

## **OVC Care and Support Cascade Template**

Before the development of the Orphans and Vulnerable Children (OVC) Care and Support Cascade template, OVC Civil Society Organizations (CSOs) found it challenging to monitor children and adolescents living with HIV (CALHIV) and HIV-positive caregivers enrolled in the OVC program to ensure that they were meeting their drug pick-ups, clinical appointments, and viral load test schedules.



They lacked the tools to enable them conduct real-time data analysis and profiling of clients for services based on needs. This resulted in poor treatment outcomes among CALHIV and HIV-positive caregivers.

The OVC care and support cascade template was developed to address this challenge. The tool captures holistic details of OVC clients enrolled in treatment such as the dates of current and next appointments, past and future drug pick-up dates, viral load (VL) assessment results, regimen, multi-month dispensing specifics as well as contact details of the clients and the case managers supporting the clients for optimal profiling, monitoring and follow up. This

was used for weekly updates of ART services provided to clients on the OVC program in-line with facility data and feedback from clients.



Treatment outcomes among CALHIV and positive caregivers enrolled on the OVC program improved significantly following the use of the OVC Care and Support Cascade template. With the use of this document between October 2021 and July 2022, the proportion of CALHIV who were virally suppressed increased from 65% to 98%, while viral suppression among HIV-positive caregivers who enrolled in the OVC program increased from 92% to 97%.

As of July 2022 12,070 CALHIV and 16,947 HIV-positive caregivers had their viral load test done. Some 11,685 (97%)

"Before now, it was difficult for CSOs to ascertain the exact date of drug pick up for clients but now, it is easier to track and follow up with positive beneficiaries for hospital visits. This has reduced missed appointment rates and interruption in treatment among CALHIV and positive caregivers. Also, it was not possible to know beneficiaries' viral load results/when they were due for a repeat VL test. Now, we don't just follow up to get the result for documentation, we seamlessly identify those who need close monitoring and enhanced adherence counseling for better outcomes. More so, the tool has helped us to get familiar with which drug regimen is appropriate for each age group. Before now, this knowledge was lacking."

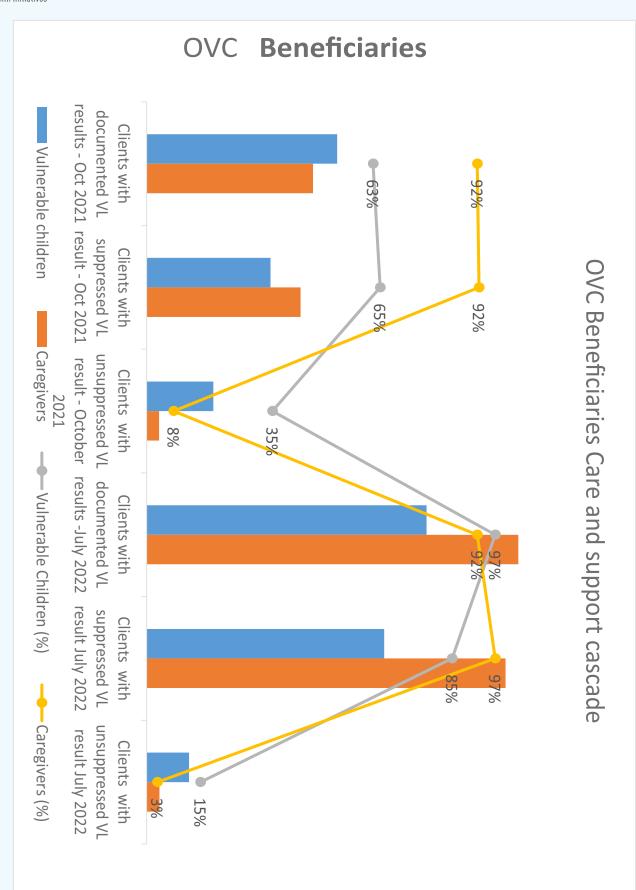
Jerry AgberProgram Manager, GDHCI

CALHIV and 15,511(92%) HIV-positive caregivers had their viral load test results documented respectively. Of these, 9,916 of the 11,685 (85%) CALHIV and 14,977 of the 15,511 (97%) HIV-positive caregivers were virally suppressed. Some 1,769 (15%) CALHIV and 534(3%) HIV-positive caregivers who were virally unsuppressed were linked to enhanced adherence counselling (EAC).

"The treatment cascade provides a one-stop shop database where all information regarding positive beneficiaries can be found i.e. weight, VL result, drug regimen, age, etc. Prior to the introduction of the cascade, accessing the information on CLHIV/positive caregivers required checking an individual's case folder and unique ID which was burdensome and time-consuming."

Donald AbayolProgram Manager, ETMLF







**Public Health Initiatives**