

Monitoring Outcomes of PEPFAR Orphans and Vulnerable Children Programs in Kenya 2016 Survey Findings from APHIAplus Western Kenya

Purpose

As part of its monitoring, evaluation, and reporting (MER) guidance, the United States President's Emergency Plan for AIDS Relief (PEPFAR) launched a set of outcome indicators for orphans and vulnerable children (OVC) programs in 2014. The purpose of collecting these MER OVC Essential Survey Indicators is to obtain a snapshot of program outcomes at one point in time (Round 1: November 2016) and to assess changes in outcomes among OVC program beneficiaries over time (Round 2: planned for late 2018). MEASURE Evaluation, funded by the United States Agency for International Development (USAID) and PEPFAR, conducted this Round 1 survey among beneficiaries of the USAID APHIAplus Western Kenya project (APHIAplus) in late 2016. MEASURE Evaluation collected data from 426 caregivers about themselves, their households, and 1,458 children under age 18 who were under their care (an 89 percent household response rate).

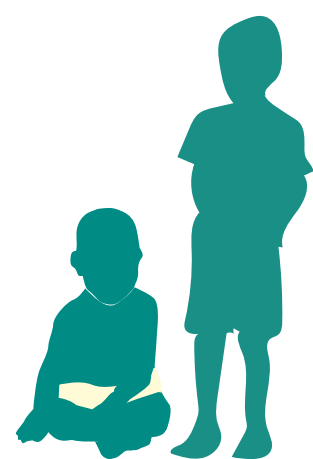
Project Description

APHIAplus was led by PATH and implemented through 76 local nongovernmental, community-based, and faith-based partners in Bungoma, Busia, Homa Bay, Kakamega, Kisii, Kisumu, Migori, Nyamira, Siaya, and Vihiga Counties, in western Kenya. The project, which operated from 2011 to mid-2017, delivered an array of programs and services, HIV care and treatment, water and sanitation, malaria, family planning and reproductive health, and maternal, neonatal, and child health. Its OVC program was integrated in this broader program platform and focused on healthcare, nutrition, shelter, psychosocial support, child protection services, education support, and household economic strengthening. In the first six months of FY 2016, APHIAplus reported that it had provided OVC programs and services to more than 190,000 individual OVC beneficiaries.

This publication was produced with the support of the United States Agency for International Development (USAID) under the terms of MEASURE Evaluation cooperative agreement AID-OAA-L14-00004. MEASURE Evaluation is implemented by the Carolina Population Center, University of North Carolina at Chapel Hill in partnership with ICF International, John Snow, Inc., Management Sciences for Health, Palladium, and Tulane University. Views expressed are not necessarily those of USAID or the United States government. GR-18-013

HEALTH

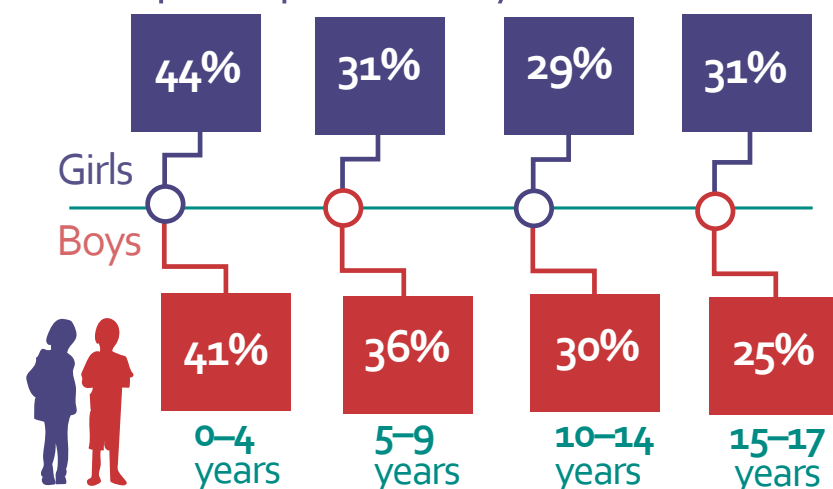
74% of children have a primary caregiver who knows the child's HIV status, based on an HIV test



Of children ages 6-59 months,

2% of girls
3% of boys
were undernourished

Children ages 0-17 years, who were too sick to participate in daily activities



ECONOMIC WELL-BEING AND RESILIENCE

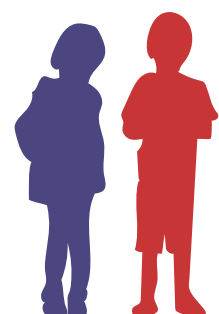
39% of households were able to access money



to pay for unexpected household expenses

LEGAL PROTECTION

Girls and boys who have a **verified birth certificate**



36% of girls
37% of boys

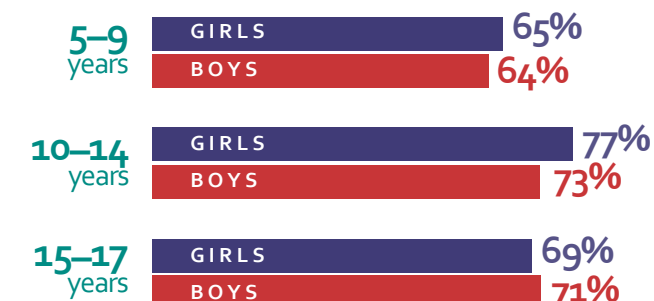
CHILD PROTECTION

72% of caregivers agree that harsh physical punishment is an appropriate means of discipline in the home or school

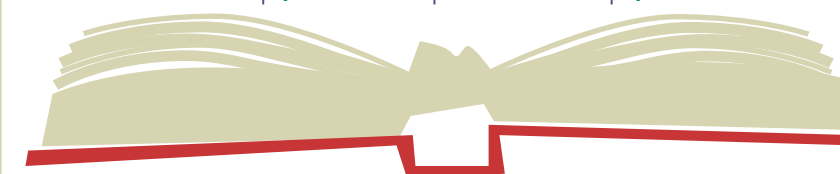


EDUCATION

Children regularly **attending school**



Children who progressed to a more advanced level in school



94% of children < 5 recently engaged in **stimulating activities**

