





After help leaves: post-graduation outcomes in PEPFARsupported OVC projects in Nigeria

Background

The United States Government's support to Nigeria's national HIV response, through the President's Emergency Plan for AIDS Relief (PEPFAR) multi-year investment, includes programming for orphans and vulnerable children (OVC). Recently PEPFAR has implemented a geographic pivot, intensely scaling up interventions in prevention, care and treatment in 32 high-burden local government areas (LGAs) (known as "scale-up LGAs") and sustaining support for the people living with HIV in other LGAs (known as "sustained support LGAs").

Over 800,000 children and their families benefited from PEPFAR-supported services, across more than 100 LGAs, in 2015. Because of the PEPFAR pivot, partners were expected to graduate or transfer 30% of their active participants in sustained support LGAs by the end of September 2016 and an additional 600,000 OVC by the end of September 2017. While this graduation was mandated by PEPFAR, the original program designs did not place a major emphasis on graduating households prior to project conclusion; rather, in line with previous designs, projects were focused on delivering services and transferring the case load to upcoming implementers. While graduation presumed that households would continue to maintain the improvements in their wellbeing after graduation, prior to the strategic geographic pivot, this definition of graduation had not been implemented in the PEPFAR Nigeria OVC program and was yet to be proven as effective or feasible. It therefore remains unclear whether the effects of OVC program interventions on participants (at the point of graduation) will be sustained in the post-graduation periods. There is also a dearth of information on the mix of criteria, benchmarks and procedures for responsible OVC household graduation that best suits programming in Nigeria.

Study Objective

This study aimed to trace a sample of graduated OVC and their primary caregivers to assess their well-being and to understand the perceived changes in OVC well-being following graduation from a PEPFAR-funded OVC program.

This tracer study provides evidence on the state of and perceived changes in child and caregiver well-being since graduation. The study will also contribute to the national and global evidence on the OVC household graduation approaches, its effect on the well-being of graduated households and implications for future programming.

Methodology

The survey was conducted among households who graduated under the individual implementing partner graduation criteria (before November 30, 2016) and under harmonized criteria thereafter. The proportion experiencing indicators (that were measured at both study time points) were compared between postgraduation and at graduation using McNemar test. Children and caregivers' factors associated with the indicators that were significantly different between study time points were investigated using multiple logistic regression analysis. The effect of the factors on the indicators were quantified using odds ratios with their respective 95% confidence intervals derived from logistic regression models (adjusted for relevant covariates). All quantitative analysis was carried out using IBM SPSS Statistics version 22 at 95% confidence level.

Sample

A total of, 3,205 participating households (caregivers) with 2,655 (82.8%) of those being women with a mean (±SD) age of 40.77 (±12.22) years were sampled. Most the caregivers (1,026 / 32.0%) had completed primary school education while 189 (5.9%) reported to have completed tertiary education. The study included 3,004 OVC (1,967 aged 0-9 years and 1,037 aged 10-17 years) from the selected households. The OVC participants comprised of almost equal proportion of male, 1,509 (50.2%) and female, 1,495 (49.8%) but more than half, 544 (52.5%) of the OVC (10-17 years) were boys while 1,002 (51.0%) of the children (0-9 years) were girls.



Tracing children and caregivers is important for understanding how to responsibly graduate OVC and their households

Key study results

CHILD SAFETY

- 66% of OVC indicated they have a birth certificate, but only 26% could produce it.
- 12% of the children 10-17 years had experienced at least one sexual violence event since graduation.
- The proportion of children 10-17 years who reported working for money or in-kind benefits increased from 70% (graduation) to 100% (post-graduation).

Children in graduated households still face safety-related threats to their well-being such as physical and sexual violence. Exposure to involvement in child labor practices increased after graduation indicating a need for a wider shift in community norms around child protection.

CHILD WELL-BEING

- 51% of caregivers reported having been able to access money to pay for unexpected household expenses (at graduation).
- The financial self-efficacy of caregivers was similar between graduation and post-graduation yet there was a decline in caregivers who developed a household budget (from 78% to 63%) and continued savings in formal or community savings group (70% to 66%).

The analysis shows that many OVC households remain food insecure post-graduation, suggesting the need for context specific food security strategies. While 63% of OVC households maintain a budget and 66% are saving, only a few caregivers are confident they can manage problems and cope with setbacks. These data suggest that PEPFAR and OVC projects need to invest more heavily in food security and household economic strengthening activities.

SCHOOLING

- Among children aged 5-9 years, school enrollment was significantly higher post-graduation (84%) than at graduation (79%); while among 10 to17-year-olds, school enrollment was similar at graduation and post-graduation.
- The majority (66%) of the children were found to have progressed in school during the last year.

Most of the children in graduated households are in school, regularly attending school and progressing to higher classes. Children 0-9 years more regularly attended school than children 10-17 years.

HIV/AIDS KNOWLEDGE AND TESTING

- 35% of OVC (10-17 years) reported HIV risky intentions at graduation but increased to 93% post-graduation.
- 57% of OVC in both the younger and older age groups were reported to have been tested for HIV after which the majority of them (93% 0-9 years; 88% 10-17 years) received their test results.
- 79% of caregivers reported to have been tested for HIV and all of them have received the test results.

The majority of the OVC participants had knowledge of HIV/AIDS but the HIV risk intention increased alarmingly to above 90% post-graduation.

OVERALL HEALTH

- More than half (61%) of the children (0-4 years) did not receive the required immunizations.
- Although 69% of the caregivers reported having access to needed health services post-graduation, more than onequarter (26% graduation; 27% post-graduation) reported being too sick to participate in daily activities.

Post-graduation, 25% of the children had overall well-being that was above average. Most caregivers were not hopeful in terms of outlook and the ability to reach desired goals, though the rate decreased marginally after graduation. Caregivers' high financial self-efficacy and caregivers' participation in caregiver's forum were found to enhance the overall well-being of children.

Conclusion

Post-graduation, the well-being of most children in the study was below average. The study concluded that the quality of the graduation process (even after harmonization of graduation criteria) was poor, as record reviews revealed graduated households did not meet the graduation benchmarks. Though most of the caregivers still participate in caregiver forums and savings groups, the overall wellbeing of the households appears to decline post-graduation. There was low utilization of the graduation benchmarks by implementing partners in determining eligibility for graduation. This was explained in the qualitative phase to be due to budget constraints, contents of existing care-plans and the stress to reach pre-determined household graduation targets. The study provides specific recommendations for PEPFAR Nigeria, the Government of Nigeria, implementing partners and civil society organizations to suggest improvements going forward.

For a full copy of the report please write to the 4Children team at contact@4-children.org

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