine of the 11 participants scheduled for exit visits attended and completed all required procedures which is an encouraging attendance rate and that of 91%. The figure was important, but so was the work behind it. Nurses, trackers, clinicians, data staff and the pharmacy team coordinated the visits and follow ups.

As KEN SHE moves closer to completion, progress is being counted one final visit at a time. A missed appointment does not close the door. It leads to another phone call, a rescheduled visit or, where feasible, an alternative arrangement that makes it easier for the participant to attend the clinic.

That same commitment took different forms across the three sites throughout July. Kisumu maintained a steady rhythm of exit visits, while Thika reached an important milestone when all its participants completed the therapeutic sub-study procedures. In Nairobi, where some participants were unable to attend the clinic as scheduled, the team continued reaching out and arranging alternative visits to support study completion. Total exits conducted as at the end of July are:

TOTAL PARTICIPANTS EXITED ACROSS THE THREE SITES (CODE 56)				
VISIT TYPE	Kisumu	Nairobi	Thika	Total
9180	145	14	15	174
9124	436	16	19	471
TOTAL	581	30	34	645

At every site, the principle remained the same: completing a study visit should be more than a goodbye. Participants who still require HIV prevention, contraception or other health services are being connected to facilities where they can continue receiving care.

A final visit is more than an endpoint-it is a bridge to what comes next.

As KEN SHE approaches its final point, attention is turning to the remaining visits and referrals. The goal is to ensure that every participant leaves the study informed, supported and with a clear plan for any continuing care they may need.

Site & Operations

Milimani Is No Longer in the Future Tense

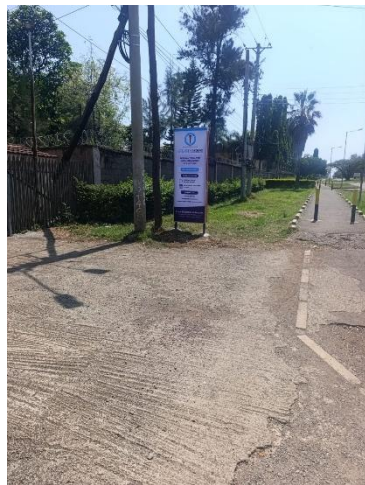
Follow the new signage from the road and Milimani now introduces itself properly. The freshly painted buildings sit within tidier, greener grounds, with flowers planted and the completed staff chill zone offering a quiet corner for those moments when stepping away from the desk is necessary.

The change continues indoors. Water, electricity, security, CCTV and air-conditioning are in place, and VSM supplies have been moved into the office. Decisions on ICT equipment and networking have been concluded, while additional chairs have been approved. These may appear to be small steps, but together they show that Milimani is moving beyond preparation and becoming a working space.

A few finishing touches remain. Plumbing and floor tiling are still underway, the partitioning plan is being reviewed, and work on the external lighting and illuminated signage is progressing. Fumigation of the two offices is scheduled for August.

What matters most, however, is what this environment makes possible. A good workspace does not do the work for us, but it gives us room to do it well. Milimani is becoming a place where teams can feel comfortable, work together and continue conducting research that improves lives. If we spend a large part of our day at work, it helps to have an office that supports both productivity and the people behind it.

Milimani is no longer simply the office we were preparing for. It is becoming a working campus with room for good ideas, collaboration and research that can make a difference. **Ber ahinya-very good indeed, and well done to the team behind the transformation.**



a) *The*

Road to Impact – New signage makes the Milimani Annex easier to locate.



FRONT-VIEW 1



FRONT-VIEW 2

b) *A Fresh Face for Research - The newly refreshed Milimani Annex.*



c) *Fresh Walls, Big Work Ahead - A refreshed space for Kargeno's growing team and expanding work.*



d) Greening Milimani, One Patch at a Time - Landscaping works underway to create a welcoming outdoor space

People: The Kargeno Family Got a Little Bigger

If the Kargeno team list looks a little longer this July, it is because three new colleagues have joined the Hub. Say hello to Michael Okoth, Administrative Operations Officer; Jully Odhiambo, Administrative Regulatory Officer; Maryline Akeyo Ayieko, Receptionist; and Jane Oluoch our Baby Minder whose work adds an important layer of care to the Hub and supports a more family-friendly workplace. July has been about settling in, meeting colleagues and understanding how the different parts of Kargeno work together. With several studies, departments and moving pieces, proper onboarding matters. Thankfully, nobody was left to assemble the Kargeno puzzle without the picture on the box.

While the new colleagues were settling in, Brighton Adipo has begun a new chapter of his own. July has seen him transition from ICT Intern to ICT Assistant, building on a journey that had already started at the Hub.

As the saying goes, *mgeni njoo, mwenyeji apone*. The extra hands have arrived at a good time. Karibuni to the Kargeno family!

Science & Publications

Manuscripts

July hasn't handed the team a new publication yet, but don't mistake that for quiet. Most submitted papers are still sitting with editors right now, while others have come back with comments and have and are being reworked for another resubmission. Two manuscripts, the Oral HPV & HIV co-infection paper and the Oral HPV, MSM and Mental Health paper are both taking shape through July. Manuscript writing is rarely a straight line, it moves through drafts, reviewer comments and rewrites long before any acceptance email arrives. Publishing has its own rhythm - this month, progress didn't look like an acceptance email, but the manuscript team kept moving through revisions, reviewer responses and stronger resubmissions.

From Kargeno to Rio

What began as counselling sessions and participant follow-up on the ground in Kenya is now reaching an international stage. At the 26th International AIDS Conference, taking place in Rio de Janeiro from 26th – 31st July, the Tunawiri study will present a poster on 28th July on: "Assessing Problem Management Plus for Reduction of Depression and Anxiety in Pregnant Women with HIV in Kenya." Our PI, Dr. Maricianah Onono, presented this poster carrying work that started in Kisumu onto one of the world's largest HIV research stages.

Athens Is Also on the Calendar

Athens is next in the sights. Preparations for IPVS 2026 (22nd - 25th October 2026) themed "*Lighting the Flame for a World Free from HPV-Related Diseases*", are already underway. A HPV abstract has gone in and the team is now in that familiar waiting game, while poster and travel plans quietly move forward in the background. It's a big room to be in: IPVS is where the global HPV conversation happens, so getting a seat there matters. Abstract decisions and acceptance land mid-September, so we are now watching this space - until then, it's a waiting game worth the wait.

New Work Taking Shape

A few new things are brewing too, and none of it happens without the team quietly pushing behind the scenes. Tunawiri got there early, hitting its 500-participant milestone ahead of schedule, the kind of early win that takes the pressure off everyone downstream, and it's already paying off, with the NIH enrolment submission going in sooner than planned. EXPRESSIVE has picked up the momentum also - the qualitative ancillary study running alongside the main trial (the Phase 3 study testing a once-monthly oral pill for HIV prevention in women), it's now progressed to CSC review. Doravirine is right there with it. And quietly, in the background, the PID collaboration with Gates keeps chugging along too.

Community & Engagement

The Questions That Opened Doors

Some came to understand how the MSD study works. Others stopped for a blood-pressure check. A few students simply wanted to know, "How do I get into research?" July's community engagement did not begin with one message-it began with questions. Several even left with EXPRESSIVE brochures and a clearer idea of where their interest might take them.

Taking the Work Public at the ASK Show

The team took things up a notch, setting up an exhibition stand at the ongoing ASK Show at Mamboleo ASK Grounds. With tents and banners representing KenSHE, Tunawiri, MSD, and Vijana Shamba Maisha, the stand gave the public a full tour of Kargeno's research portfolio - no ticket required. Visitors got health education on HIV prevention and PrEP, had their questions and misconceptions cleared up on the spot, and walked away better informed than when they arrived. Beyond the day's engagement, the exhibition also strengthened community partnerships and gave the hub a solid boost in visibility.



Health Checked, Curiosity Sparked: Kargeno at the ASK Show

Bringing PrEP Awareness Directly to the Community

Across all four study sub-counties, the team ran the MSD Acceleration Campaign, designed to boost community awareness of the PrEP study. Health education sessions, community sensitisation, and interactive Q&A forums gave people the space to ask questions, raise concerns, and get straight answers, no question too small, no myth left unchallenged.

Twelve Girls, Five Departments, One Big Picture

Just before July signed out, the MSD site had one more important visit on its calendar: 12 girls from the Youth Community Advisory Board (YCAB), pictured here with the study team.

This was not a quick look-around-and-leave kind of visit. The data, pharmacy, laboratory, clinic and outreach teams opened their doors and walked the girls through the full participant journey from the first recruitment conversation to enrolment, clinic visits, adherence support, sample processing and the follow-up that keeps participants connected to the study. By the end, one thing was clear: no department does it alone. *Kama wahenga walivyosema, kidole kimoja hakivunji chawa.* The science may happen in different rooms, but it works best when the teams and the young people at the heart of the research - remain part of the same conversation.



Youth Voices, Meaningful Engagement - YCAB members engaging with the study team during their visit to the MSD study site

Radio, Reach and Real Conversations: EXPRESSIVE-10 in the Community

PrEP conversations often begin with “niliskia...ooh...” and, somewhere along the way, hearsay gets promoted to fact. The EXPRESSIVE-10 outreach team decided accurate information deserved the microphone.

A ten-part weekly radio series is bringing honest HIV-prevention conversations closer to adolescent girls and young women. The discussions cover bodily autonomy, relationships, HIV prevention, stigma, gender-based violence, PrEP, peer pressure and participation in research. Each broadcast also directs listeners towards youth-friendly services and trusted sources of support. Nobody needs complicated medical language or a lecture for the sake of lecturing, just useful information they can understand and apply.



Mic Check, Myth Check: The EXPRESSIVE-10 outreach team on air at Nam Lolwe FM, turning PrEP questions into clear, trusted conversations.

Community engagement continues after the studio microphones go off. Dholuo drama skits, community talk shows, youth champions, local leaders and targeted outreach are taking the same conversations to places where young women live and spend their time. A familiar voice speaking a familiar language can sometimes answer the question someone may hesitate to ask inside a clinic.

EXPRESSIVE-10 wants young women to do more than hear about HIV prevention. Girls and young women should be able to ask questions, challenge myths, understand their choices and make informed decisions about their health. One honest conversation can achieve more than a pile of brochures collecting dust. The aim is to ensure that “niliskia...” finally ends with “sasa nimeelewa.”

Open MCH: Routine Childhood Immunization at Kargeno Hub

Routine childhood immunization is one of the safest and most effective ways to protect children against vaccine-preventable diseases.

At KEMRI Kargeno Research & Policy Hub, we are committed to providing quality, friendly, and respectful immunization services in a welcoming environment

OPEN TO
Study participants and non-study families

VACCINES
KEPI-approved childhood immunizations

OVERSIGHT
Direct Ministry of Health oversight

HOURS
Weekdays, 8:00 AM-5:00 PM

Parents and caregivers are invited to bring their babies for timely routine immunization. The service is open to everyone, including families not enrolled in any Kargeno study. Visit Kargeno Hub on weekdays from 8:00 AM to 5:00 PM and help protect your child today for a healthier tomorrow.

Looking Ahead

August Loading...

July may be wrapping up, but August has already arrived with a full calendar.

- **Tunawiri:** Following the early achievement of the 500-participant milestone, the NIH enrolment submission is due on 1 August. The journey toward 600 continues through community mobilisation and collaboration with Community Health Promoters. With enrolment potential varying across facilities, the team is adjusting its approach, strengthening efforts at Kuoyo following HIV test-kit stock-outs at Nyalunya and working with available facility teams to sustain community engagement. Kwa ground, flexibility is part of the plan.

- **MK-8527:** The site is preparing for a Good Clinical Practice quality-assurance audit while continuing to support the 153 participants already enrolled. The team is also awaiting approval to begin enrolment of the under-18 cohort, so for now, the next chapter is ready but still waiting for the official green light.

- **Vijana Shamba:** Recruitment, participant follow-ups and agricultural and relationship-strengthening sessions will continue across the study sites. The work will keep moving between classrooms, households and farms- because VSM rarely stays in one setting for long.

- **Science and new studies:** Manuscripts will continue making their way through revisions, reviewer responses and editorial desks. Preparations for Doravirine MK1439-066 and the EXPRESSIVE qualitative sub-study will also continue, alongside ethics and regulatory work. Around here, a “final draft” may still return with homework.

- **Team planning:** The PID South Africa retreat is tentatively planned for 24th – 28th August, subject to confirmation.

- IPVS Conference is also on the sideline as it brings more opportunities to the site.

August will definitely be bringing community mobilisation, participant visits, an audit prep, submissions and the usual conversation and work across the studies. The calendar is full, but there is good work behind every entry. August - twende kazi, but perhaps after one good cup of tea. July was something. August is the continuation.

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Advancing equitable health outcomes through innovative clinical research, strategic partnerships, and evidence-based solutions