

# Best Evaluated Programs:

*Improving the wellbeing of children affected by HIV&AIDS*

## Children & HIV&AIDS

Action Now Action  
How: An International  
Symposium

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## Outline

- Magnitude of the vulnerable children care needs and Issues
- Evidence on effectiveness of varying care models
- Scaling up the models, recommendations and Lessons Learned

# Introduction

- Consensus on quality and evidence based programming for children
- Evidence of magnitude of children's vulnerability
  - Worldwide 15.2 million orphaned by AIDS
  - 12.1 million out of 40 million orphans in Sub-Sahara Africa
  - Almost equal number vulnerable
- Increased burden of care overstretching extended family and other traditional safety nets

# Introduction

- Evidence of situation of orphan and vulnerable children: Worse off in:

- Educational
- Psychosocial wellbeing
- Health and nutrition
- Socio-economic wellbeing
- Abuse of rights



# Issues

- Numerous strategies and intervention models
  - Comprehensive community mobilisation and empowerment
  - Food aid
  - School feeding
  - Psychosocial support
  - Cash transfer
  - Institutional care.
- Some qualitative and quantitative studies showing improvement in outcomes measures
- Limited rigorous evaluation of effectiveness of various intervention models

## Evidence: Institutionalization Versus Community-based Care

- **Long-term institutionalisation of children**
  - More costly
  - Has negative children's psychosocial outcomes
- **Dominant model: community-based care**
- **Many different models of community-care:**
  - Direct support with minimal community participation
  - Mobilisation and empowerment of existing CBOs
  - Capacity building and grants to existing CBOs

# Evidence: Community-Based Mentoring Program for Youth Headed Households

- **Adult mentorship and support**
- **Quasi-experimental design**
  - **Impact on psychosocial well-being of youth headed households**
    - **Basic needs support versus basic needs and adult mentorship**
- **Results: Significant effect in decreasing:**
  - **Feeling of marginalisation**
  - **Maltreatment**
  - **Perceived grief**
  - **Depressive symptoms**

## Evidence: Interpersonal Psychotherapy Treatment in Groups (IPTG)

- **High prevalence of depression and other psychosocial maladjustments on caregivers, children and youth**
  - **Increased chronic illness and mortality due to AIDS, war and conflict**
- **Randomised controlled trials using IPTG show effectiveness in:**
  - **Reducing symptoms of depression and anxiety**
  - **Ameliorating conduct problems**
  - **Improving functional**



**Christian**

**Advocacy**

Mobilizing faith communities

**Channels of Hope (CoH)**

Community-led care for OVC

**Community Care Coalitions (CCC)**



**Child Protection**

**Psychosocial support**

**Child focused**

**Gender**

**Community based**

## Evidence: Community-led Care Model

- Community trial/ experimental design
- Increase in % participating in care
  - Community and faith groups
  - Individual community members
- Vulnerable children's level outcomes:
  - Access to external support
  - Recent food adequacy
  - Access to health care when sick
  - Access and utilisation of ITNs
  - School enrolment in one site
- However, needs far outweigh available resources

## Scaling up of the models

- Few models scaled up
- World Vision care Models scaled-up in 19 countries in SSA by September 2007
  - 386 Area Development Programmes (ADP) and non-ADP projects
  - Almost 59,000 OVC Home Visitors across 3,700 community care coalitions (CCCs)
  - About 1,354,000 OVC identified
  - 842,000 OVC received care from home visitors and/or WV staff

## Scaling up of the models 2

- Some effective scale-up challenges:
  - Consideration of massive scale of the problem in allocating resources
  - Limited Governments' political and financial commitment
  - Most donors have short funding cycles
  - Capacity of institutions is likely to be weak
  - Donors require rapid beneficiary results but effective community mobilisation takes time
- Success factors for agencies:
  - Availability of adequate resources
  - strong partnership with communities
  - strong inter-agency partnerships including government

## Key Recommendations

- Donors, governments and implementing agencies should invest heavily in:
  - Supporting implementation of well designed impact assessment studies
  - Building capacity of institutions and existing community structures and networks that provide care and support for vulnerable children
  - Supporting and strengthening national level cash transfers

# Thank You



**WV Core Resource CDs Available in Front**