



**USAID**  
FROM THE AMERICAN PEOPLE

**President's Emergency Plan for AIDS Relief**

**Quarterly Report**

**Grant ID#:** USAID: 674-  
A-00-08-  
00078-00

**Report Due Date:** Jan 31, 2010      **Date Range of Activities Reported:** 10/01/2009 to 12/31/2009

**Project Title:** Building Bridges Program

**Organization Name:** Project Concern International (PCI)

**Primary Contact:**

<b>Last name</b>	ROMANO	<b>First name</b>	KAREN
<b>Title</b>	COUNTRY DIRECTOR	<b>Telephone</b>	(+267) 319 0198
<b>Address</b>	BONOKOPILA HOUSE, PLOT 53957 UNIT A OFF SAMORA MACHEL DRIVE FAIRGROUNDS, GABORONE BOTSWANA	<b>Fax</b>	(+267) 319 0398

**E-mail** kromano@projectconcern.org

**Grant Amount (U.S. dollars):** \$9,999,787      **Project Duration (months):** 36

**Project Start Date:** 10/01/2008

**Project End Date:** 09/30/2011



**USAID**  
FROM THE AMERICAN PEOPLE

**Geographic Location(s) of project:** BOTSWANA

**Report Prepared by:** OLIVE D'MELLO **Date Submitted:** 02/01/2010

**TABLE OF CONTENTS**

I.	Program Overview .....	3
II.	Human Resource Development .....	4
III.	Key activities and progress achieved .....	7
IV.	Challenges to implementation .....	21
V.	Plan for next Quarter activities .....	22



**USAID**  
FROM THE AMERICAN PEOPLE

## **1. PROGRAM OVERVIEW**

In October 2008, Project Concern International (PCI) was awarded from USAID a three-year grant of \$9,999,787 to continue and build upon work started with initial one-year funding through PEPFAR Botswana (USAID, CDC, HRSA /ITECH). The PCI Building Bridges program is continuing to strengthen the role played by civil society organizations (CSOs) in the delivery of integrated palliative care, OVC support, and ART treatment support services in Botswana, and will integrate more specific prevention components particularly with HIV-positive people, as well as with vulnerable youth. The program has a special focus on the needs of children and adolescents, using a family-centered approach that builds the capacity of affected families to care for their children.

### **Goal & Objectives**

**Goal:** Improved and expanded CSO delivery of integrated HIV/AIDS services for affected/infected children and families.

### **Objectives:**

1. Strengthened technical capacity of CSOs to deliver integrated HIV/AIDS services;
2. Strengthened organizational capacity of CSOs to manage and sustain integrated HIV/AIDS service delivery;
3. Strengthened collaboration and referral among government and CSOs to deliver integrated HIV/AIDS services;
4. Strengthened government capacity to support CSO delivery of integrated HIV/AIDS services;
5. Improved documentation and sharing of promising practices and lessons learned in CSO delivery of integrated HIV/AIDS services.

To achieve these objectives PCI provides sub grants and technical assistance to 11 NGO partners (listed in Table 1) and two umbrella organizations, BONASO and BONEPWA+. Botswana Association for Positive Living (BAPL) entered into partnership with PCI for a period of eleven 11 months beginning August 2009 to April 2010 to conduct a feasibility study on the use of text messaging to support adolescents and adults in ART adherence. PCI continues to provide technical assistance to Botswana Retired Nurses Society (BORNUS) and Otse Community Home Based Care Trust although they are funded through the New Partners Initiative (NPI).

PCI also collaborates and provides technical assistance to government counterparts at NACA, MOH- Department of HIV Prevention Care and Support (DHAPC) and MLG –



Department of Social Services (DSS) and Primary Health Care (PHC) at national and district level. The following table reflects current PCI Botswana NGO partners and their districts.

Table 1: PCI Botswana NGO Partners and District of location

<b>Partner</b>	<b>District</b>
Bakgatla Bolokang Matshelo(BBM)	Kgatleng District Council
BOCAIP Lesedi	Southern District Council
BOCAIP Tumelong	Kweneng District Council
Botswana Association for Positive Living (BAPL)	Gaborone City Council
Botswana Association for Psychosocial Rehabilitation (BAPR)	Lobatse Town Council
Holy Cross Hospice	Gaborone City Council
House of Hope	Palapye Town Council
Humana Child Aid	Selibe Phikwe Town Council
Mothers Union	Mahalapye Sub-District Council
Silence Kills	Selibe Phikwe Town Council
Tsholofelo Trust	Letlhakeng Sub-District Council

### III. HUMAN RESOURCE DEVELOPMENT

PCI is committed to the vision of creating a highly empowered and skilled Batswana staff, and in particular giving younger professionals a chance to achieve their potential. To that end, PCI has invested significant time and resources in staff development as well as in developing systems to manage employee performance.

PCI is fully staffed with a complement of 19 staff. The following table lists staff by position held, name of individual, qualifications and start date.

Table 2: PCI Botswana Staff

<b>Position</b>	<b>Employee</b>	<b>Start Date</b>
Country Director	Karen Romano, MPH	17 Jan 2008
Finance & Administration Director	Arun Sharma, CPA	23 Feb 2008
Programs Director	Dorothy Tlagae, BSW, MADVS	15 July 2009
Program Manager	Olive D'Mello, MSc PH	11 Feb 2008
Finance & Administration Manager	Aucillia Letshwiti, ACCA	06 July 2009
Organizational	Davies Mpofo, MSW, MBA	1 Dec 2008



**USAID**  
FROM THE AMERICAN PEOPLE

Development Officer		
OVC Officer	David Kanje, MA	10 Mar 2008
Palliative Care Officer	Tumalano Sekoto, BA, RN/MW, FNP	1 Feb 2009
M&E Officer	Reggie Moatshe, MSc Computer Science	3 Aug 2009
Assistant M&E Officer	Watipa Gaogane, BA (Social Sciences)	1 Mar 2008
Associate Program Officer	Kenalemodisa Tiroeng BSc (formerly Pati)	1 Feb 2008
Accountant	Lethabile Modikwa, BA, CIMA stage 2	1 Feb 2008
Accountant	Kgololo Lephole, Part qualified ACCA, Part 3 ACCA	11 Aug 2008
Administration Officer	Refiloe Aphiri, MBA pending	1 July 2008
Assistant Administrative Officer	Tshepang Mothei	1 Feb 2008
Data Entry Clerk	Thatayaone Monyere (temporary)	1 Oct 2009
Receptionist	Batsile Nkgwathisang	1 April 2009
Driver	Sylvia Tshoswane	1 Feb 2008
Driver	Bofelo Moilatshimo	1 Feb 2008
Cleaner	Banyana Seforo	1 June 2009

### Staff Development

- Training for OVC Officer in PSS by REPSSI- Johannesburg

The OVC Officer, Mr. David Kanje, attended a two weeks Regional Facilitator's (REFA) workshop in Johannesburg, South Africa conducted by the Regional Psychosocial Support Initiative (REPSSI) from October 12 to 23, 2009. REPSSI sponsored Mr. Kanje's attendance as an extension of our ongoing partnership to develop NGO skills in Journey of Life and other PSS skills. The objective of the workshop was to train participants to become Regional Facilitators in Psychosocial Support in order for them to build capacity and provide continuous mentorship to implementers at country and regional level. Major course content areas included PSS facilitation skills and techniques, mainstreaming PSS in HIV/AIDS programs and provision of PSS support services. The OVC Officer will be mentoring and supporting the Master Trainers already trained by REPSSI in Botswana, and also supporting Government institutions and PCI NGO partners to mainstream PSS in their programs

- Training of Associate Program Officer in Palliative Care in Uganda

PCI Associate Program Officer Mr. K. Tiroeng together with Mrs. Dorcas Magwamba Kanyevo and Mrs Esther Ntsayagae both of Ministry of Health, DHAPC, Palliative Care Unit attended training at Mild May, Uganda. The training took place from October 19 to November 06 2009. The aim of the course was to empower health care providers with



knowledge and skills to provide effective and efficient holistic care services to PLHIV and their families in the community. The course content included: basic facts and trends on HIV and AIDS, paediatric palliative care in HIV/AIDS, nutrition, quality assurance in palliative care, the role of Government in palliative care –focussing on policy, implementation and M&E among others. The PCI Officer will use the knowledge and skills gained to support the finalisation of the paediatric ART adherence curriculum, development of the integrated services package for NGOs and to provide on-going technical support to PCI NGO partners in designing and implementing quality palliative care interventions.

- Global Impact Measurement System (GIMS) training

From the November 9 -13, 2009 PCI Headquarters launched the Global Impact Measurement System (GIMS) in Cape town South Africa. PCI Botswana M&E and Finance Officers together with PCI officers from other African and Asian countries attended the launch and training. Their participation was paid for from PCI internal resources (non-USAID). GIMS is a web-based software solution that brings together Project, Financial, and Human Resource data into a single interdependent application. At the core of GIMS is a central database used for storing data from each module and generating reports. The benefits of GIMS include:

- Improved capacity to gather, store, retrieve and share information about country projects in a timely manner.
- Enhanced monitoring of programmatic resources and financial investment
- Timely and efficient access to information and documents via the web and/or offline
- Availability of current and accurate information for proposal and report preparation
- Easy accessibility and linkage to organization-wide reports and databases (e.g. linkage with ACCPAC)

The M&E Officers and Finance officers were required to train other officers in their respective countries and this training will be done in quarter two for PCIB program and finance staff.

- Long- term Courses

As part of its human resource development plan, PCI is committed to assisting Batswana nationals to grow professionally. Four Officers are currently being supported to attain additional/higher qualifications for their professional growth as well as to strengthen their skills and competencies to deliver the Building Bridges Program. Support includes financial and study leave that allows them time off to prepare for their exams. Table 3 lists names of staff PCI is currently assisting and their courses.

Table 3: PCI Staff and courses being pursued

<b>Name of Officer</b>	<b>Course/Level</b>
Lethabile Modikwa	Chartered Institute of Management Accounts (CIMA)- Managerial level



**USAID**  
FROM THE AMERICAN PEOPLE

Kgololo Lephole	Association of Chartered Certified Accountants (ACCA)- Final level
Kenalemodisa Tiroeng	Postgraduate Diploma in HIV/AIDS Management
Watipa Gaogane	MSC Demography

#### Human Resource Management Systems

During the quarter, PCI dedicated significant time to reviewing and refining all staff position descriptions based on experiences of the past two years. PCI used a participatory process involving a local Human Resource consulting firm and staff to review and refine the position descriptions. The revised position descriptions will be in use effective January 2010.

#### **IV. KEY ACTIVITIES AND PROGRESS ACHIEVED**

##### **a) Delivery of integrated services through partnership with 10 NGOs**

During the quarter, PCI NGO partners continued to provide HIV care and support services to children and adults in an integrated manner with focus on the family. Services provided are determined by the needs identified and the capacity of the NGO staff to provide the service. NGO staff work closely with local Government and other service providers through referral networks to ensure that appropriate services are delivered to clients. PCI has continued to strengthen capacity of NGOs through program design, training and mentoring to ensure quality and efficient service delivery.

Progress has been made towards achievement of targets as detailed in this quarterly report. The program targeted to reach a total of 1632 children this quarter with a minimum of one care service and managed to reach 2309 children. Of the children reached, 169 aged 15 and below, were living with HIV and received a minimum of one clinical service. This is about 90% reach against the target (188) which is a result of the training and follow-up in pediatric ART support that PCI in collaboration with Baylor embarked on in FY09. PCI will support its NGO partners to work more with Government institutions through inter-referrals to enroll more children living with HIV into the ART program as well as provide them with continuous support to adhere to treatment.

The program reached 528 children with educational support mainly through pre-school education, after school care as well as during Kids club sessions which in most cases happen during weekends. In addition to education, NGO partners use these platforms to provide food and nutrition services to children. Of the 2309 children reached, about 64% received food and nutrition services. NGO partners also provide nutrition education to families through home visits and community gatherings on meal preparation and proper diet especially for children and adults on ART. The challenge is how to make this service more sustainable as most of the food provided is through the PCI grant. PCI is working with partners to explore ways to strengthen food, nutrition and livelihood security at family level and will during FY 10 support NGOs to come up with realistic interventions.



PCI also plans to work with MOH Nutrition Rehabilitation Unit to improve the NGO partners' skills in nutrition and ability to counsel families on the same. Table 4 summarizes care and support services targets and achievements.

Table 4: Summary of PEPFAR required Care and Support indicators.

Indicator	Actual	Planned for quarter (Oct 09 – Sept 10)		
<b>C1.1.D</b> Number of eligible adults and children provided with a minimum of one care service. by sex: male, female and by age <18,18+),	3622	<b>2720</b>		
Age	Male	Female	Total	
<18	1052	1257	2309	
18+	314	999	1313	
	1366	2256	3622	
<b>C2.1.D:</b> Number of HIV-positive adults and children receiving a minimum of one clinical service. By sex male, female and by age <15 years, 15+ years, of age.	1423	<b>1067</b>		
AGE	Male	Female	Total	
<15	69	100	169	
15+	286	968	1254	
All	355	1068	1423	
<b>C5.1.D</b> Number of eligible clients who received food and/or other nutrition services. By age <18 and 18+.	1987			
	< 18 years	1469		
	18+ years	518		
<b>C5.3D</b> Number of eligible children provided with health care referral	18			
	Male	7		
	Female	11		
<b>C5.4D</b> Number of eligible children provided with education and or vocational training	Total	528		
	Male	256		
	Female	272		



**C5.5D** Number of eligible adults and children provided with protection and legal AID services by age (<18,18+), By sex, male and female.

Age	Male	Female	Total
<18	14	17	31
18+	14	32	46
	28	49	77

During the quarter, the program reached a total of 1313 adults (999 females and 314 males) with a minimum of one care service against a target of 1088. Of these, 1254 aged 15 and above are currently living with HIV and received a minimum of one clinical service. (It is important to note that this figure includes adolescents 15-18 who receive additional services under the children program as described above). Of the 1313 adults reached, 518 received food and nutrition support mainly through centre-based day care programs. PCI encourages NGO partners to provide food to clients in situations of malnourishment, and/or when clients are too sick to support themselves. Otherwise PLHIV are encouraged to form support groups and start projects that generate income or food to support their food and nutritional needs. PCI will provide technical assistance to such initiatives through the FNLS strategy.

During the reporting period, the program provided protection and legal AID services to 46 adults and 31 children. Services include support to families to access grants and Social Welfare support, coaching of caregivers to access community level support for children among others. In addition, children are assisted with birth registration. A challenge has been the slow response by the different Government service providers to referrals made by NGOs. PCI will be working more closely with key Government departments to strengthen collaboration and linkages between these departments and NGOs.

Notably among the PEPFAR indicators listed in Table 4, is the low number of children provided with health care referral (indicator no.C5.3D). The low numbers reached could be due to the fact that this is a new indicator and NGO partners are tracking it for the first time. PCI will assist partners to interpret this indicator and report appropriately.

Similarly in Table 5 below, there has been slow progress in achievement of targets for the indicator number T1.1D: Number of adults and children with advanced HIV newly enrolled on ART. This is another new indicator that partners are tracking for the first time and will need assistance to interpret and report as required. NGO partners continue to provide support to adults and children with advanced HIV infection receiving ART and a total of 1414 clients have been reached against a target of 854 set for the quarter. The support includes ART adherence education support and referrals.

During the quarter, 60 health care workers received training against a target of 798 set for the quarter. The reason behind the low numbers is that most of the trainings are scheduled



to take place in the second quarter. It is expected that there will be higher numbers of individuals trained in the next quarter. PCI staff are continuing to provide technical assistance in reviewing content as well as availing appropriate training materials to the partners.

Table 5: Summary of PEPFAR required ART and Training indicators.

<b>Indicator</b>				<b>Actual</b>	<b>Planned for quarter</b>
<b>T1.1.D</b> Number of adults and children with advanced HIV infection newly enrolled on ART. BY sex male and female, by age <1, <15, 15+				21	<b>235</b>
Age	Male	Female	Total		
<1	0	0	0		
<15	0	0	0		
15+	3	18	21		
Total	3	18	21		
<b>T1.2.D</b> Number of adults and children with advanced HIV infection receiving antiretroviral therapy (current) BY sex male and female, by age <1, <15, 15+				1414	<b>854</b>
Age	Male	Female	Total		
<1	0	2	2		
<15	69	94	163		
15+	304	945	1249		
Total	373	1041	1414		
<b>H2.3.D</b> Number of health care workers who successfully completed an in service training program.				538	<b>798</b>
			Male	109	
			Female	429	

**b) Program Management**



**USAID**  
FROM THE AMERICAN PEOPLE

#### Program workplan and budget status for FY 10

Building on work started in September 2009 to develop a program workplan and budget for FY10, PCI management team spent significant time during the quarter reviewing and finalizing the workplan and budget. The workplan was submitted to USAID in November 2009. The FY10 workplan aims at consolidating last year's achievements which laid a foundation for partners' understanding of the technical care and support components that make up the integrated package of services at the family level. During the current year, more emphasis will be placed on individual mentoring and peer learning strategies to facilitate application of skills acquired in the past year, for key strategy areas which include: integration of care and support services at the family level; implementation of community mobilization activities using the Journey of life (JOL) tool; and piloting Food, Nutrition and Livelihood Security (FNLS) strategies.

In addition, the workplan includes a strong focus on strengthening NGO Boards and governance capacity, as well as assisting NGOs to develop and implement sustainability plans. The work plan also reflects PCI's continued support to umbrella bodies BONASO and BONEPWA+ to strengthen their coordination role, and includes activities to enhance collaboration between District Government departments (DAC, DHT & S&CD) and the CSOs to leverage technical as well as financial support. Collaboration with key stakeholders such as MOH, MLG (DSS &PHC), NACA, Marang and other international NGOs in different technical areas will continue in FY 10 as described in the workplan.

#### Finalizing NGO partners' Implementation Plans (IPs) and Budgets for FY 10

During the quarter, PCI staff continued assisting NGO partners to finalize their FY 10 IPs and budgets which they had started working on in Quarter 4 FY 09. The IP and budget development process is used to help partners reflect on their past achievements, evaluate their capabilities and develop realistic capacity building interventions. This process also provides an opportunity to develop NGO partner skills in program design and budgeting. Comparing the current IPs to what was submitted to PCI at the beginning of the partnership in April 2008, there has been tremendous improvement in the way objectives and activities are presented. There is also an increase in targets set by individual NGO partners as a result of the mind shift from centre-based to community based activities, expanded breadth of programs both technically and geographically as well as involvement of key community support structures e.g. Village Development Committees (VDCs) churches, PLHIV support groups, women and youth groups. Partners' IPs also reflect deliberate efforts to strengthen collaboration between district departments and NGOs through planned and regular meetings. The challenge that remains is the insufficient budget to cover all planned activities mainly due to the imbalance between the amount of the budget needed to cover recurrent expenses (salaries, benefits, office rent, etc) compared to what remains for program activities. During the quarter, PCI staff have held meetings with all the DACs in PCI Districts of operation and the NGO partners to re-enforce the need for participation and inclusion of CSO activities in district HIV/AIDS plans and the DACs have been very receptive. This also includes identifying opportunities for the NGOs to receive activity funding directly from the District, to complement the support they receive on running costs from PCI. PCI will continue to



**USAID**  
FROM THE AMERICAN PEOPLE

assist organizations come up with resource mobilization strategies to address funding gaps and improve sustainability.

#### Participation in USAID Program Data Audit

In November 2009, PCI staff participated in a program audit exercise conducted by the Regional Inspector General's office. Nine of the ten PCI supported NGOs were audited. Observations raised during the visits have been used by PCI to further refine M&E activities planned for FY10. Major issues observed included the possibility of double counting of clients, insufficient supporting documentation of services provided to clients, misunderstanding of certain concepts e.g. direct and indirect services, poor record keeping (files not labeled, storage), incomplete information (forms not filled adequately) and quality of trainings conducted (insufficient duration and level of content covered). Based on the audit findings, PCI will dedicate more time in FY10 to implementing data quality reviews and continuing to strengthen partner skills in M&E as identified by the audit. PCI is developing strategies to improve the training activities conducted by the NGO partners, including requiring partners to ensure that the content is reviewed by PCI staff and/or district resource people, and making sure that partners make use of PCI staff and/or district resource people to assist in conducting training as needed. Additionally, PCI will continue to distribute available national training materials and guidelines and adapt and develop new ones where there are gaps.

#### **c) Technical Capacity strengthening for NGO Partners**

##### Pediatric Adherence Training for Volunteers

As part of the process of implementing the ART access and adherence curriculum developed for community volunteers, a pilot training was conducted from October 26 to 30, 2009. The objectives were: to test the curriculum with the target audience and provide hands-on -practice for the TOTs who were trained in August 2009 through the PCI/Baylor collaborative efforts. All presentations were conducted in Setswana to improve understanding of the content. Twenty community volunteers from 4 organizations (BAPR, HCH, BOCAIP Tumelong & BOCAIP Lesedi) were trained. Facilitators included six staff from PCI supported NGOs and two from District Offices. One Medical Officer from Botswana Baylor Children's clinic and the PCI Palliative Care Officer provided oversight. Generally the content was determined to be appropriate and relevant to the level of understanding of the community volunteers. The community volunteers suggested that a session on TB be added to the content. The facilitators were generally good but will require more mentoring and practice to achieve the right standard. The next step will be to work with Baylor and MOH/MASA to agree on the form of presentation as well as constitute a technical working group to oversee the finalization process. Meanwhile, districts will be encouraged to plan and conduct training with NGO staff as need arises

##### NGO partner training on new PEPFAR indicators

During the quarter, PCI M&E unit held a three-day workshop to orient NGO partners to the new PEPFAR indicators as well as review reporting tools accordingly. The training also addressed report writing, interpretation of data, reinforced the importance of



**USAID**  
FROM THE AMERICAN PEOPLE

monitoring and evaluation and also imparted skills on Microsoft excel to assist them to sort their data. Major outcomes from the training included an integrated service provision tool that combined all previous services under different technical areas i.e. OVC and palliative care into a total care services tool as provided for in the PEPFAR II indicators. This tool will assist in operationalizing and monitoring provision of integrated services by NGO partners at family level. The quarterly reporting template was modified and targets for the current financial year finalised as per the new indicators. The revised tool was used to compile data for the current quarterly report and there is evidence that partners understand the tool well and will keep modifying as required. Partners were asked to develop training plans with their volunteers on the new indicators as well as the data collection tools and PCI will provide technical assistance during the trainings. In the next quarter, PCI program team will develop operational definitions of the services as reference for partners as well as an integrated assessment tool which will determine the needs of the family and the subsequent services to be provided.

#### Technical Assistance visits to 10 NGO partners

During the quarter, PCI program staff conducted technical assistance visits to all the 10 NGO partners. Objectives of the visits were to: review findings from the Rapid Organizational Capacity Assessment (ROCA) and prioritize activities for FY 10; review Implementation Plans and budgets and identify technical assistance needs for the year; discuss and set targets for resource mobilization for the year and discuss progress on application of skills after trainings held in the past year and identify follow up actions required by NGOs and PCI. PCI staff divided into two teams with one focusing on partners in the north (Mahalapye, Palapye and Phikwe) while the other focused on the south (Kgatleng, Letlhakeng, Lobatse, Gaborone, Kanye and Molepolole). During the visits, PCI teams held discussions with NGO Board members, and with the DAC, DHT, and S&CD to continue to strengthen partnerships.

- Meetings with District Officials (DACs, S&CD and DHT)

The Southern team focused on briefing government counterparts on PCI's activities in the districts of Kweneng East where BOCAIP Tumelong is situated, Kweneng West for Tsholofelo Trust, Kanye for BOCAIP Lesedi, Lobatse for BAPR and Kgatleng for BBM. The DACs were aware of activities of the NGOs supported by PCI and appreciated their contribution. Most of the NGOs participated in DMSAC meetings as well as in the annual district planning meetings. However, a few of the partners were included in the district plan and budget namely Holy Cross Hospice in Gaborone and BAPR in Lobatse. Discussions held with the DACs indicated potential for NGOs to be included in the district plans and budgets. PCI advised partners to actively participate in district planning activities, share their work plans and budgets as well as reports. PCI will follow up in quarter 2 on progress made in that regard.

The northern team discussions included re-affirming Mahalapye and Phikwe as focus districts where new strategies and initiatives such as community mobilization using Journey of Life (JOL) tool, Food, Nutrition and Livelihood Security (FNLS) will be more intensely supported than in other project sites. In Phikwe, the PCI team met with the DAC Mr Lameck Myengwa, S&CD Deputy Chief David Tatedi and another Officer from



**USAID**  
FROM THE AMERICAN PEOPLE

S&CD, Mr. Thabeng. The meeting focused on horticulture or agribusiness initiatives which would assist vulnerable families to start projects that would assist them to meet their food and nutrition requirements and some form of livelihoods. The DAC and S&CD welcomed the idea and agreed to work with PCI NGO partners, Humana Child Aid and Silence Kills to implement the initiative. The S&CD team indicated that they are currently having to cut down on the numbers of people in the destitute program and PCI's planned FNLS initiative will help provide an alternative to meeting these people's needs. The district Officials pledged to form a committee that will work closely with the two NGO partners composed of S&CD. It was agreed that the committee would draft a proposal and submit to relevant council committees for support, and also to address issues of district boundaries as the identified piece of land was in a different district (Bobirwa Sub).

- Meetings with NGO Board members

Discussions with NGO Board members focused on prioritizing activities to be conducted in FY10 from the capacity building plans that were developed as a result of the ROCA conducted in FY09. For most of the partners visited only a few members of the boards attended the discussions. Despite that, PCI teams went ahead and discussed issues arising from the ROCA findings and set targets for priority action areas for individual organizations. The main areas included: governance and leadership, resource mobilization, HR policies and procedures and strategic planning. A technical assistance plan for FY 10 was drawn with each one of them to guide implementation during the year. PCI will follow up in the next quarter on progress made. Important to note is that four of the ten NGO partners: BOCAIP Lesedi, BOCAIP Tumelong, Holy Cross and House of Hope were in the process of electing new board members so PCI staff emphasized proper hand over process. Other challenges common to all NGO partners included failure of board members to meet as required and lack of commitment.

- Meetings with NGO staff

PCI staff held in-depth discussions with the NGO staff on modalities of implementing activities in their IP against approved budgets. Issues that run across most of the NGO partners included: finding cost effective ways to conduct activities such as trainings and to improve the quality of their trainings: improving management of volunteer activities; strengthening linkages with clinics for effective inter-referrals; and the need to operationalise integration of services at the family level. A technical assistance plan was developed for each of the organizations to address the unique needs of individual partners and cross cutting issues addressed in the PCI work plan.

- Progress on Community Mobilization using Journey of Life (JOL) tool

There has been progress in implementation of the action plans developed by the five district teams formed following the JOL training of the six partners. Phikwe team (Humana, Silence Kills and District Government staff) trained community leaders and will follow up on the implementation of the action plans that the community leaders drew during the training. Similarly, Mahalapye (Mothers Union and District Government staff) also conducted a community sensitization workshop using JOL and will follow up action plans. Humana was also requested to conduct JOL session with students of Mojamorago Community Junior School which was reported to having serious discipline problems.



**USAID**  
FROM THE AMERICAN PEOPLE

BAPR and Holy Cross also continue with JOL activities in schools around their community while BOCAIP Lesedi uses JOL tool for conducting kid's clubs session in their communities. PCI staff will work towards consolidating the district teams and provide technical assistance with implementation of their action plans. The Trainers of Trainers (TOT) workshop in JOL is scheduled for quarter two.

- Progress on Food Nutrition and Livelihood Security (FNLS) interventions

Following the assessment conducted in the last financial year, PCI staff held discussions with all PCI supported organizations on how to improve on the current FNLS interventions within their programs and where possible to test new initiatives as per recommendations from the assessment. In Phikwe, Humana reported having assisted their volunteers to form groups that registered with the registrar of societies. The groups plan to undertake the following projects; bakery, floor polish production and manufacturing of sheets and other clothes for the hospital. They plan on assisting other groups to set up self help groups with revolving funds. PCI staff advised Humana to contact different institutions for funding of these initiatives to include Department of Women Affairs and the Private Sector. The PCI team also learned from the organization that they have a Horticultural field (228 X 150 meters), that one of the volunteers has agreed to lease to them free of charge for 5 years. The plot is about 20 kilometers from Selebi Phikwe, it has a lease from Land board, the soil has been tested to determine what can be grown and the owner has already mobilized council department to assist in clearing the plot. The findings at Humana were shared with the District Team and they agreed to work together to pursue the projects. The team agreed to submit a proposal on planned projects on the plot as well as outlining the resource mobilization strategy they will undertake to PCI. The team will link with Ministry of Agriculture, Women's Affairs Department and local Business for support. PCI staff will follow up on progress in the next quarter.

In Mahalapye, the team discussed how Mothers Union can utilize the piece of land where the organization is located to generate income. Mothers union staff proposed a meeting between PCI and the centre board which is based in Gaborone to discuss further. This meeting has been scheduled for quarter two. FNLS activities common to the rest of the organizations include backyard gardening at the centre and in the homes of clients and communal gardening. Most of these initiatives are run by staff and PLHIV support groups at the centre. PCI staff discussed with each organization how they can improve their projects and think of alternatives. PCI will come up with a concrete plan of activities with each organization depending on the findings and has dedicated one Officer, Mr. Kenalemodisa Tiroeng to move the FNLS strategy forward.

- Follow up on trainings conducted during the year

During the visits, PCI staff inquired about NGO plans of information and skills transfer from staff who attend trainings to others who do not. Most of the NGO staff do a debriefing of the training and share trainings materials. NGO staff were encouraged to always have a deliberate plan of information and skills transfer to others after the training. Each organization was tasked to come up with an internal training plan for transfer of knowledge and skills acquired during training as well as keeping abreast with new developments in HIV programming.



**USAID**  
FROM THE AMERICAN PEOPLE

#### **d) Institutional Capacity strengthening for NGO Partners**

##### Rapid Organizational Capacity Assessment (ROCA)

Two of the PCI supported organizations, Holy Cross Hospice and BBM had not been assessed during the last financial year. The consultants used to assess the eight organizations were engaged to facilitate self-assessment of the two organizations. Assessment reports were produced and used to develop individual capacity building plans of the respective organizations. The ROCA process identified priority capacity building areas for implementation during 2009 – 2010 to include: review of constitutions, strategic plans, organograms, updating job descriptions and ensuring that contracts were consistent with job descriptions. These were discussed with the two partners during TA visits and priorities set for the year. PCI will be following up on progress during the second quarter.

##### Provision of IT Equipment

Following findings from the assessment of the partners IT needs done during FY 09, PCI purchased priority IT equipment and had it installed at the offices of all the 10 NGO partners, BAPL, BONASO and BONEPWA+. These varied according to needs and priorities as identified. Some NGO partners have included IT training in their human resource capacity building plans and PCI will provide the necessary support on a case by case basis.

##### Special support for BOCAIP Tumelong and Silence Kills

During the quarter, PCI visited two NGOs BOCAIP/Tumelong Gaborone and Silence Kills Support Group in Selebi Phikwe in October 2009. For BOCAIP Tumelong issues needing urgent attention included: late submission of financial reports which were often inaccurate and without adequate supporting documentation as well as unauthorised payment vouchers. PCI team met with the Board and noted that the Board was not carrying out its roles and responsibilities as expected. A plan of action was agreed on and PCI is monitoring progress. For Silence Kills, PCI's visit was in response to a letter received from the Board members relating to financial management concerns. The team held meetings with staff, management and the Board and discovered that there was lack of understanding of roles and responsibilities between management and board members, mistrusts, poor communication, no supervision, interpersonal conflicts and lack of teambuilding activities. PCI team clarified roles and responsibilities of Management and the Board, worked with the staff and the Board to put together a plan that will address other issues identified. PCI will follow up on progress in the next quarter.

A recurrent issue identified with all of the partners, which BOCAIP Tumelong and SKSG are examples of, is misunderstanding of the roles of Boards vs. management leading to important oversight and resource mobilization responsibilities falling through the cracks and in more serious cases leading to unnecessary feuds and illegal firings. This situation which has cropped up at most of PCI's partners affirms the need to focus significant OD



**USAID**  
FROM THE AMERICAN PEOPLE

attention on improving constitutions, strengthening Boards, and building clarity regarding the respective roles of Boards vs. management.

#### **e) Botswana Association for Positive Living (BAPL)**

PCI provided ongoing mentoring to BAPL to strengthen their organizational capacity. This involved support in changing their legal structure from a Society to a Company Limited by Guarantee which will allow room for them to establish both a non-profit and a for-profit entity that will help them become self-sustaining in future. In addition, BAPL managed to obtain approval from Ministry of Health (Health Research Development Committee-HRDC) to start enrolment of study participant which will start in the next quarter.

PCI continues to explore opportunities for the use of technology in HIV programs. To this effect, PCI and BAPL with support from PCI headquarters developed a concept paper for the USAID Global Development Alliance program. The project is called TOPS (Technology for Opportunity, Productivity and Self assessment), and will focus on four components:

- Mentorship through provision of PSS and economic strengthening of vulnerable youth and at risk women by linking them with mentors using call phone technology
- Entrepreneurship training for vulnerable youth and at risk women to start or expand their businesses.
- Skills building for vulnerable youth and at-risk women to improve their food and nutrition security.
- Promotion of micro credit loans and grants for small business capital for older vulnerable youth and poor women.

The project will work in partnership with U.S. micro-credit and micro-grant intermediaries who use the internet to link local borrowers with donors in the US. It will strengthen the capacity of Women's Finance House to implement microfinance programs, and will tap into local resource organizations training in entrepreneurship skills and in food/nutrition security. MASCOM will be a key partner in the use of cell phone technology. The draft concept paper will be submitted to USAID for consideration.

#### **f) PCI's work with key Government stakeholders**

##### Support to the development of the CSO National Capacity Building Strategy

During FY09, PCI agreed to assist NACA and BONASO in their efforts to develop a National Strategy for CSO Capacity Building. goal of the strategy is to facilitate a coordinated civil society response in the provision of comprehensive and quality prevention, treatment, care and support services in line with the new National Strategic Framework (NSF II; 2010 -2016). This process started in July 2009 but was halted in August due challenges with Terms of Reference (TOR) and the quality of the consultants hired through UNAIDS. In November 2009, the TOR was revised by the Technical Working Group and a proposal made to hire a new consultant. The core group working



**USAID**  
FROM THE AMERICAN PEOPLE

closely with the consultant will further strengthen the TOR and start the work in the next quarter.

#### Support to DSS to establish District Child Care Forums

During the reporting period, the OVC Officer provided technical assistance to DSS during workshops to establish District Child Care Forums. The first workshop ran from September 21-25, 2009 and focused on NGOs from the Kweneng and Kgatleng districts. About forty participants from both NGOs and district Social workers participated in the workshop. After the workshop two district committees were formed. The second workshop was conducted from October 26-30, 2009 and participants were drawn from five districts namely: Kgalagadi, Southern, Lobatse, South East and Ghanzi with a total of 46 participants from NGO and S&CD departments. Five district committees were formed. The third workshop was held in Kasane from November 7-11 2009, attended by a total of 51 participants from 10 districts: Francistown, Phikwe, Palapye, Mahalapye, and Sowa Township authority, Tutume, Bobirwa, Serowe Administration Authority, Tonota and Moshopa). These committees will be coordinating all child welfare related activities in their districts, such as resource mobilisation, determining service standards within their districts as per Government regulations and guidelines and capacity building.

#### Progress on support to DSS to develop Care of Carers Model (CCM)

During the quarter, PCI held consultation meetings with the Department of Social Services (DSS) to determine how to move the process of developing the Care of Carers model forward. It has been agreed that a consultant will be identified and engaged to do the work. The CCM seeks to identify and strengthen capacity of community resource persons for provision of care and support to vulnerable children and their families. This will build on on-going efforts of CBOs, NGOs and other key players at the community level. Work on the CCM will start in the next quarter.

#### **g) PCI's work with umbrella organizations**

PCI continued to support BONASO and BONEPWA+ to accomplish activities as agreed in the MOUs signed in FY09.

#### BONASO

Support to BONASO included both in organizational and technical strengthening. The support aimed to increase BONASO capacity to coordinate membership activities at the national level, and facilitate delivery of quality services at district and community level. Activities undertaken included:

- Extending the Memorandum of Understanding (MoU)

The MOU between PCI and BONASO was extended from 01 October 2009 – 30 January 2010 detailing the activities to be accomplished during the period. Activities included:



**USAID**  
FROM THE AMERICAN PEOPLE

finalizing the website and database maintenance plans and conducting training for the users; conducting a financial health check; installing a server and wireless network at new BONASO offices; setting up a District Coalition Coordination Office in Palapye; introducing the BONASO-MASEBOBO Coalition to DMSACs; developing a BONASO - MaSeBoBo governance organizational structure and systems; conducting a needs assessment of the Coalition members; and setting up a BONASO - MaSeBoBo Coalition Information kiosk in Palapye. (Note that MaSeBoBo is an abbreviation for the coalition that comprises **M**ahalapye, **S**erowe, **B**oteti and **B**obirwa)

- Website and database development

During the quarter, the design of the website and database was completed by partner NIIT (National Institute of Information Technology) and the maintenance plan developed. This will be followed by testing of the website and training of core staff in database use in January 2010.

- Training on Governance & Leadership

In September 2009, PCI in partnership with BONASO conducted a workshop on governance and leadership. The workshop was attended by 26 participants of the BONASO-MASEBOBO CBO/NGO Coalition. Representatives included community based organizations, youth groups, and support groups. The purpose of the workshop was to strengthen the CBO/NGO capacity in organizational governance and leadership. A key output of the workshop was draft individual actions plans for review and incorporation in the proposed BONASO - MASEBOBO Coalition Implementation Plan for October '09 – September 2010. An Interim Executive Committee was also elected at the workshop to, among others, review the Terms of Reference for the Coalition, develop Coalition guidelines and align them to the BONASO constitution, as well as develop the governance structure of the Coalition.

- Establishment of the District Coalition Office

PCI assisted BONASO to establish an office in Palapye to ease coordination of the MASEBOBO coalition. Temporary office space was secured within the District Administration Offices. Office furniture, AV equipment and computer equipment were procured.

- Establishment of the Information Kiosk

As part of decentralizing its resource centre activities, a needs assessment for establishment of an Information Kiosk for BONASO affiliates was conducted in Palapye in November 2009. The assessment was done as part of the Website upgrade and developing an Affiliates Database Management System for BONASO. The purpose of



**USAID**  
FROM THE AMERICAN PEOPLE

the Kiosk is to enable MASEBOBO affiliates to have access to information about HIV/AIDS and services provided by member organizations free of cost. The Kiosk will keep a number of information materials including magazines, journals, reading materials as well as provide internet services for MASEBOBO affiliates. The assessment focused on the current infrastructure, resources available, expectations of the Project Coordinator and requirements. The Kiosk is located at House of Hope Trust premises and space is rented at P3, 000 per month. Computer equipment was procured for the Kiosk, and additional equipment will be procured in the next quarter.

- Introduction of BONASO – MASEBOBO District Coalition Office to the District Multi Sectoral AIDS Committees(DMSAC)

The District Coalition Coordinator undertook field visits to all five DMSACs to introduce the Coalition and to participate in relevant District HIV/AIDS planning meetings. The visits covered DMSACs in Serowe, Selibe Phikwe, Bobonong, Boteti and Mahalapye. DMSACs appreciated the initiative and indicated their willingness to work closely with the organizations. Follow up visits are scheduled for January 2010 to compile organizational profiles of the organizations, consult with local community leadership about their expectations of local community based organizations as well as solicit activities that they would like prioritized in their localities.

#### BONEPWA+

Support to BONEPWA+ was mainly technical, focusing on strengthening the capacity of BONEPWA+ at national level to provide integrated HIV/AIDS services through Centers of Excellence (COE) at district level.

The current Memorandum of Understanding (MoU) between PCI and BONEPWA+ was extended for four months, October 2009 – January 2010. The purpose was to allow BONEPWA time to complete the development of the website and upgrading of the database; provide training to BONEPWA+ staff on maintenance of the database; test and finalize the website, and develop a new PCI/BONEPWA+ implementation plan for October 2009 – September 2010. A draft implementation plan and budget were submitted to PCI and jointly reviewed with BONEPWA+ in December 2009. The draft plan and budget will be completed in January 2010. The database and website were completed. Training of BONEPWA+ staff in the maintenance of the database and testing of the website will be done in January 2010.

#### **h) Strategic partnerships and networking**

##### PCI/AED collaboration on Organizational Development

In October 2009, AED & PCI held a meeting to discuss collaboration in building the organizational capacity of partner organizations). PCI & AED agreed to collaborate in developing simple guidelines and tools on governance and leadership, which are urgently



**USAID**  
FROM THE AMERICAN PEOPLE

required. The guidelines will have standardized information and include case studies for major topics for easy reference and application. A shared goal between AED and PCI is for the guidelines to be done with BONASO and other relevant stakeholders, and to be used as a resource by BONASO to roll out to its members. In November 2009, a content outline was produced and reviewed by both PCI and AED. The first draft guidelines will be shared with key stakeholders for their input, with the goal of finalizing the guidelines by March 2010. PCI, AED and BONASO will collectively lead this process. The stakeholders will consist of the Department of AIDS Prevention and Care (NGO Coordination Office) in the Ministry of Health; National AIDS Coordinating Agency; Department of Social Services (NGO focal office); Forum Syd; Research Triangle Institute (RTI), USAID, and other to be determined. It is envisaged that through collaboration, PCI and AED will further develop simple guidelines on resource mobilization, HR/volunteer management, financial management and strategic planning.

## **V. IMPLEMENTATION CHALLENGES**

- NGOs capacity to manage and implement multiple programs from different donors without compromising agreed on deliverables

PCI supported NGOs have started attracting more funding from other donors and yet they still have challenges in both program and organizational management. PCI has been in dialogue with RTI, currently also sub-granting to Silence Kills, and AED who is sub-granting BOCAIP Lesedi and to a smaller extent to BOCAIP Tumelong, to work together to help the local partners revise budgets to reflect cost share on recurrent costs and other expenses. PCI, AED and RTI are also working out how to coordinate on issues such as harmonizing financial reporting formats/processes and delivering capacity-building activities.

- NGOs adherence to Human resource policies according to Botswana Labour laws

Before PCI began assisting the NGO partners with HR management, they hired staff without making clear the terms and conditions of work, and without providing for GOB requirements such as severance benefits. As part of strengthening organizational capacity, PCI has made sure all staff contracts are in order and that benefits are properly reflected in the NGO budgets.

- The Capacity of Boards to lead organizations

PCI continues to assist NGO partners to strengthen their Boards however the challenges are numerous and vary from organization to organization. Generally, there is misunderstanding of the roles of Boards vs. management leading to important oversight and resource mobilization responsibilities falling through the cracks and in more serious cases leading to unnecessary feuds and illegal firings.

## **IV. MAJOR ACTIVITIES PLANNED FOR NEXT QUARTER**



**USAID**  
FROM THE AMERICAN PEOPLE

### **Technical Capacity Building**

- Develop and orient partners to a package of materials to assess families and provide appropriate integrated services accordingly. The package will include an assessment tool and an integrated service provision guideline.
- Collaborate with MOH- MASA pediatrics and Baylor to agree on a format for presentation of the pediatric ART adherence support curriculum and form a technical working group to oversee process to finalize curriculum.
- Discussions with Baylor and NGOs on strengthening/formation of teen support groups where appropriate.
- Training of NGO partners as TOTs in JOL and provide TA to implement district action plans
- Development and begin implementation of the FNLS strategy
- Technical assistance visits to NGO partners to follow up on issues discussed in quarter one as well as monitor progress of implementation of planned activities
- Enrollment of clients into the study under BAPL to start

### **Organizational Capacity Building**

- Follow up partners on progress with implementation of their capacity building plans and provide technical assistance where required
- In collaboration with AED, finalize the Governance and leadership guideline
- Continue to provide ongoing TA to select organizations to resolve Governance, management and other issues arising
- Assist partners who are now receiving funds from multiple sources to implement appropriate accounting & reporting systems

### **Key Stakeholders**

- Extend MOUs and finalize IPs and Budgets for BONASO and BONEPWA+, and assist them to implement
- Work with BONASO and NACA to move forward the development of the CSO strategy
- Work with DSS to move forward the development of the CCM