



**New Partners Initiative- Round Three
FY 2009 Semi Annual report
François-Xavier Bagnoud (FXB)
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Acronyms

AIDS	Acquired Immune Deficiency Syndrome
ART	Antirétroviral therapy
ARV	Antirétroviral
FXB	François-Xavier Bagnoud
HIV	Human Immune Virus
IGA	Income Generating Activities
OVC	Orphans and Vulnerable Children
M&E	Monitoring and Evaluation
NPI	New Partners Initiative
PLWA	People Living With AIDS
PMTCT	Prevention of Mother to Child Transmission
POC	Parish Orphan Committees
STD	Sexually Transmitted Diseases
STI	Sexually Transmitted Infection
VCT	Voluntary Counselling and Testing
VOC	Village Orphan Committees

1. Executive summary

This semester – December 2008 to March 2009 – was dedicated to the implementation of the program's foundations. It essentially entailed recruiting and training personnel, procuring essential material resources, rehabilitating community drop-in centers and creating an efficient M&E system. In parallel, FXB also concentrated on establishing and/or reinforcing existing administrative, financial and managerial procedures to better comply with USAID requirements. This preparatory work will enable FXB to both initiate the identification of beneficiaries in May and launch its 20 community-based programs in June 2009.

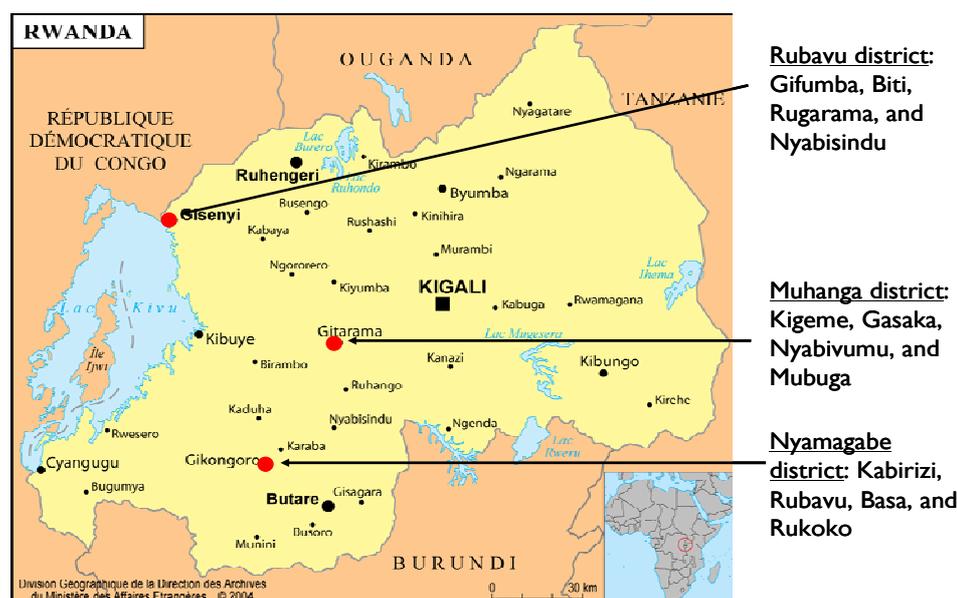
Strategic Objectives

The FXB-Villages endeavors to respond to the following strategic objectives:

- a. Care of Orphans and Vulnerable Children:
 - Provide comprehensive services and compassionate care so that orphans and other vulnerable children develop physically, socially, emotionally, and intellectually
 - Strengthen family, community and government systems to help families, community members and groups to implement and monitor the delivery of high quality comprehensive services to a maximum of children
- b. HIV Prevention and HIV Counselling and Testing:
 - Increase fidelity and reduce the number of sexual partners among beneficiaries; support and enable young people to choose abstinence and be faithful
 - Increase recognition, within prevention programs, that rape, sexual coercion, sex trafficking, transactional sex, cross-generational sex, gender norms, and alcohol abuse increase vulnerability to HIV
 - Increase recruitment and access to counseling and testing, especially for couples and families

Project areas

The 20 FXB-Villages will be grouped into 5 operational units – composed of 4 villages each – to ensure maximum efficiency and reaching the most beneficiaries: Muhanga, Nyamagabe and Rubavu units in Rwanda, and Kampala and Kyenjojo units in Uganda.



Map I : FXB-Villages in Rwanda



Map 2 : FXB-Villages in Uganda

General overview

During this semester, FXB has concentrated on strengthening its capacities in terms of management, including standard procedures, administrative and financial systems and overall knowledge of USAID policies. This process was first initiated in February 2009 with the New Partners Initiative – Round Three Launch which enabled the management team to better understand USAID requirements and adapt as well as strengthen its systems accordingly. In parallel, Organizational Capacity Assessments (OCA) carried out by NUPITA in Geneva as well as in Kampala in March 2009 also participated in strengthening FXB's grant management capacities as it provided FXB with clear corresponding Action Plans that are currently being taken up. With strengthened capacities and understanding, FXB – at both headquarter and field levels – has endeavored to improve and implement new human resources procedures and regulations, procurement regulations, financial monitoring and reporting as well as overall program management processes.

In February 2009, FXB launched its recruitment process in both Uganda and Rwanda. As a result, FXB hired 43 staff in Rwanda and 22 staff in Uganda. Once the recruitment process was concluded, all personnel was asked to attend a 3 days training workshop focusing on FXB general policies and procedures as well as providing refresher training in HIV/AIDS prevention including PMTCT, health education, IGA management, and new governmental policies to be followed. To strengthen acquired knowledge, all new personnel was asked to shadow their colleagues from existing FXB villages to better acquaint themselves with the program and understand its objectives.

Moreover, FXB has been particularly focusing on strengthening its monitoring and evaluation system. Working in close collaboration with Harvard University, FXB has developed a list of standard indicators and a questionnaire capable of collecting essential baseline data as well as assist with the identification of beneficiaries. The questionnaire will be finalised, translated and piloted in April 2009. Conversely, the baseline is scheduled to be implemented in May 2009.

As FXB already disposes of community drop-in centers in implementation areas, its primary focus has been to refurbish and equip them. Procurement of offices supplies, office furniture,

computers and cars has been initiated in both countries. Proformas have been requested and branding and marking are also being completed in all implementation sites.

Planned activities

Following the identification and enrollment of 1'600 beneficiary households in May 2009, FXB will launch its 20 community-based programs in Rwanda and Uganda. Entailing behavioral change, this second semester will principally concentrate on providing the material support necessary to improve beneficiaries' well-being as well as on providing the knowledge and skills necessary to taking responsibility for their own development.

First, FXB will provide medical care for all existing ailments and ensure that beneficiaries will have timely access to health care services either through the *Mutuelle de Santé* in Rwanda or through the establishment of mobile clinics in Uganda. FXB also covers all VCT and HIV treatment costs, generally transport related costs. In parallel, to reduce the incidence of prevalent diseases and ensure that beneficiaries take responsibility for their own health, FXB will also provide health education sessions that concentrate on disease prevention, early diagnosis and adherence to treatment. During weekly meetings, nurse counselors will disseminate information on prevalent diseases - especially on how they are transmitted – and emphasize the need for sanitary and hygienic principles to preserve good health. To support this process, beneficiaries will be given mosquito nets, containers to preserve water, pots and pans to boil water and prepare food, as well as blankets when applicable. As part of this initiative, FXB will concentrate on constructing 4 bore holes in Uganda and 8 in Rwanda.

Simultaneously, FXB will offer food assistance services to all enrolled OVC and their families, most of whom are severely malnourished, is food assistance. As many children and caregivers in need will not initially meet PEPFAR guidelines, especially before testing can verify HIV status, FXB will provide food to all household members in FY2009 as part of cost share. Prior to each monthly food distribution and during weekly beneficiary meetings, nurse counselors will educate all enrolled families on proper nutritional needs and diets. In parallel, through home-visits, they will ensure that food is used and consumed properly as well as that all household members are well nourished.

Moreover, FXB will identify all school-aged beneficiary children and will work with the appropriate authorities toward their (re-) integration within the educational system. Conversely, vocational training will be provided to adolescents who did not have the opportunity to pursue a regular education.

To enable beneficiaries to mitigate daily difficulties, cope with loss of parents and loved ones, and manage situations of stigma and discrimination, FXB will organize weekly collective counseling sessions. These group sessions will gradually enable nurse counselors to build trust and encourage beneficiaries to attend individual counseling sessions. In parallel to these activities, FXB will begin work on memory books to help OVC cope with the loss of a parent, reduce the psychosocial ill-feelings attached to it and help children regain a sense of belonging. FXB will complete at least 1-2 memory books for OVC in all 20 Villages in FY 2009 and likely will have begun work on additional memory books by the end of the year.

In terms of HIV prevention, FXB in both Uganda and Rwanda will organize monthly information sessions. These sessions will be led by the FXB HIV Prevention Officer, nurse/counselors, and people living with HIV/AIDS from each community, with curriculum that is informed by local partners and national policies and resources, as well as PEPFAR guidance. Similarly, FXB staff will hold monthly awareness-building sessions for all caregivers in the program, as well as quarterly sessions targeting local members of government, educators, and faith-based leaders, to discuss child abuse, exploitation, and domestic violence. Moreover,

Child Rights Officers will serve as a legal advisor and will be on call to provide assistance for children and families enrolled in the program, generally meeting with members of the program by appointment and providing free legal advice and referrals in cases of child abuse or disputed inheritance.

FXB will assist each household in Rwanda and Uganda to begin or expand a small business by providing in-kind resources, training, and on-going support and supervision. At the program's onset, an intensive, week-long training session will be held to help caregivers modify their economic behaviors and transit from subsistence activities to sustainable ones. At the end of this training, beneficiaries will have to start developing their own projects. Once the project is approved by FXB teams, supplies, materials and tools will be procured by FXB and provided to caregivers as a first in-kind grant. Following the initiation of individual IGA, additional livelihood trainings will be organized to provide skills specific to individual IGA, as well as banking and savings, responsible credit, and basic financial literacy and management

FXB will encourage households living in the same neighborhood to organize themselves into groups of eight to ten households. These groups are created to facilitate collective training and counseling. Through these groups, beneficiaries will be encouraged to support each other as well as will help each other improve their living conditions (e.g. brick making to rehabilitate a house). It is also through the groups that a solidarity fund will be created through the development of an internal credit system. This fund will enable beneficiaries to create a financial safety net and immediately improve their living conditions without tapping into their daily income. Beneficiary groups will also run collective IGA, which will enable them to generate additional income.

Budget (estimated budget and actual expenditure)

2. Summary table of PEPFAR indicators

Given FXB in Rwanda and in Uganda have not started implementing the activities linked to the programs, targeted PEPFAR indicators have not been reached yet.

FXB-Village in Rwanda				
Reporting Period Semi-Annual: October 1 – March 30	Target for this reporting period	Achieved this reporting period	Target for life of the Project	Achieved to date
Prevention/Abstinence and Be Faithful				
Number of individuals reached through community outreach that promotes HIV/AIDS prevention through abstinence and/or being faithful				
Male	0	0	3'600	0
Female	0	0	4'800	0
Total	0	0	8'400	0
Number of individuals trained to promote HIV/AIDS prevention programs that promote abstinence and/or being faithful	0	0	540	0
Other Sexual Prevention				
Number of individuals reached through community outreach that promotes HIV/AIDS prevention through behavior change other than abstinence and/or being faithful				
Male	0	0	3'600	0
Female	0	0	4'800	0
Total	0	0	8'400	0
Number of individuals trained to promote HIV/AIDS prevention through behavior change other than abstinence and/or being faithful	0	0	540	0
OVC				
Number of OVC served by OVC programs				
Male	0	0	1'560	0
Female	0	0	2'040	0
Total	0	0	3'600	0
a. Primary Direct	0	0	2'640	0
b. Supplemental Direct	0	0	960	0
Number of providers/caregivers trained in caring for OVC	0	0	960	0
Number of OVC receiving food and nutritional supplementation through OVC programs	0	0	1'200	0

FXB-Village in Uganda				
Reporting Period Semi-Annual: October 1 – March 30	Target for this reporting period	Achieved this reporting period	Target for life of the Project	Achieved to date
Prevention/Abstinence and Be Faithful				
Number of individuals reached through community outreach that promotes HIV/AIDS prevention through abstinence and/or being faithful				
Male	0	0	3'330	0
Female	0	0	6'170	0
Total	0	0	9'500	0
Number of individuals trained to promote HIV/AIDS prevention programs that promote abstinence and/or being faithful	0	0	600	0
Other Sexual Prevention				
Number of individuals reached through community outreach that promotes HIV/AIDS prevention through behavior change other than abstinence and/or being faithful				
Male	0	0	3'330	0
Female	0	0	6'170	0
Total	0	0	9'500	0
Number of individuals trained to promote HIV/AIDS prevention through behavior change other than abstinence and/or being faithful	0	0	600	0
OVC				
Number of OVC served by OVC programs				
Male	0	0	930	0
Female	0	0	1'710	0
Total	0	0	2'640	0
a. Primary Direct	0	0	1'990	0
b. Supplemental Direct	0	0	600	0
Number of providers/caregivers trained in caring for OVC	0	0	6640	0
Number of OVC receiving food and nutritional supplementation through OVC programs	0	0	880	0

3. Project Implementation

As mentioned above, the actual implementation of the program activities has not yet begun. In this context, FXB will start meeting its strategic objectives once its programs in Rwanda and Uganda will be launched. These activities are briefly summarized below per strategic objective.

SO1: Care of OVC

In order to provide comprehensive services and compassionate care so that orphans and other vulnerable children develop physically, socially, emotionally, and intellectually, FXB will:

- Provide food assistance to all enrolled OVC;
- Provide additional nutritional support to child headed households and to OVC living with HIV/AIDS
- Provide access to medical care so as to treat existing ailments – including in many cases access to anti-retroviral treatment (ART), treatment for HIV-related opportunistic infections as well as vaccinations and de-worming for young children – through the *Mutuelle de Santé* in Rwanda and through FXB mobile clinics in Uganda.
- Refer beneficiaries to clinics or hospitals, when necessary.
- Cover all medical costs, including transportation to health care services.
- Monitor health and nutritional status of OVC through regular home-visits.
- Enroll all school aged children in primary and secondary schools.
- Provide school material and uniforms to all enrolled OVC
- Cover school parental contributions and costs related to school material.
- Establish relationship with teachers and school heads to monitor regular school attendance and school performance.
- Provide vocational training opportunities for 10 young people per village who discontinued formal schooling for a long time.
- Raise awareness of caregivers and members of the community on child rights to create an auspicious and caring environment in which OVC can be protected and develop satisfactorily.

To strengthen family, community and government systems to help families, community members and groups to implement and monitor the delivery of high quality comprehensive services to a maximum of children, FXB will:

- Organize trainings to encourage the development and management of durable IGA.
- Help beneficiaries develop IGA proposal.
- Provide an in-kind grant for the launch of individual IGA.
- Organize regular home-visits so as to ensure appropriate development of individual IGA.
- Encourage the opening of bank accounts
- Gather households into groups of 8 to 10 households
- Encourage beneficiary groups
- Help groups create an organized structure
- Organize weekly meetings to:
 - Encourage beneficiaries to help each other as well as monitor each other during the course of the program.
 - Encourage the creation of an internal credit system so that heads of households can immediately improve their households' living conditions without tapping into their daily income.
- Create a collective savings account
- Help beneficiaries develop small scale collective IGA.

- Once groups have demonstrated their capacity to manage their collective savings account and to work together on a small scale, the FXB team will provide them with additional in-kind support so that they can develop and/or diversify their activity.
- Organize HIV prevention sessions targeting community leaders, teachers, young people and youth clubs, and professional associations.
- Recruit peer educators in the community.
- Provide information and skills needed to promote healthy and risk-free behavior, in addition to providing appropriate care for those infected.

SO2: HIV Prevention and HIV Counselling and Testing

To increase fidelity and reduce the number of sexual partners among beneficiaries as well as support and enable young people to choose abstinence and be faithful, FXB will:

- Organize HIV Prevention sessions promoting dignity, self-worth, and individual rights to protection; as well as the importance of abstinence as the only certain way of preventing HIV for beneficiary youth
- Organize HIV prevention activities for youth underlying the importance of delaying sexual activity and the importance of faithfulness and eliminating casual sex;
- Organize HIV prevention activities for youth stressing the importance of learning about their HIV status and how to access voluntary testing and counseling;
- Organize HIV prevention sessions for beneficiaries and the community
- Organize information sessions targeting program beneficiaries, to raise awareness about HIV and its prevention promoting healthy and risk free behaviour
- Recruit and train youth peer educators;
- Create youth anti-AIDS clubs;
- Provide youth peer educators with information and skills needed to promote healthy and risk-free behavior, in addition to providing appropriate care for those infected.
- Provide material support to youth anti-AIDS clubs to ensure the sustainability of their activities.
- Encourage HIV prevention beneficiaries to carry out VCT.
- Provide psychosocial counseling for in pre-test and post-test situation.
- Cover all VCT costs, including transportation to and from VCT centers.
- Provide access to ART and co-trimoxazole and treatment for opportunistic infections.
- Provide access to STI treatment
- Cover all treatment costs.
- Provide nutritional supplements to PLWHA.

To increase recognition, within prevention programs, that rape, sexual coercion, sex trafficking, transactional sex, cross-generational sex, gender norms, and alcohol abuse increase vulnerability to HIV, FXB will:

- Organize monthly awareness-building sessions for all caregivers as well as quarterly sessions targeting local members of government, educators, and faith-based leaders, to discuss child abuse, exploitation, and domestic violence.
- Organize awareness-building sessions for OVC and provide them with life skills so that they can protect themselves.

To increase recruitment and access to counseling and testing, especially for couples and families, FXB will:

- Organize HIV Prevention sessions promoting dignity, self-worth, and individual rights to protection; as well as the importance of abstinence as the only certain way of preventing HIV for beneficiary youth
- Organize HIV prevention activities for youth underlying the importance of delaying sexual activity and the importance of faithfulness and eliminating casual sex;

- Organize HIV prevention activities for youth stressing the importance of learning about their HIV status and how to access voluntary testing and counseling;
- Organize HIV prevention sessions for beneficiaries and the community
- Organize information sessions targeting program beneficiaries, to raise awareness about HIV and its prevention promoting healthy and risk free behaviour
- Organize information sessions specifically targeting couples and families
- Organize information sessions specifically targeting pregnant or lactating woman and focusing on PMTCT.
- Encourage HIV prevention beneficiaries to carry out VCT.
- Provide on-going psychosocial support as well as pre-test and post-test counseling.
- Cover all VCT costs, including transportation to and from VCT centers.
- Provide access to ART and co-trimoxazole and treatment for opportunistic infections.
- Provide access to STI treatment
- Cover all treatment costs.
- Provide nutritional supplements to PLWHA.

4. Monitoring and Evaluation

FXB has been particularly focusing on strengthening its monitoring and evaluation system. Working in close collaboration with Harvard University, FXB has developed a list of essential indicators and a questionnaire capable – in the first instance – of collecting essential baseline data as well as assist with the identification of beneficiaries. The questionnaire will be finalised, translated and piloted in April 2009. Conversely, the baseline is scheduled to be implemented in May 2009.

In parallel, FXB in Rwanda and Uganda have organized meetings with key stakeholders – including associations of PLWHA and religious groups – and government agencies, including district council members working in targeted districts. These meetings enabled FXB to acquire a list of destitute households potentially eligible to be enrolled in the program.

5. Program Management

In February 2009, FXB launched its recruitment process in both Uganda and Rwanda. Following the issuing of a vacancy announcement, applications were reviewed on the basis of candidates' qualifications and experience. In the event where applicants satisfied all criteria, interviews were conducted so as to ascertain experience working directly with the community, capacity to work in a team, as well as capacity to foster open dialogue. These interviews were also the occasion where interviewees were asked to present their credentials. Subsequently, as a final list of candidates was drawn, new personnel was invited to FXB coordination offices in Kigali and Kampala to sign their respective contracts. As a result, FXB hired 46 staff in Rwanda and 22 staff in Uganda.

Once the recruitment process was concluded, all personnel was asked to attend a 3 days training workshop focusing on FXB general policies and procedures as well as providing refresher training in HIV/AIDS prevention including PMTCT, health education, IGA management, and new governmental policies to be followed. To strengthen acquired knowledge, all new personnel was asked to shadow their colleagues from existing FXB villages to better acquaint themselves with the program and understand its objectives.

Furthermore, to ensure successful program management, the Board of Directors of FXB International authorized the hiring of three staff who will have direct roles in project management and who will also support implementation of the OCA Action Plan. The staff positions are:

- A full-time Operations Manager in the NYC Office to assist with financial management and reporting and with OCA work plan implementation;
- A full-time M&E Officer in Geneva to design and manage an M&E system for the award; and
- A part-time Finance Officer for East Africa based in Kigali, who will ensure financial reporting and compliance.

6. Budget

7. Other: Sustainability

Because project services have not yet begun in targeted communities, a strategy to ensure sustainability of program objectives is forthcoming and will be discussed in subsequent reports. However, several activities in this period were begun to smooth transition into program implementation, as well as at its conclusion. Foremost of these are the OCA exercises described above, which will ensure that FXB has policies and procedures in place to ensure organizational sustainability and effective resource management over the life of the program and beyond. Secondly, the monitoring and evaluation system, which will be implemented in the next reporting period, will allow FXB to methodically monitor the progress and well-being of OVC and assist FXB staff to adjust/improve program services as indicated. It is hoped that the M & E system will thus strengthen the overall impact of the program on families and ensure children's well-being in a sustainable manner.

Coordination with partners, and in particular newly formed relationships with USAID mission offices in both Rwanda and Uganda, has been a significant activity during this period. These partnerships will ensure successful transition and sustainability of the program by helping FXB to provide services efficiently, build connections with on-going community resources serving program beneficiaries, and access future partnerships and resource opportunities.