

Improving global M&E of programs for orphans and vulnerable children



MEASURE Evaluation Fact sheet Programs for orphans and vulnerable children

At MEASURE Evaluation, we know that improved analysis and use of data lead to better health program decision making and, ultimately, improved health outcomes. This fact sheet introduces one of the innovative toolsets created for monitoring & evaluating public health interventions.

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To learn more about MEASURE Evaluation and our current activities, visit us on the Web at www.cpc.unc.edu/measure.



Overview: MEASURE Evaluation works to improve global M&E of orphans and vulnerable children (OVC) by offering tools and technical assistance, analyzing at-risk populations, and evaluating existing OVC programs.

An estimated 12 million children in sub-Saharan Africa have lost one or both parents to AIDS. These children face many challenges to their health and well being, including an increased risk of injury and illness; inadequate food, shelter, and medical care; exploitative caregivers, and mental trauma. Despite the recognition of the magnitude and negative consequences of these problems, there is little evidence for what kinds of programs best improve the well being of children affected by HIV/AIDS.

In support of major efforts by the U.S. President's Emergency Plan for AIDS Relief to improve OVC program effectiveness, MEASURE Evaluation is providing much-needed data about OVC programs and populations to developing countries and organizations implementing these projects. The main components

to MEASURE Evaluation's OVC work include:

- public health evaluations of existing programs;
- examinations of behaviors and other characteristics of at-risk populations;
- a new toolkit, the Child Status Index, to aid OVC programs; and
- mapping of OVC populations in relation to available aid organizations, health centers, and other locations.

Evaluating Existing Programs: The recent emergence of OVC as a vulnerable group means that programs do not have an established literature of what practices do and do not work or how much activities cost. Established OVC programs have few opportunities to communicate with

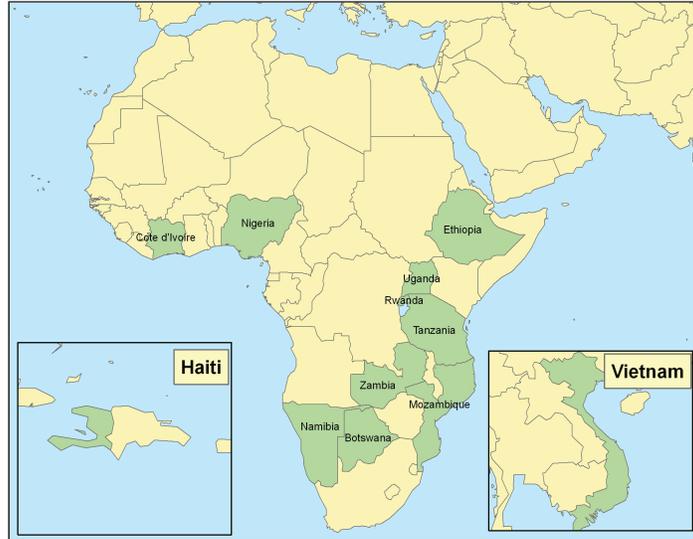
each other and share the lessons they have learned. MEASURE Evaluation is currently conducting targeted evaluations of OVC programs in four unique settings, two in Kenya, and two in Tanzania. The evaluation includes case studies, quantitative impact assessments utilizing post-test study designs and a cost-effectiveness analysis of different activities of each program. Four case studies discuss successful innovations that OVC programs have implemented, as well as long-term challenges that programs face and efforts that have been unsuccessful. The impact assessments include survey data from youth age 8-14 and their guardians as well as focus groups among program stakeholders and participants.

To provide more information about the various types of interventions and the lessons learned from program implementation to date, MEASURE Evaluation is also providing technical assistance in the development of 32 case studies documenting various OVC program models within South Africa. A synthesis report considering results from all 32 case studies will help to identify various strategies in meeting the needs of OVC and their guardians, highlight gaps in service delivery and identify best practices relating to improving the effectiveness and increasing the scale of OVC interventions.

Extending PLACE to OVC: Girls orphaned or made vulnerable by AIDS are significantly more likely to acquire HIV during their adolescence than non-orphaned girls (male children orphaned by AIDS are at no additional risk). However, the causes for orphaned girls' increased risk, as well as the best ways to reduce this risk, are largely unknown. MEASURE Evaluation researchers used the PLACE (Priorities for Local AIDS Control Efforts) methodology to identify the locations where orphaned girls meet sexual partners, and the places where older men, who are more likely to have HIV, meet young girls in the Hwange district of Zimbabwe.

This study also includes a household survey that examines how significant the practice of men visiting girls at girls' homes in order to have sex with them is in transmitting HIV. This study focuses on orphaned girls from the ages of 12 to 17, but younger girls and older adults were also interviewed. The results of this study will provide additional data about the sexual behavior of orphaned girls and the men most likely to transmit HIV to them and/or take advantage of them; these data will then guide future prevention and outreach programs.

The Child Status Index (CSI): MEASURE Evaluation has developed a new toolkit to provide broad-ranging and cost-effective evaluation of OVC programs. The CSI monitors children's long-term well being in addition to their physical health. The CSI is designed to be used by local community health workers, who are in the best position to regularly monitor the children. The CSI will be able to monitor children's well being on a regular basis to provide routine data on the impact of OVC programs. The CSI tool is simple, reliable, and user-friendly, and it can be used by people who have not had specific M&E training. The CSI will provide policymakers with better assessments both of orphans and vulnerable children's well being and how resources should be spent to best meet those children's needs.



OVC Mapping: To improve the provision of OVC services, it is essential to know where OVC populations, existing aid services and other resources are located. MEASURE Evaluation's OVC Mapping Activity will evaluate data from 12 countries: Haiti, Vietnam, Cote d'Ivoire, Nigeria, Ethiopia, Uganda, Rwanda, Tanzania, Mozambique, Zambia, Botswana and Namibia, in order to produce detailed maps quantifying the degree of need in every region of a country.

The OVC Mapping Activity will provide Emergency Plan activities with a repeatable approach to OVC mapping. It will also help missions and partners produce their own maps of OVC populations and services. As an additional benefit, the activity will evaluate the state of OVC data for existing countries and identify deficiencies in data infrastructures, both to facilitate better mapping and to ensure higher quality data for non-mapping OVC activities. The scale and detail of each country's map will be tailored to best fit with the country's available data.

For more Information

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