

# Monitoring Outcomes of PEPFAR Orphans and Vulnerable Children Programs in Mozambique

## 2017 Survey Findings from COVida

### Purpose

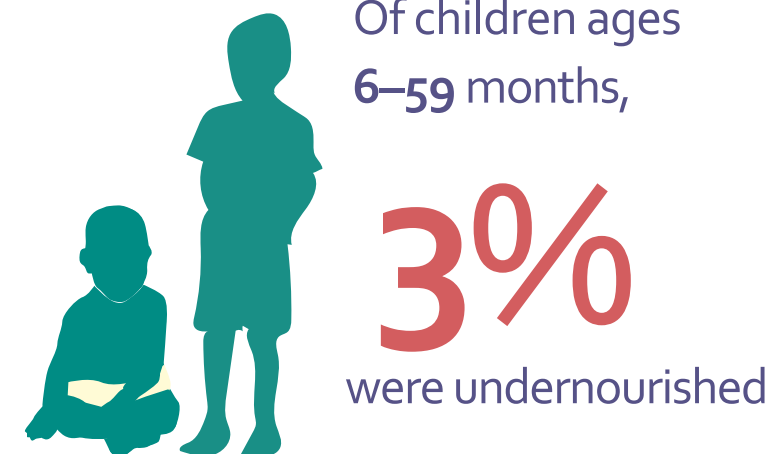
As part of its monitoring, evaluation, and reporting (MER) guidance, the United States President's Emergency Plan for AIDS Relief (PEPFAR) launched a set of outcome indicators for orphans and vulnerable children (OVC) programs in 2014. The purpose of collecting these MER OVC Essential Survey Indicators is to obtain a snapshot of program outcomes at one point in time (Round 1—August 2017) and to assess changes in outcomes among OVC program beneficiaries over time (Round 2—planned for mid-2019). MEASURE Evaluation, funded by the United States Agency for International Development (USAID) and PEPFAR, conducted this Round 1 survey in the areas in which COVida was working in mid-2017. MEASURE Evaluation collected data from 1,255 caregivers about 4,491 children (an 87% response rate).

### Project Description

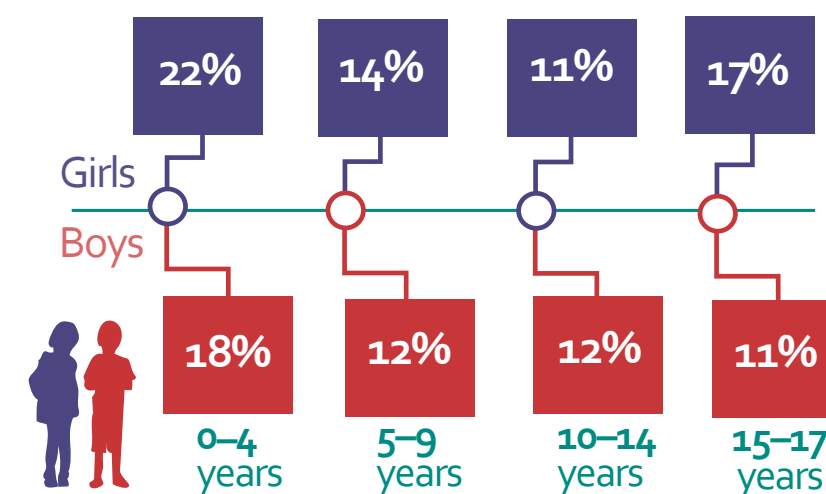
COVida is a 5-year (2016–2021) USAID-funded project implemented by FHI 360 in partnership with Palladium, World Vision, CARE, PATH, and N'weti. The goal of COVida is to improve the health, nutritional status, and well-being of the OVC living in areas defined by PEPFAR as priority districts for epidemic control. The project has four key objectives: (1) increase the utilization of quality social, health, and nutritional services among the children and caregivers in districts served by the project; (2) reduce the economic vulnerability of OVC households so that they can better provide and plan for the essential needs of the children in their care; (3) increase the capacity of families and communities to better provide early childhood development services that promote healthy, nurturing, engaging, and safe environments for vulnerable children under the age of 5; and (4) increase the capacity of district government and communities to respond to and manage cases for vulnerable families and children. The project supports more than 300,000 OVC and their caregivers a year to access high-quality, comprehensive, compassionate services nationally.

### HEALTH

**35%** of children have primary caregivers who know their HIV status, based on an HIV test



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



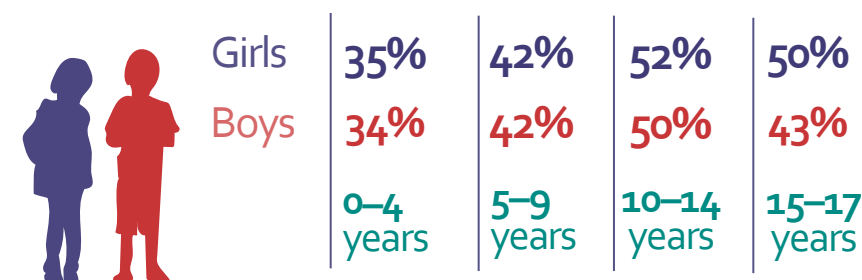
### ECONOMIC WELL-BEING AND RESILIENCE

**47%** of households were able to access money to pay for unexpected household expenses



### LEGAL PROTECTION

**44%** of girls and boys have a verified birth certificate



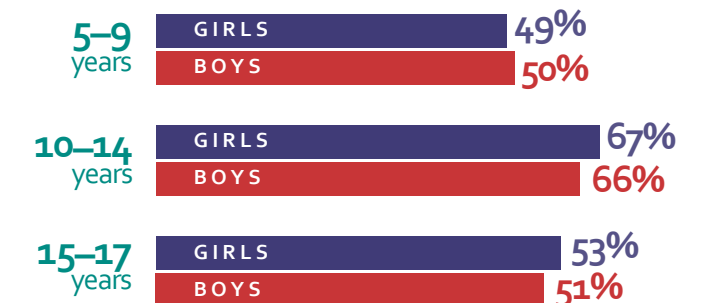
### CHILD PROTECTION

**16%** of caregivers agree that harsh physical punishment is an appropriate means of discipline in the home or school

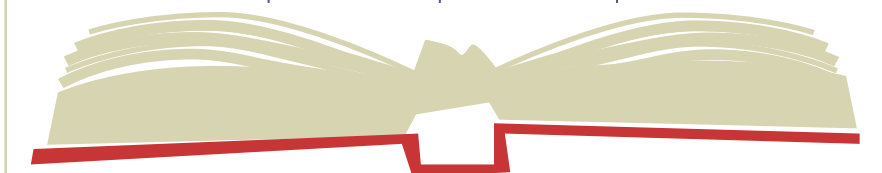


### EDUCATION

Children regularly **attending school**



Children who progressed to a more advanced level in school



**74%** of children < 5 recently engaged in **stimulating activities**

