Monitoring, Evaluation, and Reporting (MER) Guidance (v.2.7): ORPHANS AND VULNERABLE CHILDREN (OVC)

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Training Outline

Section 1: Overview of the Technical Area

Section 2: Indicator Changes in MER 2.7

Section 3: Overview of Indicators

Section 4: Data Use

Section 5: Additional Resources and Acknowledgments

Section 1: Overview of OVC

PEPFAR's OVC Mandate

OVC Earmark
- 10% of annual bilateral funding

OVC Definition
- Children orphaned by, affected by, or made vulnerable to HIV/AIDS

Program Purpose
- Mitigate the impact of HIV on children and adolescents
- Prevent HIV & AIDS-related morbidity and mortality

OVC Program Vision

Priorities

- Supporting **continuity of treatment for** children & adolescents
- Helping to **find** children living with HIV who have not yet been diagnosed
  - Facilitating **index testing** of biological children of mothers living with HIV
- Providing **primary prevention** of HIV & sexual violence interventions for children aged 10-14 years
- Collaborating with **DREAMS** for AGYW 10-17 in DREAMS SNUs

Three Different but Complementary Models

OVC Comprehensive

- *Family-based*
- Children aged 0-17 with known risk factor (i.e., HIV+, SVAC)
- Case management & multiple supportive interventions
- Graduation benchmarks

OVC Preventive

- *Group-based*
- Boys & girls aged 10-14 in highest burden SNUs
- Single evidence-based intervention

DREAMS

- *AGYW-focused*
- AGYW aged 10-17 at elevated risk of HIV in DREAMS SNUs
- Layered interventions for AGYW, her parents, and her community (DREAMS core package)

Individuals may programmatically be in multiple models based on their unique needs. **For OVC_SERV categories are mutually exclusive.**

Section 2: Indicator Changes in MER 2.7

Overview of OVC Indicators

Program Area Group	Indicator	Indicator Description	Reporting Frequency	Reporting Level
Prevention	**OVC_SERV**	Number of participants served by PEPFAR OVC programs for children and families affected by HIV	Semi-Annually	Community & Facility
Testing	**OVC_HIVSTAT**	Percentage of orphans and vulnerable children (<18, and 18-20 years old) enrolled in the OVC Comprehensive program with HIV status reported to implementing partner.	Semi-Annually	Community & Facility

Indicator Changes in MER 2.7

Change	Programmatic Rationale
OVC_SERV: Clarifying guidance around Peace Corps Volunteer OVC Preventive activities reporting in the reference sheet and Appendix	In instances when a Peace Corps Volunteer is placed to work with an Implementing Partner that provides services to its beneficiaries under the OVC Comprehensive Model, the Peace Corps support falls under the OVC_SERV Preventive Model. Both Peace Corps and the implementing partner should report their associated activities, ensuring that all entities receive accurate attribution for their work. It is not expected that double-counting of PC services towards OVC_SERV Preventive will significantly impact the total number of OVC_SERV Preventive results.
OVC_HIVSTAT: Added age disaggregate to include OVC 18-20 years of age completing secondary school or an approved economic intervention to align with OVC_SERV indicator	The addition of the 18-20 age band (OVC completing secondary school or an approved economic intervention) improves an OVC program's ability to more closely calculate the requested TX_CURR proxy coverage targets. Although a misalignment remains for participants 20 years of age, participants who are 18-19 years of age who were not previously captured in this calculated proxy coverage are now included into the metric, better demonstrating the OU's program coverage.

Section 3: Overview of Indicators

OVC_SERV

Indicator Definition: OVC_SERV

Indicator Definition: Number of individuals served by PEPFAR OVC programs for children and families affected by HIV

Numerator: Number of individuals served by PEPFAR OVC programs for children and families affected by HIV

Denominator: N/A

Numerator Description: The numerator is the sum of the following Program Participation Status disaggregates:
1. OVC Comprehensive Active and Graduated participants (children and caregivers)
2. DREAMS participants
3. OVC Preventive participants

Numerator Disaggregates: OVC_SERV

Disaggregate Groups	Disaggregates

OVC Comprehensive [Required]	• **Active**
	   ○ **OVC**, by: Unknown age F/M, <1 F/M, 1-4 F/M, 5-9 F/M, 10-14 F/M, 15-17 F/M, 18-20 F/M
	   ○ **Caregiver**, by: 18+ F/M
	• **Graduated**
	   ○ **OVC**, by: Unknown age F/M, <1 F/M, 1-4 F/M, 5-9 F/M, 10-14 F/M, 15-17 F/M, 18-20 F/M
	   ○ **Caregiver**, by: 18+ F/M

OVC Exited or Transferred [Required]	• Transferred out to a PEPFAR-supported partner • Transferred out to a non-PEPFAR supported partner • Exited without graduation
DREAMS [Required]	• Age/Sex: Unknown age F/M, 10-14 F/M, 15-17 F/M
OVC Preventive [Required]	• Age/Sex: Unknown age F/M, 10-14 F/M

Definitions of Disaggregates: OVC_SERV

Program Model	Who	What	When Reported
OVC Comprehensive	**Active Children** • Children (ages 0-17) • OVC 18-20 completing secondary school or an approved economic intervention	• Have received 1+ eligible program services • Have a current case plan (updated within last year) • Are monitored at least quarterly • Are monitored against the graduation benchmarks	• At Q2 & Q4: Meets definition in each of the past two quarters, *or* in past quarter if individual was newly enrolled
	Active Caregivers • Ages 18+ • Fulfill role of parent/guardian • ≤ 2 per household	• Have received 1+ eligible program services • Are monitored against the graduation benchmarks	
	Graduated Children & Caregivers • See respective definitions above	• All children and caregivers in a household have met all applicable graduation benchmarks	• At Q2: graduated in past 2 quarters • At Q4: graduated in past 4 quarters
DREAMS	• **Active DREAMS participant ages 10-17** • NOT enrolled in OVC Comprehensive Program	• Have received 1+ DREAMS services that are also an eligible OVC_SERV service • Do not need an OVC case plan or to be monitored using the graduation benchmarks	• At Q2: received eligible service in past 2 quarters • At Q4: received eligible service in past 4 quarters
OVC Preventive	• **Children ages 10-14** • NOT enrolled in OVC Comprehensive Program or in DREAMS	• Have completed an approved primary prevention of HIV & sexual violence intervention • Do not need an OVC case plan or to be monitored using the graduation benchmarks	• At Q2: completed intervention in past 2 quarters • At Q4: completed intervention in past 4 quarters

What is an eligible OVC service?

A service that the participant:

- has received directly from the project
- was facilitated to obtain (provided transport or accompanied)
- or has a completed referral for

MER 2.7 includes a list of illustrative eligible interventions by domain (healthy, safe, schooled, stable) by participant population

- For services that are not captured in the list, local USG funding agency approval must be received in order to count these services toward active OVC status

OVC Comprehensive: Graduation Benchmarks

Graduation = When all child and caregiver members of a household meet all age and HIV-status applicable graduation benchmarks

- Monitored using 8 graduation benchmarks across 4 domains
- Household = all enrolled in OVC <u>comprehensive</u> program (including up to two caregivers fulfilling parent/guardian role)

Healthy
Known HIV status (or test not required)

Adherent/Virally suppressed

Knowledgeable about HIV prevention

Not malnourished

Stable
Financially stable

Safe
No violence reported in past 6 mos.
Not in a child-headed household

Schooled
Children in school

How will OVC_SERV Comprehensive be calculated?

- MER follows WHO person-centered monitoring, so OVC_SERV follows individual participant status
- At Q4, each individual should only be counted once

Active participant	Graduated	OVC_SERV Comprehensive total

In DATIM at Q2 and Q4 report children and caregivers by age/sex who meet "active" definition according to their participant category	At Q2 in DATIM: Report children/caregivers by age/sex that graduated in the past **two** quarters At Q4 in DATIM: Report children/caregivers by age/sex that graduated in the past **four** quarters

DREAMS & OVC Preventive Disaggregates

Required Disaggregates:

- **DREAMS**
  - Age/Sex: 10-14 F, 15-17 F
- **OVC Preventive**
  - Age/Sex: 10-14 F/M

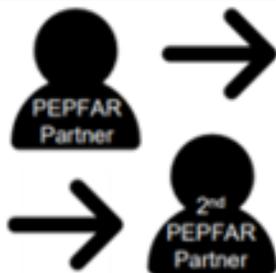| DREAMS |
|---|
| • *AGYW-focused* |
| • AGYW aged 10-17 at elevated risk of HIV in DREAMS SNUs |
| • Layered interventions for AGYW, her parents, and her community (DREAMS core package) |

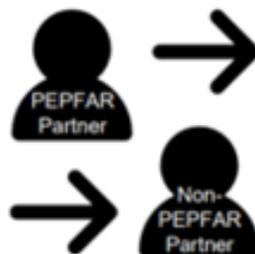| OVC Preventive |
|---|
| • *Group-based* |
| • Boys & girls aged 10-14 in highest burden SNUs |
| • Single evidence-based intervention |

Transfer/Exit Disaggregates

- Partners will continue to report in DATIM on transfers/exits to ensure work that may not have spanned to the end of the fiscal year is counted and understood.

- **These numbers are not included in OVC_SERV total.**

Transferred to a PEPFAR-supported partner	Transferred to a non-PEPFAR supported partner	Exited without graduation
At Q2 in DATIM: Report children/caregivers that transferred out to a PEPFAR-supported partner in the past **two** quarters At Q4 in DATIM: Report children/caregivers that transferred out to a PEPFAR-supported partner in the past **four** quarters	At Q2 in DATIM: Report children/caregivers that transferred out to a non-PEPFAR supported partner in the past **two** quarters At Q4 in DATIM: Report children/caregivers that transferred out to a non-PEPFAR supported partner in the past **four** quarters	At Q2 in DATIM: Report children/caregivers that exited without graduation in the past **two** quarters At Q4 in DATIM: Report children/caregivers that exited without graduation in the past **four** quarters **who did not return to active status**

How to Use: OVC_SERV

OVC_SERV data and visuals should be used to:

- Assess progress against targets
- Assess regular receipt of eligible services based on needs of OVC comprehensive participants
- Determine if there are many comprehensive OVC exiting without graduation, and if so why and how to improve program continuity of services
- Assess the distribution of participants by age/sex and program type (comprehensive, preventive, & DREAMS) and ensure alignment with PEPFAR strategy
  - E.g. focus on adolescents, proportion of children vs. caregivers
- Identify any open slots in OVC programs for enrollment of new participants with a focus on C/ALHIV who do not have a VL test and/or are not virally suppressed and/or are newly enrolled in treatment.

Using OVC_SERV Data

- Which SNUs have a higher proportion of OVCs who exited without graduation?

- What are the reasons for exiting without graduation and how can the OVC program be improved in these SNUs to meet the needs of the participants?
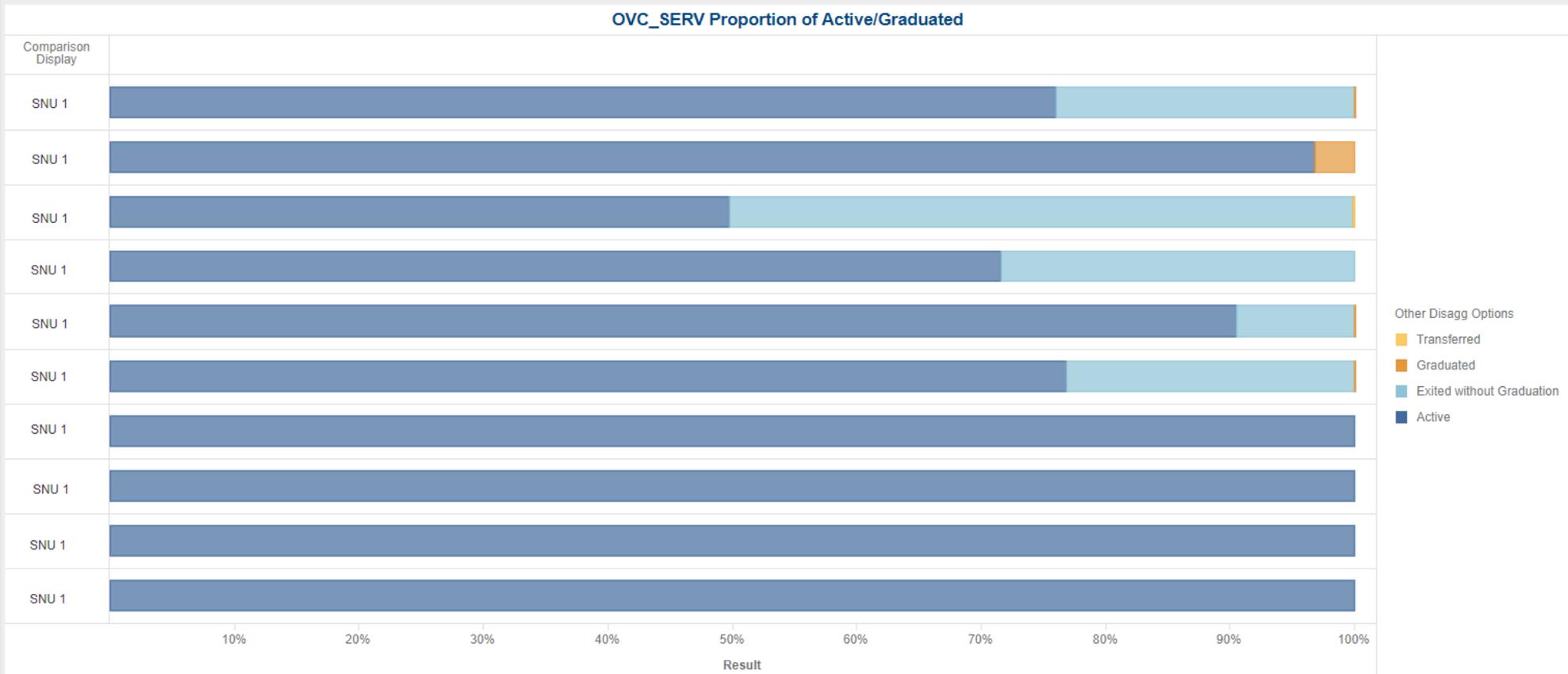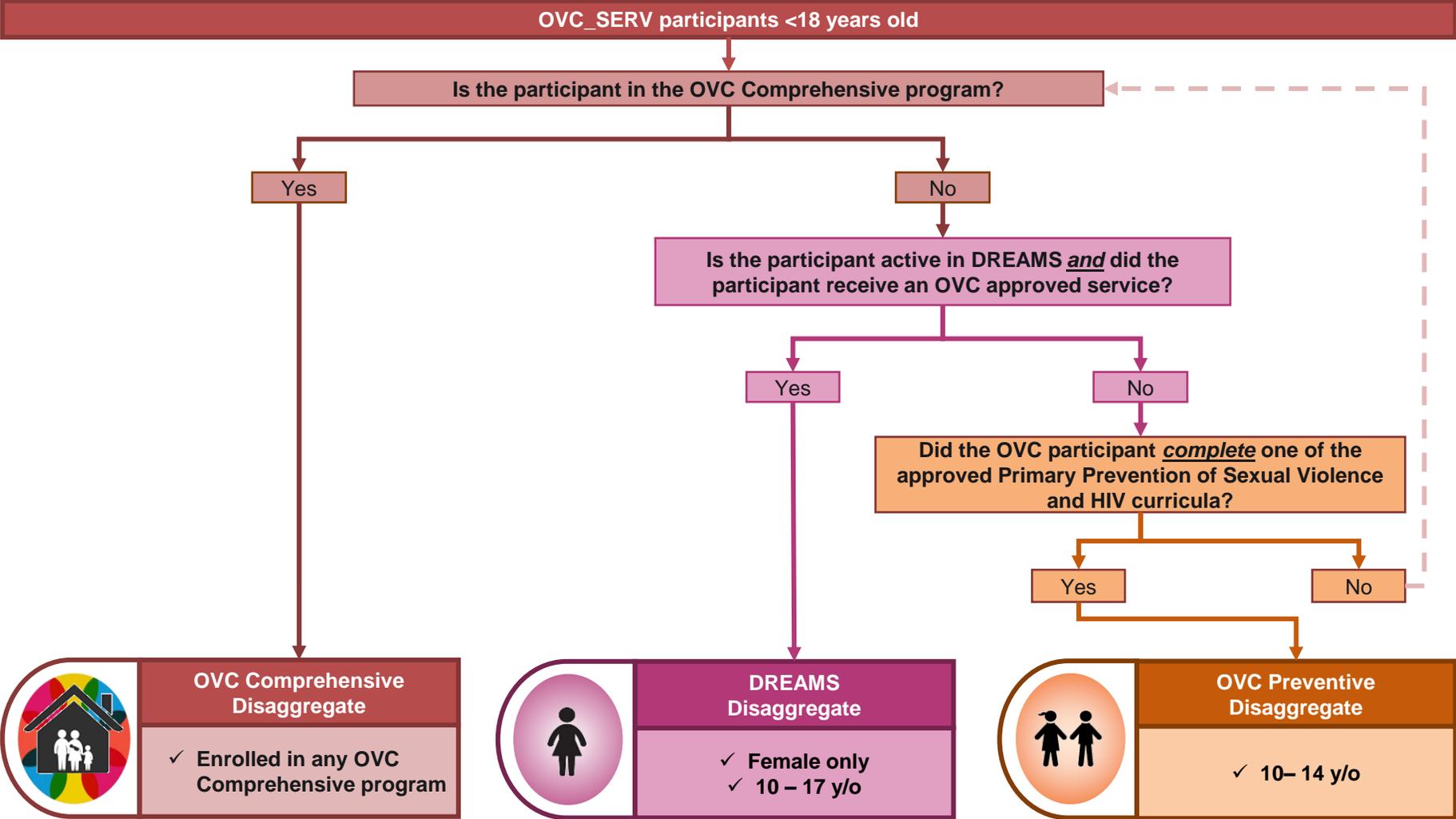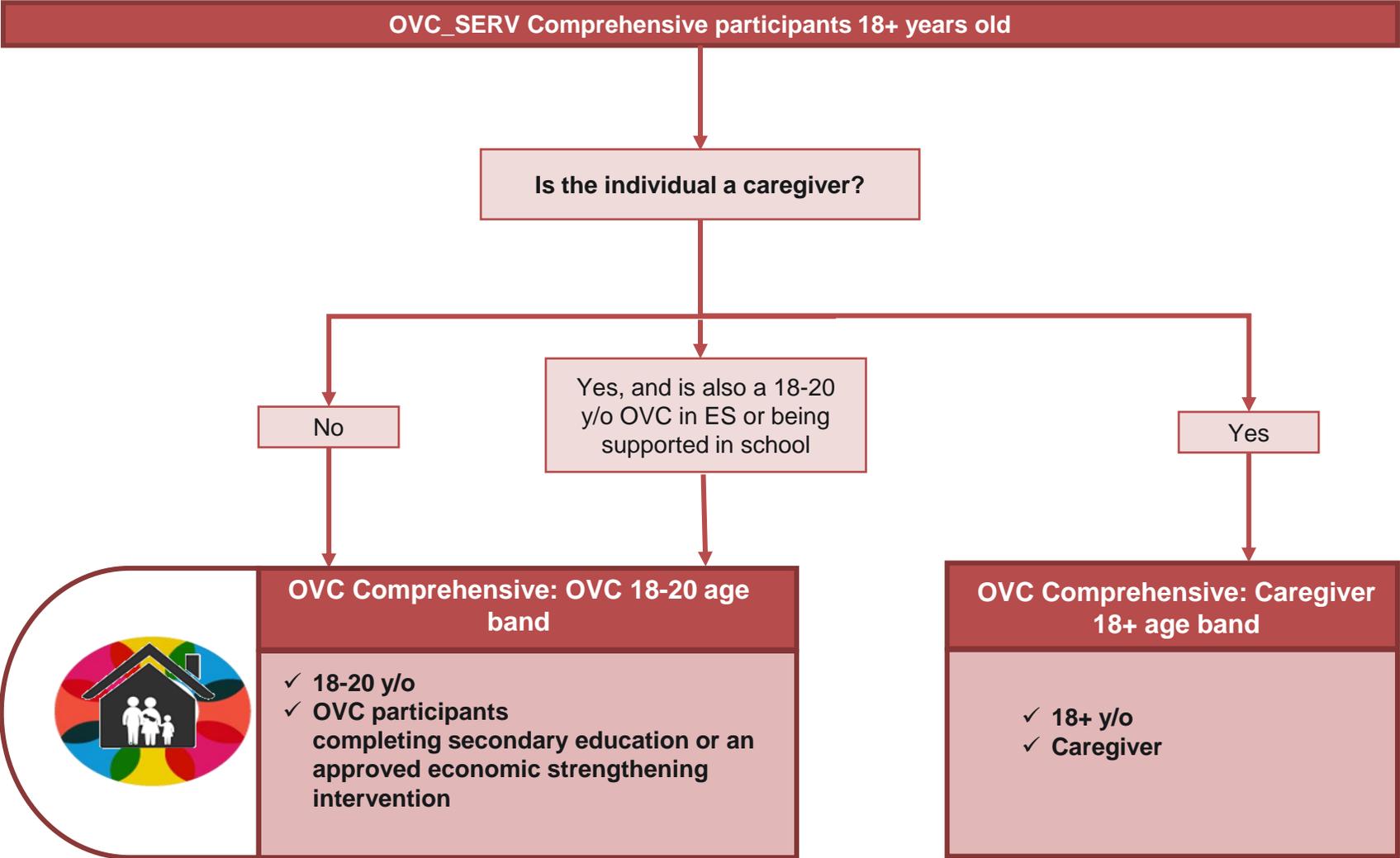
How to Collect: OVC_SERV

- All agencies and IPs serving individuals that meet the definition of OVC_SERV across program models are required to report on this indicator (e.g., OVC partners, DREAMS partners serving AGYW 10-17 years of age with eligible OVC services). Additionally, agencies and IPs implementing approved primary prevention of HIV and sexual violence interventions (e.g., OVC Preventive) are required to report.

- **Each individual should be counted only once under OVC_SERV in the reporting period**. Please follow the hierarchy detailed to ensure that each individual is reported under only one program model (i.e., OVC Comprehensive, DREAMS, or OVC Preventive).

  - The one exception is in the instances a Peace Corps Volunteer is placed to work with a CDC, DOD, or USAID Implementing Partner that provides services to its beneficiaries under the OVC Comprehensive Model, the **Peace Corps support falls under the OVC_SERV Preventive Model and can be counted, despite duplication (see slide 9)**.

- Efforts will need to be made to de-duplicate OVC_SERV data in SNUs with multiple IPs implementing the various program models.

- An IP implementing the OVC Preventive program model may end up reporting significantly fewer individuals than they are actually serving, because the Preventive model falls lowest on the hierarchy and individuals may already be counted in a different program.

- For those reported under OVC Comprehensive, IPs must record the participation status of children and caregivers (i.e., active or graduated) or if they are transferred out to a PEPFAR- supported partner, transferred out to a non-PEPFAR supported partner, or exited without graduation. The program participation status and transfer/exit disaggregate categories are mutually exclusive.

Fig 1: Counting <18 Participants in OVC_SERV

OVC_SERV participants <18 years old

Is the participant in the OVC Comprehensive program?

- Yes
- No

Is the participant active in DREAMS *and* did the participant receive an OVC approved service?

- Yes
- No

Did the OVC participant *complete* one of the approved Primary Prevention of Sexual Violence and HIV curricula?

- Yes
- No

OVC Comprehensive Disaggregate
- ✓ Enrolled in any OVC Comprehensive program

DREAMS Disaggregate
- ✓ Female only
- ✓ 10 – 17 y/o

OVC Preventive Disaggregate
- ✓ 10– 14 y/o

Fig 2: Counting 18+ Participants in OVC_SERV

OVC_SERV Comprehensive participants 18+ years old

Is the individual a caregiver?

No

Yes, and is also a 18-20 y/o OVC in ES or being supported in school

Yes

OVC Comprehensive: OVC 18-20 age band

- ✓ 18-20 y/o
- ✓ OVC participants completing secondary education or an approved economic strengthening intervention

OVC Comprehensive: Caregiver 18+ age band

- ✓ 18+ y/o
- ✓ Caregiver

DREAMS and OVC reporting overlap among 10-17 year old females *by program enrollment*

Program enrollment	OVC services	DREAMS services	Count under OVC_SERV	Count under AGYW_PREV
OVC Comprehensive	Must meet OVC Comprehensive program requirements	N/A	✓ Count under "OVC Comprehensive" disaggregate	
OVC Comprehensive and DREAMS	Must meet OVC Comprehensive program requirements	Must meet DREAMS program requirements; Layered interventions	✓ Count under "OVC Comprehensive" disaggregate	✓
DREAMS w/ eligible OVC service	Qualifying eligible individual DREAMS service that is also an OVC service, e.g. education subsidy	Must meet DREAMS program requirements; Layered interventions	✓ Count under "DREAMS" disaggregate	✓
DREAMS non-eligible OVC service	N/A	Must meet DREAMS program requirements; Layered interventions		✓

Data Entry Example: Comprehensive

DSD: OVC_SERV — Collapse

| Auto-Calculate | Number of beneficiaries served by PEPFAR OVC programs for children and families affected by HIV/AIDS. Numerator will auto-calculate from the sum of the OVC Comprehensive, DREAMS, and OVC Preventive disaggregates. Beneficiaries should only be entered in one of the three disaggregates. |

Numerator [Subtotal]

| Required | OVC Comprehensive. Disaggregated by Program Status (Active and Graduated) by age/sex and OVC/Caregiver. Beneficiaries entered here should not be counted in DREAMS or Preventive. |

Active (Received at least one service in each of the preceding two quarters)

OVC: Female — Unknown Age | <1 | 1-4 | 5-9 | 10-14 | 15-17 | 18-20 [Subtotal]   Caregivers: Female 18+

OVC: Male — Unknown Age | <1 | 1-4 | 5-9 | 10-14 | 15-17 | 18-20 [Subtotal]   Caregivers: Male 18+

Subtotal (Active OVCs and Caregivers): [Subtotal]

Graduated (At Q2: Graduated in the past 6 months. At Q4: Report the number of children and parents/caregivers that graduated in the past four quarters.)

Female — Unknown Age | <1 | 1-4 | 5-9 | 10-14 | 15-17 | 18-20 [Subtotal]   Caregivers: Female 18+

Male — Unknown Age | <1 | 1-4 | 5-9 | 10-14 | 15-17 | 18-20 [Subtotal]   Caregivers: Male 18+

Subtotal (Graduated OVCs and Caregivers): [Subtotal]

Subtotal (All OVC Comprehensive OVCs and Caregivers): [Subtotal]

| Required | Disaggregated by OVC Comprehensive by Transfer/Exit. (At Q2: Report exits or transfers within the past 6 months. At Q4: Report the number of exits or transfers in the past four quarters that did not return to active status or graduate.) The Transferred or Exited disaggregate does not add to the Total Numerator. |

Transferred out to a PEPFAR-supported partner. [ ]   Transferred out to a non-PEPFAR supported partner. [ ]   Exited without Graduation. [ ]

Data Entry Example: DREAMS & Preventive

Required	DREAMS. Disaggregated by Age. Beneficiaries entered here should not be counted in OVC Comprehensive or Preventive. At Q2: Report AGYW that received an eligible OVC intervention in the previous two quarters. At Q4: Report AGYW that received an eligible OVC intervention in the past four quarters.

	Unknown Age	10-14	15-17
Female			

Subtotal (DREAMS):	Subtotal

Required	OVC Preventive. Disaggregated by Age/Sex. Beneficiaries entered here should not be counted in OVC Comprehensive or DREAMS. At Q2: Report the number of children that have completed an approved primary prevention intervention in the past two quarters. At Q4: Report the number of children that have completed an approved primary prevention intervention in the past four quarters.

	Unknown Age	5-9	10-14	
Female				Subtotal
Male				Subtotal

Subtotal (OVC Preventive):	Subtotal

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How to Review for Data Quality: OVC_SERV

How to Review for Data Quality:

- Review PEPFAR OVC implementing partners' results to ensure that there is no double counting between program models (e.g., OVC Comprehensive, DREAMS, OVC Preventive) and between program participation status and transfer/exit disaggregate categories within OVC Comprehensive.

- Review IP and site results for deviations from one period to the next, which may indicate rapid exit and entry of program participants or high sudden graduation rate in one period as compared to another period.

How to Calculate Annual Total:

- This is a snapshot indicator. Individuals should only be counted once by each partner and under **one OVC program model** at Q4 reporting

  - **Q4 OVC_SERV = (OVC Comprehensive Active Q4 + Graduated Q4) + (DREAMS Q4) + (OVC Preventive Q4)**

- All disaggregates except for "active" under OVC Comprehensive are a snapshot for the entire fiscal year at the time of reporting. This includes graduated, exited, and transferred disaggregates under OVC Comprehensive; DREAMS; and OVC Preventive.

- Under OVC Comprehensive, program participation status at the end of Q4 should take precedence for where to count an individual

How to Review for Data Quality: OVC_SERV (cont.)

- Ensure no double counting of the same person by the same partner in the reporting period*
  - Program models are mutually exclusive (i.e. OVC Comprehensive, DREAMS, OVC Preventive)
  - Within OVC Comprehensive, program participation status and transfer/exit categories are mutually exclusive
- Program Participation Status should not show high deviations from program targets
- Review IP and site results for deviations from one period to the next which may indicate rapid exit and entry of participants or high sudden graduation rate in one, versus another period

* Please note there is an exception for Peace Corps double counting. See slide 9 for further reference.

Guiding Narrative Questions: OVC_SERV

1. Please explain reasons and context for highest/lowest performing partners' performance (i.e., results/target) for OVC_SERV total numerator and OVC_SERV <18, including any programmatic shifts or monitoring updates.
2. For OVC Comprehensive, please explain results by Program Participation Status:
   a. For active program participants, were there any interventions that were provided and approved by local USG funding agency that were not included in the illustrative examples (Appendix E)?
   b. For graduation, were any of the benchmarks especially challenging to achieve or monitor? If so, which ones and why?
   c. For graduation, please note how many of the total graduated results were CLHIV graduations.
3. For OVC Comprehensive, please explain results by exited/transferred:
   a. How many individuals exited without graduation? Please explain the reasons for exiting without graduation and try to quantify with percentages if possible. Are there certain partners with higher rates of exiting without graduation? How are you managing this with the partner(s)?
   b. How many individuals were transferred? To whom (e.g., other NGOs, government support, etc.) were they transferred? Where were beneficiaries transferred? Please provide disaggregates for beneficiaries transferred to specific sources of support.
4. For the OVC Preventive disaggregate, which approved primary prevention of HIV and sexual violence intervention(s) were implemented during the reporting period? Were there any implementation challenges that affected results?
5. For the DREAMS disaggregate, what were the most common interventions that DREAMS participants received? Were there any implementation challenges that affected results?
6. Please explain the steps taken by partners working in the same district to ensure that individuals were counted in the correct program model disaggregate and were not counted more than once.

OVC_HIVSTAT

Indicator Definition: OVC_HIVSTAT

Indicator Definition: Percentage of orphans and vulnerable children (<18 and 18-20 years old) enrolled in the OVC Comprehensive program with HIV status reported to implementing partner

Numerator: Number of orphans and vulnerable children (<18 years of age and 18-20 years of age) enrolled in the OVC Comprehensive program with HIV status reported, disaggregated by HIV status

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Denominator: Number of orphans and vulnerable children reported under the OVC_SERV "OVC Comprehensive" disaggregate (<18 years of age and 18-20 years of age, active and graduated)

Numerator Description: Data sources for this indicator include HIV test results that are self-reported by OVC (or their caregivers), results of HIV Risk Assessments conducted by implementing partners, registers, referral forms, client records, or other confidential case management and program monitoring tools that track those in treatment and care. Partners are strongly encouraged to confirm HIV and ART status through clinical record confirmation.

Denominator Description: Denominator is not collected again as part of this indicator, but is collected under the "OVC Comprehensive" disaggregate of OVC_SERV.

Numerator Disaggregates: OVC_HIVSTAT

Disaggregate Groups	Disaggregates

Age/Sex/Status Type [Required]	• **Reported HIV-positive to implementing partner**
	
	    ○ **Currently receiving ART**, by: Unknown age F/M, <1 F/M, 1-4 F/M, 5-9 F/M, 10-14 F/M, 15-17 F/M, 18-20 F/M
	
	    ○ **Not currently receiving ART or ART status unknown**, by: Unknown age F/M, <1 F/M, 1-4 F/M, 5-9 F/M, 10-14 F/M, 15-17 F/M, 18-20 F/M
	
	• **Reported HIV-negative to implementing partner**, by: Unknown age F/M, <1 F/M, 1-4 F/M, 5-9 F/M, 10-14 F/M, 15-17 F/M, 18-20 F/M
	
	• **Test not required based on risk assessment**, by: Unknown age F/M, <1 F/M, 1-4 F/M, 5-9 F/M, 10-14 F/M, 15-17 F/M, 18-20 F/M
	
	• No HIV status reported to the implementing partner (HIV status unknown), by: Unknown age F/M, <1 F/M, 1-4 F/M, 5-9 F/M, 10-14 F/M, 15-17 F/M, 18-20 F/M

Denominator Disaggregates: OVC_HIVSTAT

Disaggregate Groups	Disaggregates
N/A	See OVC_SERV "OVC Comprehensive" disaggregate.

Disaggregates: Reported HIV-Positive

	Reported HIV+, Currently on ART	Reported HIV+, Not currently on ART or ART status unknown
WHO	HIV+ OVC participants <18 years old, and 18-20 who are in school or approved economic strengthening intervention	
WHAT	Guardian or OVC self-reports to the IP that child is currently on ART*	Guardian or OVC self-reports to the IP that they are not currently receiving ART or are unable to confirm ART status*
WHEN	HIV treatment status must be re-assessed at least once each reporting period	

OVC_HIVSTAT "Reported HIV Positive" is **auto-calculated** from ART treatment status disaggregates entered by IP

*Guardian or OVC answer "yes" to: "Do you have enough ART pills to take until the date of your next appointment?"

Disaggregates: Reported HIV-Negative & Test Not Required Based on Risk Assessment

	Reported HIV-Negative	Test Not Required Based on Risk Assessment
WHO	OVC participants <18 years old, and 18-20 who are in school or approved economic strengthening intervention	
WHAT	Guardian or OVC self-reports to the IP that child is HIV negative based on an HIV test (regardless where test occurred)	Based on an HIV risk assessment by IP, OVC does not require an HIV test during the reporting period
WHEN	Status valid unless the IP suspects the child's risk has changed, then (re)conduct HIV risk assessment	

Disaggregates: No Status Reported to Implementing Partner (HIV Status Unknown)

	No Status Reported to Implementing Partner
WHO	OVC participants <18 years old, and 18-20 who are in school or approved economic strengthening intervention
WHAT	Guardian or OVC does not know OVC HIV status or HIV status is missing
WHEN	During reporting period

Potential Scenarios:
- Not yet assessed
- Refused HIV assessment
- Assessed as at risk, but not yet tested
- HIV referral completed, but have not completed test or result is not yet available
- Refused to report test result to IP
- Missing data, including if IP did not attempt to find out child's HIV status

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How to Use: OVC_HIVSTAT

- What number of comprehensive OVC <18 have been reported positive, negative, or do not require a test based on a risk assessment? What proportion have a known status or do not need a test?

- What proportion of comprehensive OVC <18 reported positive are on treatment?
  - If <90% of OVC with HIV+ status reported to IP are on ARVs, what are the challenges to linking and continuing OVC on treatment? What program improvements would help to address these challenges?

- *Are there certain OUs, IMs/IPs and/or SNUs with stronger or weaker performance?*

- What is the breakdown of those reported under "HIV Status Unknown"? Are there common challenges in identifying the HIV Status of each participant? How can these challenges be addressed?

- Are proportions of OVC with unknown status decreasing?

- Is the proportion of reported positive OVC on ART increasing?

- What is the proxy percentage of TX_CURR in each age band enrolled in the OVC program?
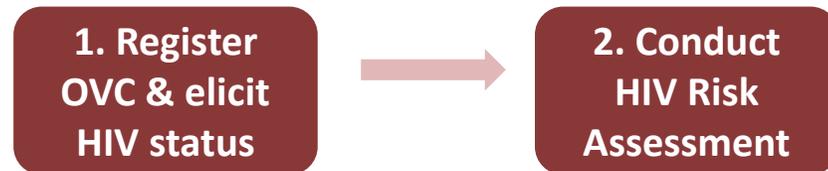
How to Collect: OVC_HIVSTAT

- Data sources for this indicator include HIV test results that are either clinically confirmed or self-reported by OVC (or their caregivers), results of HIV Risk Assessments conducted by implementing partners, registers, referral forms, client records, or other confidential case management and program monitoring tools that track those in treatment and care.

- Per COP Guidance, OVC and Clinical IPs should work together as multi-disciplinary teams, including by developing memoranda of understanding (MOU) and data sharing agreements, to ensure that children in need of an HIV test and/or HIV treatment are appropriately served.

- Implementation of the HIV risk assessment should be integrated into case management and on-going case monitoring, and should not be conducted separately, if possible. This will vary by partner and project. The partners should work out a timeline based on their experience of how long referral completion and status disclosure usually takes and factor that into their case management processes.

- Implementing partners will record the OVC's clinically confirmed or self-reported HIV status semi-annually.
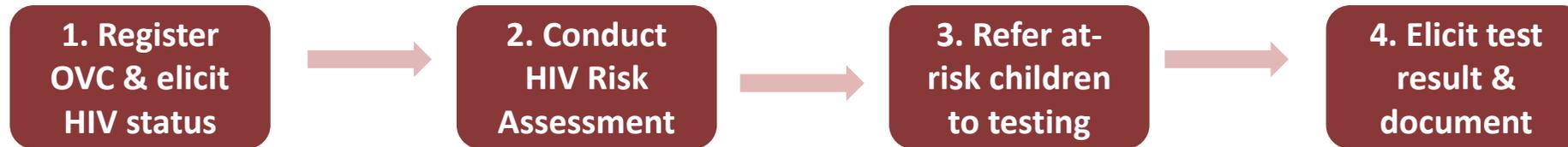
HIV Risk Assessment

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┌─────────────┐        ┌─────────────┐
│ 1. Register │        │ 2. Conduct  │
│ OVC & elicit│ ──────▶│ HIV Risk    │
│ HIV status  │        │ Assessment  │
└─────────────┘        └─────────────┘
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- HIV risk assessments ensure children who need treatment are found, and that there is targeted use of HIV testing resources. HIV risk assessments should:
  - **Always** occur prior to HIV testing to determine if a test is required.
  - Be conducted among OVC at intake, and then as often as needed, depending on child's age & circumstances.
  - Be conducted at the OVC's home or other place with visual and auditory privacy.
  - Use a standardized data collection tool to guide assessment.

OVC, HIV Risk Assessment, and Testing

| 1. Register OVC & elicit HIV status | → | 2. Conduct HIV Risk Assessment | → | 3. Refer at-risk children to testing | → | 4. Elicit test result & document |

- If OVC is determined to be at risk, they **must** be referred for HIV testing.
  - OVC programs <u>must</u> support the completion of the HIV referral, provide support for family-centered disclosure, and document self-reported test results.
  - OVC IPs are not required to verify self-reports with clinical results, but **they are encouraged to do so.**
  - Disclosure of HIV status to IP is encouraged, but not required.
- OVC_HIVSTAT does **not** provide "positivity" or "yield" because results are self-reported.

OVC_HIVSTAT Performance Metric: Known Status Proxy

Reported HIV-positive + Reported HIV-negative + HIV test not required based on risk assessment

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Number of orphans and vulnerable children reported under the OVC_SERV (<18 years old) Comprehensive disaggregate
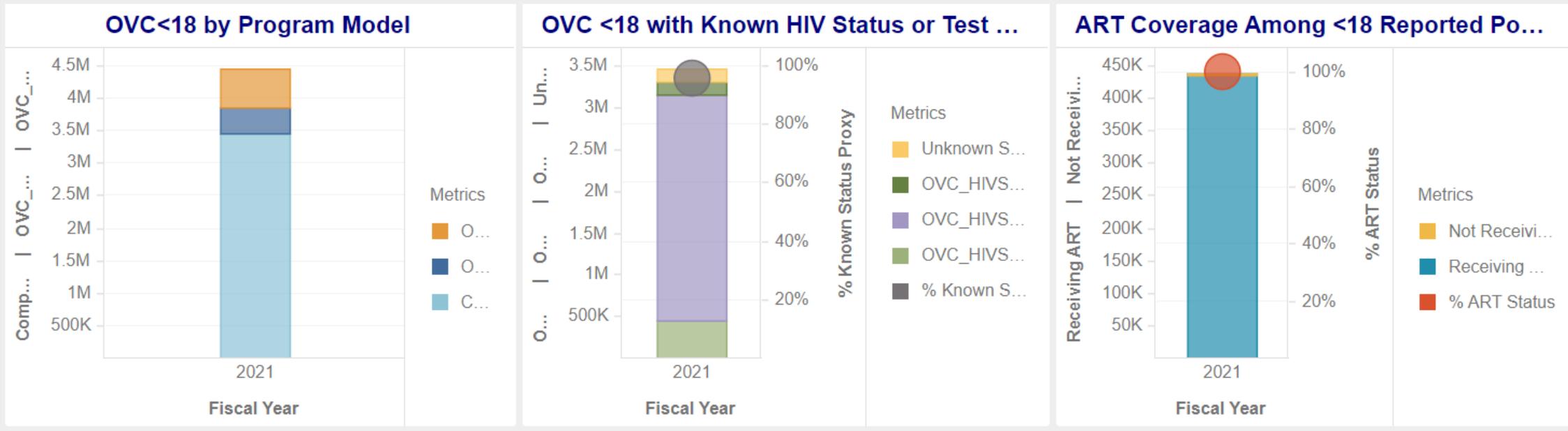
$\geq$ **90%**

- Captures OVC <18 in the comprehensive program who either have a known status or are deemed not to need a test through an HIV risk assessment.

- This metric should increase over time and be at least 90%.

OVC_HIVSTAT Continuum

How to Review for Data Quality: OVC_HIVSTAT

How to Review for Data Quality:

- The OVC_HIVSTAT Total Numerator should equal all non-caregivers* included within the OVC_SERV (<18 + 18–20-year-olds finishing an approved economic strengthening activity or education) "OVC Comprehensive" age disaggregates, including active and graduated. Review any site with the following reporting issues: 1) numerator greater than 100% of OVC_SERV <18 and 18-20 years of age "OVC Comprehensive" age disaggregates, and 2) very low coverage of OVC_HIVSTAT (defined as OVC_HIVSTAT numerator, divided by OVC_SERV <18 and 18-20 "OVC Comprehensive" age disaggregates) which provides data on reporting of status.

- Missing data should be documented under "HIV status unknown" or "Reported HIV- positive- Not currently receiving ART or ART status unknown." Potential reasons for missing data may include: 1) IP was not able to collect information from all caregivers of OVC_SERV <18 and 18–20-year-old Comprehensive participants <18 and 18-20 years of age within the reporting period, or 2) IP was not able to locate all the caregivers of OVC_SERV <18 and 18-20 years old Comprehensive participants <18 and 18-20 years of age (e.g., relocated, migrant work).

How to Calculate Annual Total: This is a snapshot indicator. Results are cumulative at each reporting period.

*It is recognized that some 18–20-year-olds may be considered both a child beneficiary and caregivers (ex. young mother). For this instance, we would count them within the 18-20-year-old disaggregate.

How to Review for Data Quality: OVC_HIVSTAT (cont.)

$$\frac{\text{HIV-positive + HIV-negative + HIV status unknown +}}{\text{Number of orphans and vulnerable children reported under the OVC\_SERV (<18 years old, OVC 18-20) comprehensive disaggregate}} = 100\%$$

- Every active and graduated participant included in OVC_SERV Comprehensive (<18 years old, 18-20) must be reported under OVC_HIVSTAT in one of the four HIV status categories.

- OVC_HIVSTAT does NOT include:

  - Any caregiver 18+*

  - Any OVC or caregiver reported as exited or transferred in OVC_SERV

  - Any OVC_SERV Preventive or DREAMS participants

  *with the exception of 18-20 enrolled at an earlier age and completing secondary school and/or approved economic strengthening.

Guiding Narrative Questions: OVC_HIVSTAT

1. Please report the percentage of OVC comprehensive beneficiaries 0-17 years of age who have a clinically confirmed HIV status vs. a self -reported HIV status for both OVC_HIVSTAT_POS and OVC_HIVSTAT_NEG.

2. Please describe how OVC and clinical IPs are working together to responsibly share this information for clinical confirmation and jointly serving OVC participants. Include any challenges and what is being done to overcome these challenges.

3. If the sum of reported HIV-negative and reported HIV-positive and Test not required based on risk assessment is less than 90% of OVC_SERV 0-17 years of age "OVC Comprehensive" disaggregate, please explain why such a high proportion are being reported in the category of "HIV Status Unknown" (i.e., the performance metric described in the "how to use" section). Are there certain partners that are struggling with reporting or understanding the disaggregates? How is the OU responding?

4. Please explain the breakdown of those reported under "HIV Status Unknown." What percentage of caregivers refused to disclose a child's HIV status? What percentage represents those who have been referred for testing but do not yet have results? What percentage represents missing data where an implementing partner failed to document the child's HIV status? What are the other reasons? Specifically, for the <1 year age band, please report the number who are HEI who have not yet received a final HIV status outcome.

5. For children reported as "Reported HIV-Positive - not currently on ART or ART Status Unknown," what efforts are being undertaken in response? Are there certain partners with low ART coverage, why? Is this an issue related to community case management? Or are partners unable to collect timely confirmation of treatment status (i.e., missing)?

Section 4: Data Use

Data Visualization and Use Examples

Data Visualization and Use Examples (cont.)

How many OVC beneficiaries (excluding caregivers) were served under each program model, by age?

OVC_SERV Trends fine by Program Model
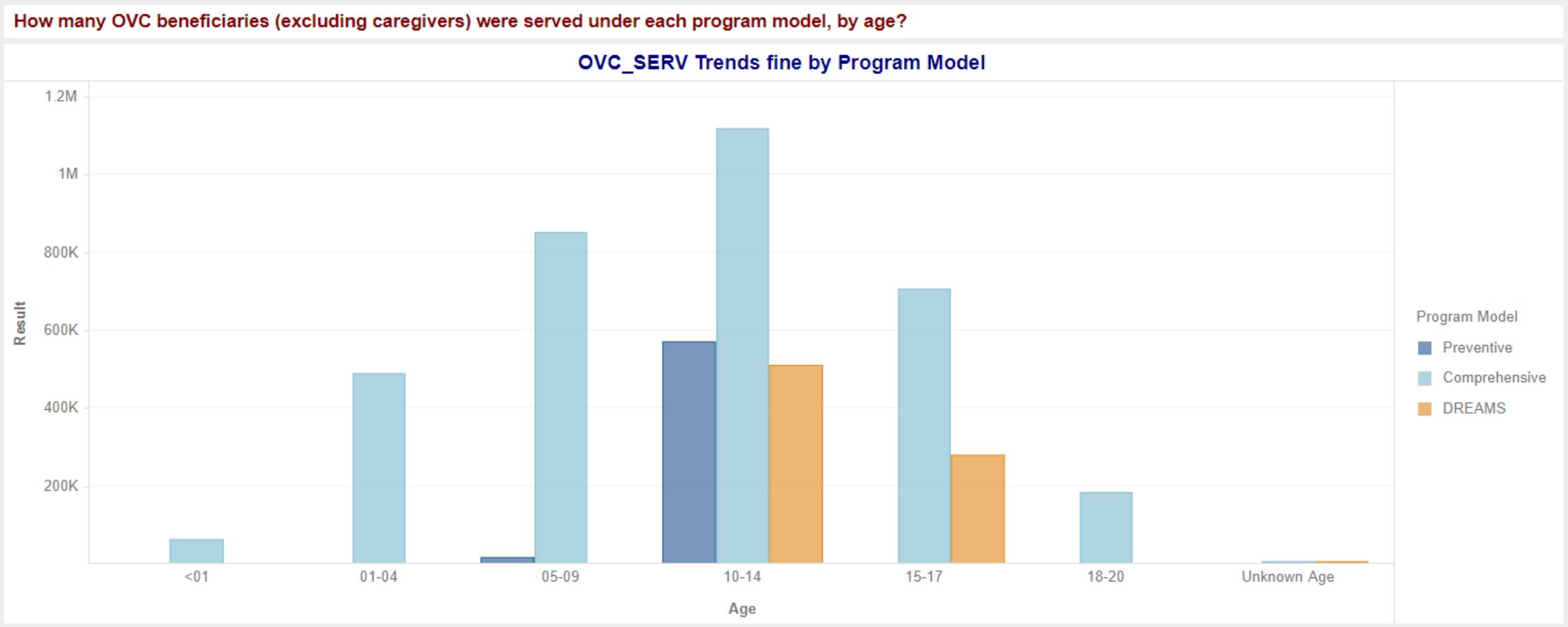
Data Visualization and Use Examples (cont.)

What is the OVC_HIVSTAT continuum of coverage?
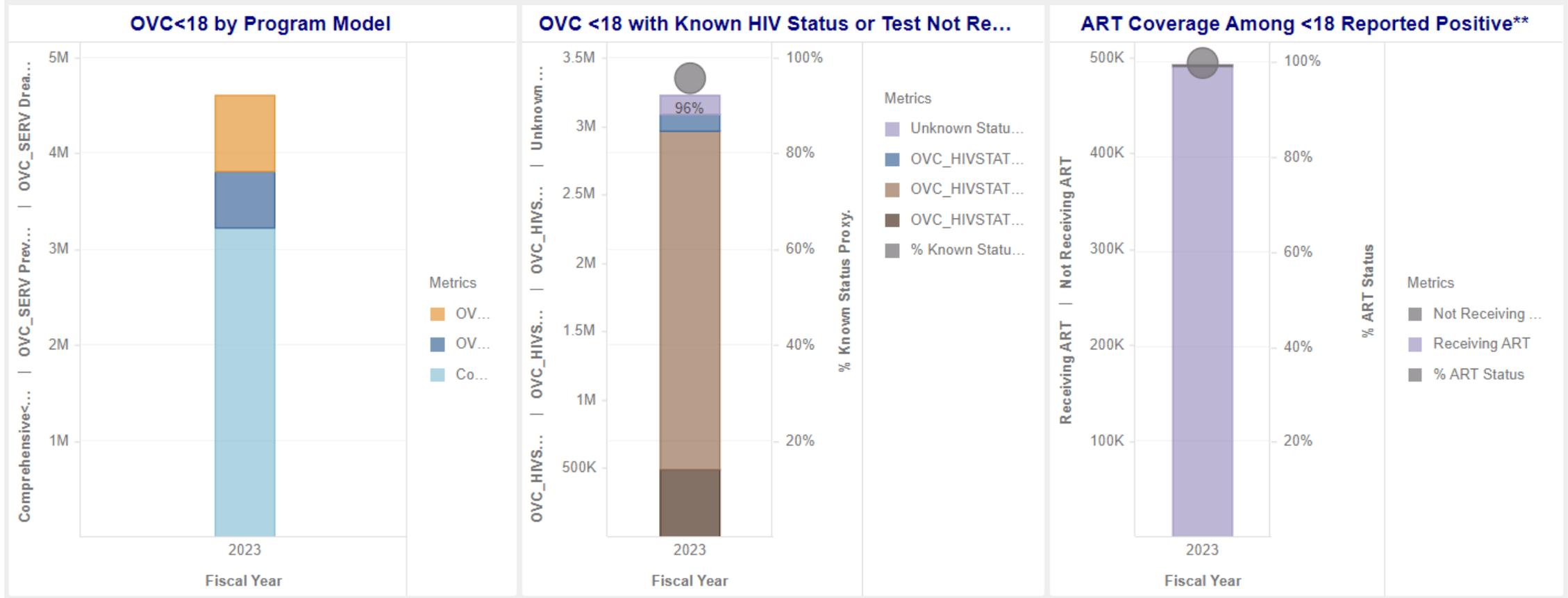
Section 5: Additional Resources and Acknowledgements

Additional Resources and Acknowledgements

Additional Resources:

- MER 2.7 Guidance (OVC_SERV, OVC_HIVSTAT, and related appendices)

- COP23 Guidance

- OVC Graduation Benchmark Resources:
    - [Indicator Reference Sheets](#)
    - [Assessment Tool](#)

Acknowledgements: Thank you to PEFPAR OVC field staff, the OVC Taskforce and implementing partners, and the interagency OVC team.