

Monitoring Outcomes of PEPFAR Orphans and Vulnerable Children Programs in Namibia

Comparison of 2016 and 2018 Findings from the Project HOPE Namibia Panel Study

Purpose

MEASURE Evaluation—funded by the United States Agency for International Development (USAID) and the United States President's Emergency Plan for AIDS Relief (PEPFAR)—conducted a study of PEPFAR-funded programs for orphans and vulnerable children (OVC) in Namibia, using PEPFAR's monitoring, evaluation, and reporting (MER) essential survey indicators (ESI). The study focused on the work of Project HOPE Namibia (PHN) and was designed to answer these two questions: (1) What is the well-being of OVC in PHN's PEPFAR-funded OVC projects in six districts of Namibia? (2) Has the well-being of these children improved over time?

In Round 1 of this panel study, conducted in 2016, caregivers of OVC in 591 households were interviewed to assess the well-being of the children in their care. Of that group, caregivers in 545 PHN-beneficiary households were interviewed again in 2018, for Round 2, after verification of their status with PHN's updated records and a community trace-and-verify exercise. We asked the caregivers about the PHN program services received or accessed and/or activities offered that aimed to improve the health and well-being of OVC in the household. Data collection used standard questionnaires programmed into an electronic data capture system. We measured OVC well-being by analyzing these data using the nine MER ESI.

Project Description

PHN—funded by PEPFAR through USAID/Namibia—implements programs to mitigate the impact of HIV on people who have the virus and those affected by it (OVC and their caregivers). The project covers 14 districts in eight regions. PHN partners with Catholic AIDS Action, a faith-based organization, to deliver necessary services and follow-up to HIV-affected communities, households, and children. PHN aims to equip the children with knowledge and skills to live responsibly and avoid behavior that would put them at risk of acquiring HIV.

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HEALTH



Percentage of children whose primary caregiver knows the child's HIV status, based on an HIV test*

ROUND 1	53%	57%	53%	56%	55%
ROUND 2	57%	60%	67%	69%	64%
	0-4 years	5-9 years	10-14 years	15-17 years	0-17 years

Of children ages 6-59 months,

ROUND 1	11%
ROUND 2	12%



were undernourished

No statistically significant change



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

ROUND 1	34%	22%	18%	18%	24%
ROUND 2	24%	12%	7%	8%	13%
	0-4 years	5-9 years	10-14 years	15-17 years	0-17 years

ECONOMIC WELL-BEING AND RESILIENCE

Percentage of households that were able to access money to pay for unexpected household expenses



56%	ROUND 1
49%	ROUND 2

No statistically significant change

LEGAL PROTECTION

Percentage of all children who have a verified birth certificate

ROUND 1	47%	62%	61%	71%	57%
ROUND 2	52%	60%	62%	66%	60%
	0-4 years	5-9 years	10-14 years	15-17 years	0-17 years

No statistically significant change

CHILD PROTECTION

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



62%	ROUND 1
42%	ROUND 2

EDUCATION

Children regularly attending school

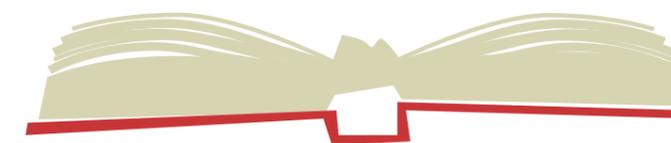


ROUND 1	39%	74%	74%	75%	68%
ROUND 2	65%	80%	84%	79%	77%
	5-6 years	7-9 years	10-14 years	15-17 years	5-17 years

Children who progressed to a more advanced level in school

ROUND 1	33%	74%	80%	76%	73%
ROUND 2	61%	88%	78%	78%	75%
	5-6 years	7-9 years	10-14 years	15-17 years	5-17 years

No statistically significant change



Percentage of children < 5 recently engaged in stimulating activities



59%	ROUND 1
87%	ROUND 2

*Some Round 1 figures shown here do not match those presented in the fact sheet for Round 1 that MEASURE Evaluation published in 2018 (<https://www.measureevaluation.org/resources/publications/gr-18-017>). This is because the data in this fact sheet are limited to households that were visited and interviewed in both Round 1 and Round 2, matched by age and sex of the beneficiary children.