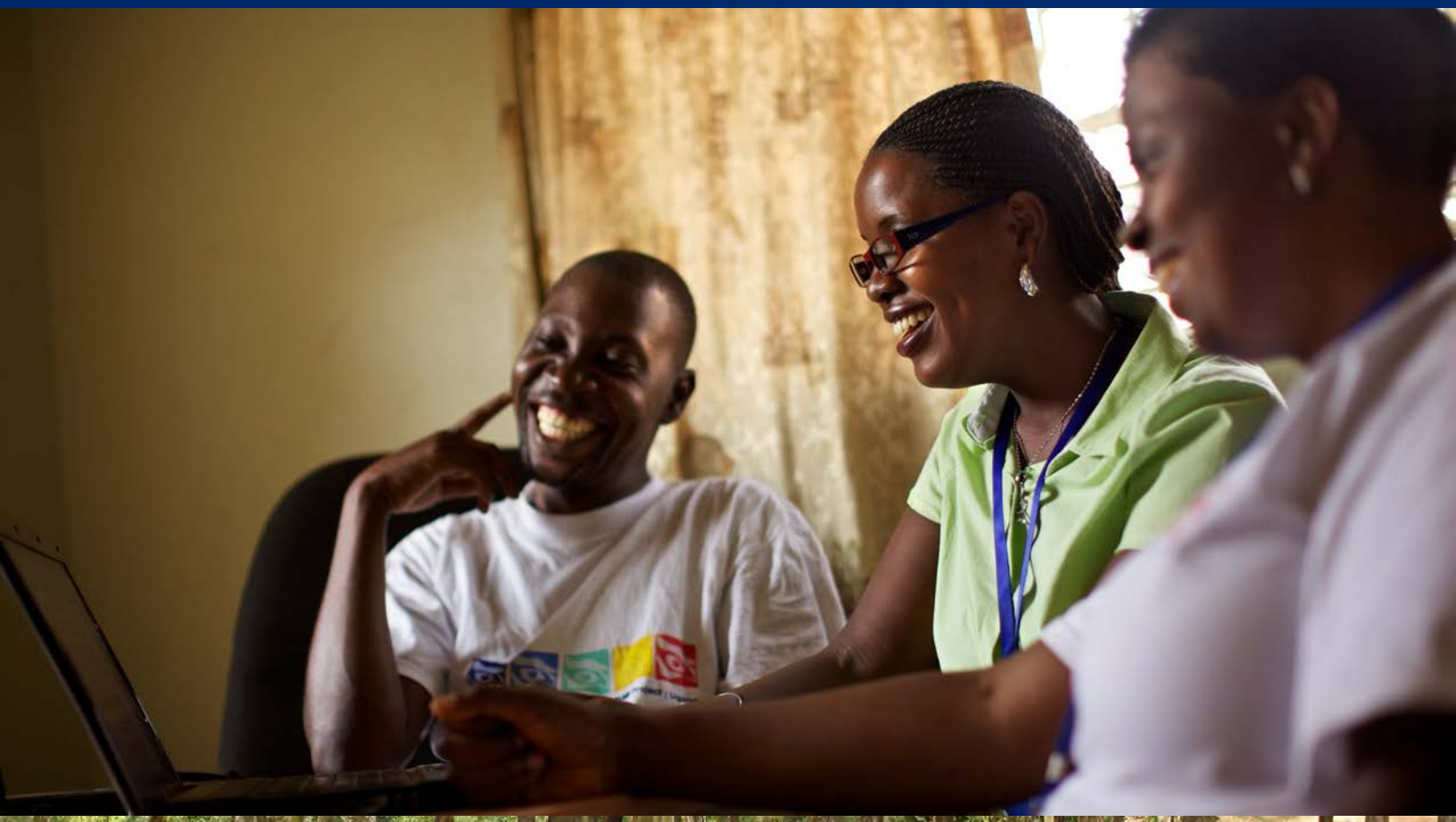
New Partners Technical Assistance Project (NuPITA)

Final Report: 2008-2012



© 2012, John Snow, Inc. The New Partners Initiative Technical Assistance Project (NuPITA) is funded by the United States Agency for International Development through Contract No: GHS-I-00-07-00002-00 and is implemented by John Snow, Inc. in collaboration with Initiatives Inc.

This document is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The contents are the responsibility of John Snow, Inc. and do not necessarily reflect the views of USAID or the United States Government.

Photos courtesy of Robin Hammond.

TABLE OF CONTENTS

Acronyms 4

Introduction 6

Background 7

NuPITA: Designed for Learning 9

The NuPITA Approach 12

Coordinating and Communicating with Stakeholders 22

Effect of Capacity Building on Service Delivery Results 27

NuPITA No-Cost Extension Period Activities 39

Lessons Learned for Future Capacity Building Partnerships 40

ACRONYMS

AED	Academy for Educational Development
AIDS	Acquired immunodeficiency syndrome
AMURT	Ananda Marga Universal Relief Team
ARC	American Refugee Committee International
BCC	Behavior change and communication
Camfed	The Campaign for Female Education
CBO	Community-based organization
CCPT	Child centered play therapy
CDC	Centers for Disease Control and Prevention
CERI	Children's Emergency Relief International
CLOCA	Close-out organizational capacity assessment
CPAK	The Christian Partnership on AIDS in Kenya
CSI	Child Status Index
DFID	Department for International Development
EAC	East African Community
ECD	Early childhood development
EUCORD	European Cooperative for Rural Development
EOP	End of project
FBO	Faith-based organization
FXB	Association Francois-Xavier Bagnoud
FHI 360	Family Health International
G.R.A.C.E.	Grassroots Alliance for Community Education
HCT	HIV counseling and testing
HHS	Department of Health and Human Services
HIV	Human immunodeficiency virus
HRM	Human resource management
HRSA	Health Resources and Services Administration
IGA	Income generating activity
ISP	Indigenous service partner
ICOBI	Integrated Community Based Initiatives
JSI	John Snow, Inc.

KNH	Kindernothilfe
LCD	Local capacity development
M&E	Monitoring and evaluation
MIS	Management information systems
MOU	Memorandum of understanding
NCE	No cost extension
NGO	Nongovernmental organization
NPI	New Partners Initiative
NuPITA	New Partners Initiative Technical Assistance Project
OCA	Organizational capacity assessment
OD	Organizational development
OGAC	Office of the Global AIDS Coordinator
OVC	Orphans and vulnerable children
PEPFAR	President's Emergency Plan for AIDS Relief
PMTCT	Prevention of mother-to-child transmission
QA and QI	Quality assurance and quality improvement
RATN	Regional AIDS Training Network
R2	Round two
R3	Round three
SJCC	St. John's Community Center
SLV	Structured learning visit
SOP	Standard operating procedure
SOTA	State of the art
STTA	Short-term technical assistance
TA	Technical assistance
TA-NPI	Technical Assistance to the New Partners Initiative Project
TCA	Technical Capacity Assessment
TFK	Tearfund Kenya
TFZ	Tearfund Zambia
TOCA	Technical and organizational capacity assessment
USG	United States Government
USAID	United States Agency for International Development

INTRODUCTION

The New Partners Initiative Technical Assistance Project (NuPITA) was funded by the United States Agency for International Development (USAID) and implemented by John Snow, Inc. (JSI) in collaboration with Initiatives Inc. The project was designed to provide technical assistance to 15 organizations in eight countries working in HIV and AIDS that received funding from USAID under the New Partners Initiative (NPI) of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR).

To support the 15 NPI selected organizations, the U.S. Agency for International Development (USAID) awarded a four-year contract (2008–2012) to John Snow, Inc. (JSI), assisted by Initiatives Inc. NuPITA strengthened the organizational, administrative, and technical capacity of 15 partner organizations providing HIV prevention and care services in Ethiopia, Kenya, Nigeria, Rwanda, South Africa, Tanzania, Uganda, and Zambia. In September 2012, JSI was awarded a no-cost-extension to continue activities through January 2013.

In support of NPI, NuPITA worked to increase the quality of program implementation and strengthen the institutional capacity of the NPI partners, supporting PEPFAR's objective to improve and expand HIV programming through community- and faith-based organizations (CBOs and FBOs). NuPITA focused on six tasks: 1) provide new partner orientation, 2) conduct needs assessment, 3) develop action plans, 4) provide technical assistance, 5) coordinate and communicate with stakeholders, and 6) support project close-out.

This final report describes ***what*** NuPITA did to build capacity of 15 organizations, both at their Africa-based field offices and at their headquarters; ***how*** NuPITA worked with the partners and the impact the capacity building had on mHIV and AIDS service delivery results in communities; and the **overall effect** these capacity building efforts have had on the partners' long-term institutional sustainability. In addition, the report outlines key lessons and suggestions for USAID as it seeks to involve more local organizations under its USAID Forward initiative.

BACKGROUND

The New Partners Initiative

On World AIDS Day 2005, President George Bush announced the New Partners Initiative (NPI) as a new component of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). The intent of this effort was to identify and work with new partners to increase their organizational and technical capacity and thereby ensure am increase in quality, access, and sustainability of HIV/AIDS programs. The initiative also aimed to build community ownership by developing the technical and organizational capacity of local partners to address HIV/AIDS and to promote the sustainability of host nations' efforts.[1]

GOAL's HIV and AIDS Program Manager, Mary Mittochi outside the GOAL field office in Pader, Uganda.

Between 2005-2008, the U.S. Government provided funding to new partners through two rounds of grant awards. On World AIDS Day 2008, The U.S. Government announced a third round of planned grant awards under the NPI, establishing additional new partnerships. The new partners received three-year grants and JSI was selected to provide technical assistance to these grantees.

[1] http://www.pepfar.gov/c19532.htm
[2] http://www.usaid.gov/results-and-data/progress-data/usaid-forward

PEPFAR recognized that many organizations had the capability to reach people who need HIV and AIDS services, but did not have experience working with the U.S. Government and its processes. Community and faith-based organizations were seen to be underutilized resources which had an ability to reach communities in desperate need of HIV and AIDS services.

USAID Forward

In 2010, five years after the commencement of NPI, USAID Forward was created to articulate and implement a reform agenda designed to spur innovation, reduce costs, and ultimately decrease the need for USAID development assistance over time.

USAID Forward reforms focus on three main areas:[2]

Building Local Sustainability and Partnerships: [USAID is] working with more local organizations in developing countries to improve their capacity, build new effective and long-term partnerships, and reduce the need for foreign aid over time. By building capacity, not dependence, increased partnership with the private sector, civil society, and foreign governments will spur investment and growth while improving transparency and accountability.

Fostering Innovation: Advances in science, technology, private sector activity, and academic research offer new paths to create development solutions that can accelerate progress at lower cost. [USAID is] leveraging the power of innovation to bring new ideas to market that will help the poorest people around the world grow past aid.

Strengthening Capacity to Deliver Results: From attracting and retaining talented Agency staff to creating new monitoring and evaluation systems and revitalizing our policy, financial, and technical expertise, [USAID is] strengthening [its] core capacity to achieve broader and deeper development results while reducing costs.

NuPITA NPI Partners

USAID/Washington selected NPI partners from over 800 applications. JSI was informed about who they would work with under NuPITA soon after the contract was awarded.

The Round 2 NPI partner organizations supported by NuPITA included:

- American Refugee Committee International (ARC) –Minneapolis, Minnesota, USA, working in Northern Uganda;
- Camfed USA Foundation (Camfed) – San Francisco, California, USA, working in Tanzania;
- Children's Emergency Relief International (CERI) – Kingwood, Texas, USA, working in South Africa;
- Integrated Community Based Initiatives (ICOBI) – Bushenyi District, Uganda;
- Tearfund – Teddington, United Kingdom, working in Kenya;
- Woord en Daad – Gorinchem, Netherlands, working in South Africa.

Round 3 partner organizations supported by NuPITA included:

- Ananda Marga Universal Relief Team (AMURT) – Rockville, Maryland, working in Kenya;
- European Cooperative for Rural Development (EUCORD) – Brussels, Belgium, working in Nigeria;
- Francois-Xavier Bagnoud International (FXB) – New York, New YorkUSA, working in Rwanda and Uganda;
- GOAL – Dublin, Ireland, working in Uganda;
- Grassroots Alliance for Community Education (GRACE) – working in Kenya;
- Kindernothilfe (KNH) – Duisburg, Germany, working in Kenya;
- Minnesota International Health Volunteers (MIHV) – Minneapolis, Minnesota USA and working in Uganda;
- RETRAK – Manchester, United Kingdom, working in Ethiopia and Uganda; and
- Tearfund – Teddington, United Kingdom, working in Zambia.

NuPITA: DESIGNED FOR LEARNING

Peter Senge defined a learning organization as a place which facilitates opportunities for its members to continuously learn and transform themselves.[3] Effective organizations require an interconnected way of thinking, both internally and externally. The NPI program provided opportunities for NuPITA staff to explore and challenge assumptions about how capacity building is done, do things differently, take some risks and build the team to deliver quality support to partners. Systems and management structures were designed to be responsive, flexible, and thoughtful. We modeled our operations to provide an example to NPI partners. We made mistakes, shared them, learned from them, and made adjustments.

Staff of Kindernothlife (KNH) and Saint John's Community Center (SJCC), organizations which NuPITA supported.

NuPITA Operations

NuPITA was managed and led from Africa where the partners were implementing their grants. The project director was based in Kampala, Uganda, for the first three years of the project, and then in Nairobi for the following two years. Being based in Africa allowed NuPITA to support NPI partner field offices efficiently.

By hiring qualified and experienced African professionals, NuPITA emphasized the value it placed on having a team of specialists who demonstrated a high level of indigenous expertise that helped NPI organizations develop through their participation in the program. NuPITA recognized that assisting these professionals to try new approaches, be innovative, and build relationships with the partners increased the pool of resources for future capacity building needs on the continent.

NuPITA field staff included organizational development specialists, HIV & AIDS specialists, a finance and administration manager, administrative, and support staff.

The deputy director served as a US-based senior manager who supported communication with US-based NPI partners as well as with USAID/ Washington and provided technical assistance to NPI partners. JSI and Initiatives also provided backstopping support and technical assistance to the field office team from their Boston-based headquarters offices and utilized other field-based staff to provide assistance as required. When round 3 grantees were added to the contract, a second deputy director was hired and supported NPI partners from the Uganda office.

NPI Advisors

Each NPI partner was provided with the option of an NPI Advisor to provide immediate, on-the-ground technical support and guidance within the NPI partner's office. The results of the organizational capacity assessment (OCA) were used to identify the priority areas which the partners had determined needed the most support. The profile and experience of advisors were determined after the results were

[3] Senge, PM. 1990. *The Fifth Discipline.* London: Century Business

discussed. NuPITA staff and NPI partners worked together to define the terms of reference for NPI Advisor candidates, draft adverts, and decide where to post positions, design the interview process, and interview together. NuPITA used this as an opportunity to build capacity and to learn more about how organizations generally recruited. The experienced informed the content of a human resources training held later in the first year of the project.

Caregiver Group meeting, Nyarweshama Parish Headquarters, Kibingo Town Council, operating under the auspices of NuPITA NPI Partner ICOBI.

Although many partner organizations waited to complete internal hiring processes before bringing on NPI Advisors, partner organizations eventually agreed that there were strategic benefits to be had from the services of an NPI Advisor. Once one partner took the lead in developing a job description for an NPI Advisor to work in its field office in Kenya and, others read about a concrete example in the NuPITA newsletter of how an Advisor could benefit an organization, other partner organizations started to identify their needs and accelerate plans to include the support of their own NPI Advisor. NuPITA developed and shared a strategy to effectively place the advisors and provide appropriate support to them.

JSI and Initiatives Collaboration

During the life of the project, JSI and sub-contractor Initiatives worked together successfully to deliver high quality project management and technical assistance. JSI was responsible for overall project management and finances and for the provision of technical assistance in the areas of USAID rules and regulations, auditing and financial guidelines, as well as HIV technical matters. Both JSI and Initiatives utilized resources from their respective organizations so that NPI partners could benefit from this experience.

JSI and Initiatives embraced the philosophy that an organization's strength is directly related to the quality of its management and systems. Strong management leads to better services, improved quality, more efficient staff, and ultimately healthier, more satisfied clients.

NuPITA staff understood that strengthening the ability of local organizations to manage both their programs and their own management systems requires partnership, collaboration, and trust. If an organization does not trust the group providing assistance, or believes that it is not working in their best interests, the organization will resist efforts to change and grow. NuPITA staff also knew that every interaction with a

partner was an opportunity to demonstrate and support a different way of 'doing business' and that NuPITA's focus was to work with the NPI partners to build their capacity to manage the HIV and AIDS services they provide to their communities.

In addition, the NuPITA project team worked in concert with a similar project funded by the U.S. Centers for Disease Control and Prevention (CDC) and the Health Resources Services Administration (HRSA), Technical Assistance to the New Partners Initiative (TA-NPI), which was also implemented by JSI and Initiatives Inc. TA-NPI provided technical support to CDC/HRSA-funded new partners under NPI. NuPITA also worked closely with AED and then FHI 360 which provided support to NPI round 1 and round 3 partners.

NuPITA Core Values

During NuPITA's initial staff retreat held immediately after the project launch in 2008, staff identified key values which would guide NuPITA's approach and work.

Values included:

Holistic

Maintaining organizational focus. NuPITA worked to assist organizations build systems not for one project or one are of intervention, but for the entire organization.

Respectful

Recognizing the organization's independence and autonomy. We started where organizations were and listened to where they wanted to be. We recognized that 'NuPITA and capacity building was not their project' – increasing access and quality of services to communities which needed them was their goal. We wanted to walk along side partners to determine how best to do that by recognizing their strengths and asking where they want to be as organizations and as development professionals.

Responsive

Maintaining a needs-based approach and responding to requests within 72 hours. This did not always mean we had an answer in 72 hours, but that we responded with a plan, action, or suggestion about how to proceed.

Focus on Quality

Promoting best practices through contextualized and customized technical assistance. NuPITA aimed to ensure that the quality of every input meets standards imposed by the project team itself.

Innovative

Encouraging organizations to utilize new approaches and methods. NuPITA would try new approaches and encourage organizations to take risks in operations, and recognized that improvement would often require a new way of delivering services or managing an organization.

Inclusive

Engaging partners, USAID, NuPITA, FHI 360, host governments, and sub-partners. NuPITA would recognize that we were all working for the same result of organizations: strong local capacity to work with communities to provide HIV and AIDS services.

THE NuPITA APPROACH

NuPITA staff members recognized that every institution has its own identity, history, processes, and organizational culture. Thus, while we provided some standardized tools and processes based on JSI's more than 30 years of experience, we also customized our approaches to meet specific organizational needs and fit partners' local culture and context.

To strengthen the impact of the NPI grantees on their communities, JSI uses a three-pronged approach—**to build individual skills, strengthen management systems, and improve program performance**. In the end our goal was to assist organizations to meet the needs of their clients for the long-term—that is, to become sustainable organizations in their own right.

NuPITA staff held that for capacity building to be effective with change that lasted beyond the NPI project, it had to be driven by the needs of the specific organizations, work within the specific contexts in which the organizations operate, and use a customized and facilitative learning approach.

Step One - Orient New Partners

JSI began its work with each partner by establishing relationships knowing that change cannot be sustained unless people are engaged in positive working relationships. Honest and respectful collaboration breeds trust, and when organizations feel that the ideas and concerns of its people are valued, success is that much more probable.

To begin that process, NuPITA began by learning as much as possible about each partner's program through a thorough review of their proposals, websites, and other materials. NuPITA also held an initial telephone conversation with each partner to hear from them about their program, questions about their grants, concerns about working with a TA provider, and their long-term plans.

Initial Telephone 'Meetings'

Prior to the telephone conversations, NuPITA staff drafted a proposed agenda and sent it to the partners. The calls set the tone for how NuPITA would work with partners – we wanted to listen, accurately record what was discussed, and respect the time limits for discussions which some partners expressed.

Some organizations raised concerns about how working on capacity building activities would take considerable time away from their program implementation. Many of the new partners felt that their systems met standards and that they did not need assistance from NuPITA in order to successfully manage their program. In fact, some of the organizations had been operating for 20 years or more and believed that they were in a position to offer capacity building to their sub-partners, and did not relish the idea of USAID and a US-based organization assessing their operations too closely. Call notes were taken and disseminated to all call participants.

NuPITA staff realized that a key initial task was to build trust and create demand for services. NuPITA staff understood that organizations would only participate if there was value in the services offered and respect for the considerable experience and accomplishments of the partners. The only contractual obligation each organization had vis-à-vis NuPITA was to participate in one organizational capacity assessment (OCA). Any assistance beyond that would, theoretically, be the decision of the organization.

The Project Launch

NuPITA had 2 project launches: One for round 2 partners held in 2008 in Dar es Salaam, and one in 2009 in Kampala for both AED and JSI round 3 partners.

The launches provided an opportunity for USAID and NuPITA to establish vital relationships with each NPI partner and disseminate essential information on NPI and USG compliance requirements. The meeting introduced key players from USAID/PEPFAR and NuPITA to representatives of each NPI partner organization and laid the ground work for a vital network of NPI partners to share information and provide peer-to-peer support. Participants included NPI partner representatives, USAID representatives from Washington, DC and the NPI partner country missions, and facilitators from NuPITA. A number of the NPI partners were able to bring representatives from their sub-grantee organizations to the launch.

The main objectives of the launches were to:

- Introduce the NPI USAID team and NuPITA staff in order to begin to develop a positive collaborative relationship;
- Provide NPI grantees an overview of the NPI program, with specific reference to USAID requirements and PEPFAR fund management, administration, and expected results;
- Discuss NuPITA's capacity building philosophy and the types of assistance to be offered;
- Outline the OCA process and develop a schedule for completing them with partners and USAID;
- Establish an implementation timeline, including start-up, reporting schedule, and disbursement of funds;
- Provide NPI partners with guidance and reference materials on best practices in project administration, financial management, sub-grant management, and various PEPFAR tools largely addressing indicators and Data Quality Assurance.

Member of ICOBI's Nyarweshama Tuhwerane Caregiver Group. Caregivers of OVC are involved in a group income generation project.

NuPITA used a variety of methods during the launches including inviting round 1 and round 2 NPI partners to discuss their experience with the new grantees.

The final activity of the launch was to meet with each partner to discuss the next steps needed to get their programs up and running. In some cases, partners received feedback from USAID regarding their workplans and how to improve on them in order to allow for the disbursement of funds. Other topics discussed included communication channels, exchange of key contacts, and a proposed calendar of activities.

As a result of the launch, NPI partners' interest in NuPITA's technical assistance support increased considerably. Partners realized that having systems able to meets USG rules and regulations standards would require assistance. While every effort was made to begin to build a collaborative working relationship, we knew that trust between and among NPI partners, NuPITA, and USAID would require time and on- going effort.

Step Two: Conduct Capacity Needs Assessments

Two assessment processes were implemented to help staff understand the strengths and challenges of their operations. The organizational capacity assessment (OCA) and the technical capacity assessment (TCA) provided an objective tool to measure current processes used in an organization, and ultimately help gauge their level of performance as a service provider.

A third assessment process, the close-out capacity assessment (CLOCA), provided a final means for partners to rank their relative level of capacity in the OCA domains and give them an opportunity to discuss their experiences under NPI and offer suggestions to USAID for future programming in capacity building.

Organizations self-scored and ranking changed over time. Some organizations initially scored themselves higher than facilitators thought reasonable; however in the second year those scores decreased as organizations realized that they now 'knew what they didn't know' and that NPI partners who had recognized the need to improve aspects of their organizations received valuable assistance which helped them to strengthen their operations.

GOAL Uganda Staff member making a point during that organization's Close-out Organizational Capacity Assessment.

Facilitate the Tools: OCA and TCA

The OCA and TCA process was guided by a team of qualified organizational development and technical specialists who addressed the particular needs of each organization, based on the findings of the pre-award survey and discussions with the partner.

The assessment process:

- Defined organizational and technical capacity standards. With specific attention to regulations and requirements of USAID and PEPFAR, the assessment process was guided by a framework that defines standards for organizational performance in strategic planning, management, supervision, monitoring & evaluation, human resources, financial management, reporting and documentation, sub grant management (where applicable), community involvement, and sustainability. The assessment also included similar standards assessments for technical areas in HIV and AIDS covered in this program.

- Ranked stages of organizational and technical capacity development. The development of an assessment framework elaborated developmental stages for the organizational capacity elements listed above, as well as other specific technical needs. Stages were ranked from one to four, indicating low capacity to high capacity standards, respectively. Further, compiled organizational and technical capacity scores were calculated for each organization, assisting the project team to identify the organizations with the greatest organizational development and technical assistance needs.

- Documented progress in implementation plans and targets. In addition to evaluating organizational and technical stages, the framework included a section in which organizations documented the realization of action plans and progress.

- Fostered participatory capacity development. The process was carried out by the in-country partner focal groups and representatives of the NPI partner. Eventually, monthly partner update meetings took place with a group of four NuPITA staff (organizational development specialist, monitoring & evaluation specialist, compliance specialist, and HIV & AIDS specialist) to review action plans and NuPITA support. NuPITA staff called or met with NPI partners to discuss progress against the plans, identify challenges, action completed, new actions undertaken as a result of trainings or other TA, and other relevant activities. In practice, because of competing priorities to provide on -site technical assistance with partners, planning and delivery of specific trainings and follow-up activities and facilitation of technical capacity assessments and other tasks, these meetings were not held as consistently as envisioned. Despite this, staff did maintain updated action plans through other means, as NuPITA recognized that follow-of these plans was crucial for organizational change and responsive technical assistance.

OCA

The underlying philosophy of the OCA is that organizations are organic and needs change over time as organizations mature. The objectives of the OCA process and follow-up were to ensure that at the end of three years: 1) organizations have improved the quality of their management and program implementation; 2) organizations have a tool which they understand and can reapply to periodically assess their progress to promote continuous planned improvement for change; 3) organizations have a tool with which they can systematically work with their sub-partners for improved managerial and technical systems; and 4) the changes over time of each organization's capacity can be confirmed by analyzing scores against agreed standards.

The OCA framework and tools were based initially on those developed by our sub-contractor Initiatives Inc. for small indigenous organizations. NuPITA customized the tools for the specific requirements of the NPI program in May and June 2008. The adaptation included USAID rules and regulations and integration of sections to directly address program performance management and program management. An orientation to the tools and process was conducted in early June 2008, at JSI headquarters in Boston. This orientation enabled the staff to become familiar with the tools and process, and to finalize the OCA schedule and staffing responsibilities. The OCA tools were field-tested during the first OCA, which at Camfed's headquarters in Cambridge, England, in June 2008. Refinements

were subsequently made to the tools, including the development of checklists for many OCA sections, the creation of a guidance and checklist for the team leader, and creation of a reporting framework.

For both round 2 and 3 partners, the baseline OCA focused on general organizational development principles from a management perspective. Domains included governance, administration, human resources management, financial management, organizational management, program management, and project performance management. With specific attention to USAID compliance, the assessment process was guided by a framework that defines standards for organizational performance in strategic planning, management, supervision, monitoring & evaluation, human resources, financial management, reporting and documentation, sub grant management (where applicable), community involvement, and sustainability. This three-day, intensive process resulted in an action plan which the organizations committed themselves to fulfilling.

As discussed and agreed upon during the action planning component of the OCAs process, NuPITA provided partners a number of performance improvement options. Periodic monitoring of the action items with the partners ensured that they were able to address many of the areas identified for improvement.

TCA

During the second year, the NuPITA team focused on technical capacity, combining the OCA with a technical assessment. The technical capacity assessment (TCA) tools provide standardized criteria by which an organization could review its technical capacity to implement quality programs in five HIV & AIDS services areas: Orphans and vulnerable children, counseling and testing, prevention of mother-to-child transmission, care and support, and prevention.

Like the OCA, the TCA is an interactive process, bringing staff together to discuss program strengths and learn where technical support and training could best address gaps. Discussions became opportunities to identify the best ways to support and build program capacity. NuPITA facilitators guided the process, which again culminated in action plans that provided a road map for the organization's next steps.

Many organizations have reported that they continue to use the tool, without NuPITA facilitation, a crucial step to create buy-in among the staff and encourage continued ownership of the process.

Organizations were encouraged to link to national guidelines and national coordinating committees to ensure their programs were up-to -date with changes in protocols. The TCA set the standards for program strategies, service delivery, community involvement, referrals, training, and monitoring for each HIV service.

Sustainability and Scale-Up of Assessments

Many partners adapted the OCA and TCA tools for use with their sub-partners and other countries in which they had programs. As one partner explained, in requesting NuPITA's permission to utilize the tools with their sub-partners, "This is capacity building at its best . . . What is key for us at this stage is to plow back and build others as it has been done unto us." Feedback through NuPITA's 2010 client satisfaction survey further indicated that both the OCA and the TCA were cited as valuable in helping partners diagnose and prioritize areas of improvement. Figure 1 shows overall, self reported progress as determined by the scores during the successive needs assessment processes from 2008 to 2011.

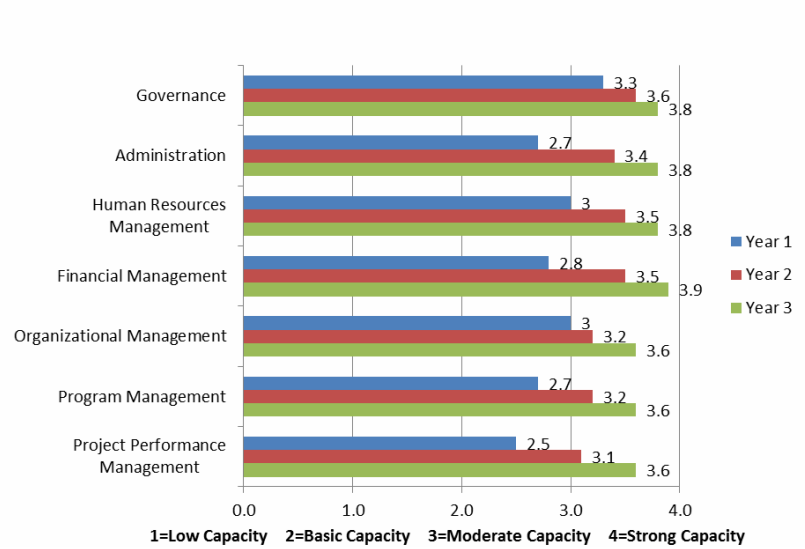
Step 3: Organizational and Technical Program Support

In response to the findings of the OCAs and TCAs, all partners received customized support in building their systems and creating prevention interventions based on local context as well as scientific evidence.

Organizational Capacity Support

Support needs varied among partners both in terms of content and scale. However, financial systems, monitoring, and evaluation processes were areas of need for all partners.

Figure 1: Comparison of Year 1, Year 2, Year 3 Capacity Scores



Technical Capacity Support

Technical support was provided to develop HIV prevention messages, tools, and skills to reduce HIV risk and also to improve communication to reinforce practice of key preventive behaviors. Interventions followed strategic behavior change communication (BCC) and USAID's prevention guidelines.

As a cross-cutting element for all partners that were supported in HIV prevention, prevention of mother-to-child transmission (PMTCT), confidential HIV counseling and testing (HCT), orphans and vulnerable children, and care and support, technical assistance focused on:

- Development of standard operating procedures;
- Verification that service delivery was carried out in compliance with existing national guidelines and standards;
- Improvement in the quality of services offered;
- Strengthened support supervision to make it more structured and documented;
- Strengthened referral systems through use of referral directories and other essential elements of networked services (referral slip/ form, network coordination and feedback on referred clients); and
- Training in knowledge and skills needed for better service delivery. Different forms of training used included group trainings, individual trainings, and on-site mentoring and support using short-term experts and resident NPI Advisors.

Prevention of Mother-to-Child Transmission of HIV (PMTCT)

The NuPITA project supported most of the NPI partners to develop initiatives that generate demand for and increase utilization of services, including greater support for pregnant women living with HIV. Technical support was provided to develop and expand context-appropriate, high-quality PMTCT services.

Table 1: Overview of NuPITA-Implemented Assessment Tools

Tool	Frequency	Brief Description	Value/Positives	Limitations	Suggestions for other organizations using the tools
OCA	Done in both headquarters and African field offices in all organizations three times.	Addresses seven domains in organizational development.	Self–assessments and time staff take to discuss and review their practices and assumptions.	Self-assessments and sometimes facilitators may not agree with scores, especially in year 1.	Allow time for organizations to reflect on the discussions by reviewing the notes/ rationale sheets and proposed actions.
TCA	For most organizations TCAs were conducted in year 2 only. They had not been developed until the second year of NuPITA and time did not allow for a second assessment in year 3.		Provides an opportunity for in-depth discussions around practice and an opportunity for organizations considering a new program area to understand what may be required in order to	Same as OCA. Tools have most up -to-date standard operating procedures guidance, but this guidance can change relatively frequently.	Urge organizations to acquire their countries' standard operating procedures for each of the program areas before the TCA begins. Include monitoring & evaluation staff in all sessions.
CLOCA	Final assessment, only the management sections were assessed.	End of the NPI project.	Provided an opportunity to discuss the NPI program and receive constructive feedback from the partners; learning opportunity for both USAID and NuPITA.	Some organizations felt that the CLOCA was not necessary and came too soon after the year 2 OCA.	The CLOCA was most important for the donor to be able to discern change and report on it.

Confidential HIV Counseling and Testing (HCT)

Partners were supported to tailor HCT services to individual, family, and community needs, with linkages to treatment and support services. Emphasis was placed on strategies to increase the number of people who know their HIV status, and to facilitate linkages to appropriate prevention, treatment and care services.

Orphans and Vulnerable Children

Technical support was provided to expand the scope of services offered. NPI partners who served orphans and vulnerable children were assisted to design and implement activities that strengthened life skills, improved livelihoods, and addressed stigma, discrimination, and other forms of marginalization.

Care and Support

NuPITA supported NPI partners to strengthen interventions that addressed health and well-being and ensured equitable access and involvement of people living with HIV and AIDS (PLWHA). These activities reflected the approaches in national palliative care strategies.

Mechanisms of Delivering TA Support to Partners

Through a detailed menu of technical assistance mechanisms, NuPITA reached each partner with the appropriate blend of support, including opportunities for training, coaching and practicing, peer exchange, and targeted technical assistance.

In all cases, partners and NuPITA worked together to draft the scope of work for which support was provided and to ensure that it was carried out to the satisfaction of the partner and resulted in its intended outcome.

Group Training

Over the course of the program, NuPITA offered more than 40 trainings with topics addressing areas of need from start-up to close-out. Typically two to three representatives from each partner attended and, when possible, sub-partner representatives attended as well. The training modules are available on JSI's website.

Modules and Individualized Training Activities

NuPITA designed training modules to allow for specific, focused support to organizations. While group trainings provided an opportunity for 2-3 staff people to participate, modules allowed for all staff to attend and contribute. These facilitated modules also allowed a time for NuPITA staff to discuss the use of modules with sub- partners or in the future as refresher courses.

NuPITA Technical Assistance Activities Included:

- **Group & Organization-Specific Training**
- **Remote TA**
- **On-site Coaching & TA**
- **NPI Advisors**
- **Networking**
- **State-of-the-Art Meetings**
- **Pre-Audit & Pre-Evaluation Reviews**
- **Peer Learning**
- **Executive Leadership Seminars**
- **Structured Learning Visits**

The most popular modules were resource mobilization, team building, and governance. NuPITA staff were able to modify content to the specific needs of each partner.

As in all technical assistance activities, NuPITA strove to introduce a variety of participatory, interactive methods which highlighted peer learning and sharing of experiences. Panel discussions by teams of 'experts' were frequently employed, where the notion of "experts" often extended to participants or the members of the communities in which they worked. During one event, a group of children in Kenya spoke about their experiences and support needs as they lived and went to school in one of Nairobi's largest slums. NuPITA viewed each training as an opportunity to not only build capacity in the particular training topic, but also as an opportunity for partners to develop and facilitate a training in new ways.

NPI Advisors

As cited above, NPI Advisors were JSI staff seconded to organizations that requested them. Partners considered NPI Advisors one of the more innovative ways that NuPITA provided technical assistance. Partners requested NPI Advisors to address more long-term capacity building needs, and Advisors were recognized professionals in their areas of expertise. NPI Advisors were not consultants but were considered an extension of the partners' staff.

The recruiting, development of scopes of work, and supervision of the NPI Advisors was jointly carried out by the NPI partner and NuPITA staff.

Structured Learning Visits

NuPITA began to offer structured learning visits in year 3. These visits allowed partners to benefit from the good practices and experience of other organizations in the region. Structured learning visits usually took place over three days. Hosts were identified based upon technical relevance, quality of programming, potential for positive impact on the partner's work, and feasibility. Most of the visits had a technical focus.

Young peer educator working with NuPITA NPI Partner, G.R.A.C.E., Kenya.

International Conferences and Networking

A crucial aspect of sustainability for NPI partners was becoming sufficiently integrated into the national and international community of practitioners of HIV service organizations. Gaining a "seat at the table" is a means of increasing their influence and sharing their experience. In facilitating this process, NuPITA strove to help partners to understand who the major players are within their own countries, introduce them to other organizations and government staff active in relevant areas, and help them participate in national and international conferences and meetings to talk about their work, share lessons learned, and carry out strategic networking.

Close-Out Support

NuPITA approached all support—trainings, technical assistance through project staff and advisors, documentation of success stories—through a close-out lens. From the very beginning of the project, NuPITA raised the issue of close-out with partners so that organizations would plan for it throughout project life cycle. As the project progressed, close-out guidance was integrated into technical assistance support as part of group trainings on sub-grant management and compliance, discussed during OCAs/TOCAs/CLOCAs, and during on-site visits.

NuPITA emphasized both institutional and programmatic issues related to close-out. The need for institutional sustainability beyond the life of the NPI cooperative agreement was emphasized in activities including resource mobilization workshops, strategic planning assistance, facilitation of networking opportunities, and support for governance strengthening initiatives. As the end of the partners' cooperative agreements drew closer, NuPITA staff assisted partners with tasks associated with closing down a cooperative

agreement by reviewing draft property disposition requests, providing assistance with pre-audit preparation, providing final evaluation readiness services, and advising on beneficiary transition to other programs.

In addition, a close-out training was offered to all partners. Trainings were held six months before the end of the partners' cooperative agreements. These trainings focused on the USAID regulations related to close-out, and reviewed programmatic considerations such as the final evaluation, transfer of services for beneficiaries, and report writing. Representatives of other cooperating agencies were invited to share their experiences with project close-out, and participants developed a timeline of activities for their project.

Finally, a formal close-out capacity assessment (CLOCA) was provided to each partner. Close-out assessments followed the same format as the OCA, with the inclusion of a series of qualitative questions for partners on their internal lessons learned from NPI and soliciting recommendations for USAID for future capacity building initiatives. Action plans were developed during the CLOCAs, and partners were encouraged to continue to seek opportunities for organizational learning and development beyond the life of their NPI cooperative agreements.

Retrak, which implemented an NPI cooperative agreement in Ethiopia and Uganda, decided after the first year of their project to deploy two NPI Advisors, one in each country. The country offices had different needs, so the Advisors had different scopes of work. In Retrak Uganda, an orphans and vulnerable children advisor helped Retrak develop and deliver training curricula to staff on child protection, drama skills, and positive parenting. In addition, the Advisor worked with Retrak to develop quality standards and community involvement guidelines. Retrak Ethiopia had slightly different needs, requesting an NPI Advisor for orphans and vulnerable children and psychosocial care.

The Advisor in Addis worked to develop and facilitate training for staff there on child development and play therapy, while also helping to ensure that Retrak's services for orphans and vulnerable children were incompliance with PEPFAR and national guidance. The experiences of Retrak in Uganda and Ethiopia were very positive, and both requested extensions of more than one year (over the original one-year contract) for their NPI Advisors. As Retrak Uganda's Deputy Director, Dinah Mesigwye, recalled, "We really opened ourselves up to the experience of working with an advisor. And I'm glad we did. Without our advisor it would have taken us much, much longer to accomplish what we have in just . . . two years."

COORDINATING AND COMMUNICATING WITH STAKEHOLDERS

One of NuPITA's management values, established during the initial start-up phase with our staff, was "boundarylessness", which refers to having "accessible and approachable staff, regardless of rank or job description," who actively work to "promote dialogue and collaboration and the belief that good ideas can come from anywhere." NuPITA has fulfilled this value through the efforts of all its staff from the project's inception through its close-out to the benefit of its partners, USAID and the larger community of capacity builders and HIV service delivery organizations. This has been done with the conviction that only by sharing knowledge, experience, and contacts among our partners and other stakeholders can continuous learning take place, thus raising the bar for all organizations involved in working to improve the conditions of those living with or affected by HIV and AIDS.

NuPITA's stakeholders were numerous, including most importantly our 15 NPI partners, USAID/ Washington, the Office of the Global AIDS Coordinator (OGAC), the USAID Missions in the eight countries in East and Southern Africa where our partners carried out implementation, FHI 360 (formerly AED) and JSI's TA-NPI Project, the other two entities implementing capacity building projects under NPI along with the group of other NPI grantees they were associated with, the CDC and HRSA, and other relevant development programs working in Africa.

NPI Partners Receiving Direct Technical Assistance Under NuPITA

In the early stages of the project, regular communication with partner organizations played a vital role in establishing trust, leading to the realization among partner organizations that NuPITA staff were committed to understanding and meeting each organization's needs and ensuring successful execution of each technical assistance action plan as well as responding promptly to ad hoc requests.

Display from training, "Financial Management for Non-Finance Managers" held in Nairobi, Kenya in September 2011 for NuPITA partners.

NuPITA worked with most partners to place short-term consultants or longer-term advisors to meet individual technical assistance needs in a concentrated manner. In addition, for partners who did not have an NPI Advisor, the NuPITA team appointed one of the Kampala-based or Nairobi-based staff members to act as the point person for the organization. Typically, this person would be carbon copied on email and ticketing correspondence with the partner organization, maintaining regular contact with the organization, and providing NuPITA and its relevant stakeholders with weekly updates on the partner.

NuPITA distributed periodic newsletters announcing new staff and detailing important upcoming events. Social events such as coffee breaks and networking receptions were built into training activities in order to promote networking among partners and to help build relationships. NuPITA also encouraged partner exchange of information; if one partner had a particularly successful tool or experience, NuPITA would actively connect them with others facing similar needs so they could learn from one another and strengthen their relationships.

NuPITA NPI Partner AMURT's peer educators.

This also happened with organizations that worked outside the orbit of the NuPITA partner organizations, extending to the TA-NPI and AED/ FHI 360 partners as well. These efforts have paid off to the benefit of these organizations by widening their sphere of communication and collaboration.

An example which is still thriving today is the so called "Group of Five" that includes NuPITA partners AMURT Kenya, GRACE Africa, SJCC, and TA-NPI partners Matibabu and NOPE, which formed a coalition for support, especially in local resource mobilization efforts. They hold monthly meetings for peer support and often invited NuPITA to attend and give input on relevant trends and developments in HIV and AIDS as well as the local resource mobilization environment in Kenya and beyond that are relevant to them. In 2011, the coalition identified an request for assistance (RFA) from the European Union (EU) and worked to submit a proposal as a team, building on their experience as NPI grantees, which was ultimately approved for funding. NuPITA provided technical assistance to help the group develop and implement a systematic process to coordinate with one another and develop the concept note for this proposal.

NuPITA did not participate in the actual writing of the concept paper, but rather provided a space for the group to meet, served as an occasional sounding board on how they can better coordinate and package their NPI experience in a way that offers them an added advantage in their bid, and provided them with various tools from the NuPITA resource mobilization module useful in applying a strategic approach to this proposal writing concept such as the proposal writing coordinator's template, checklists for proposal writing, things to consider as a sub/prime in proposal writing, and other issues.

USAID

Early in the project, NuPITA developed a communications strategy with the support of USAID. A central principle for of the NuPITA communication strategy was to engage USAID at

NuPITA NPI Partner SJCC beneficiaries engaging in handicraft making as part of an income generation activity.

every step and ensure that USAID was fully informed of NuPITA's activities and, in particular, support to NPI partners. Weekly teleconferences were held from the project's beginning stages through early 2011, when they were changed to bi-weekly teleconferences. These served to update USAID/Washington on relevant technical assistance activities undertaken with partners and administrative and management issues related to project management. In preparation for these calls, written "partner updates" were produced by NuPITA which summarized progress, challenges, and accomplishments of each partner. These were disseminated each week prior to calls and notes describing the discussions/actions agreed during the calls were recorded and again disseminated. In addition, quarterly meetings were held with USAID/Washington and were attended by the Project Director and/or Deputy Director.

NuPITA and its larger mechanism of NPI were cutting-edge capacity building programs, and important antecedents to the initiatives taking place as part of USAID Forward today. Accordingly, NuPITA staff worked diligently throughout the project to ensure that the innovations and important lessons learned in capacity building were properly disseminated to USAID and other agencies overseeing NPI. An important example of this information-sharing is a March 2011 meeting with OGAC to discuss lessons learned under NPI. NuPITA participated along with TA-NPI and AED, and the three different projects participating together provided an excellent opportunity to not only discuss lessons learned, but to describe the nuanced differences among our respective implementation approaches. NuPITA and FHI 360 were able to follow up on this with a presentation in September 2011 at the USAID Mini-University on our experiences in capacity building. In the latter stages of the project, NuPITAalso responded to requests from the USAID Forward team as they gathered lessons learned in local capacity building.

NuPITA also established relationships with USAID missions in its NPI implementing countries to strengthen information flow on NPI partner progress and to ensure appropriate networking. An important example of this is the workshop NuPITA organized in October 2009 for its Uganda-based NPI partners and appropriate staff. The purpose was to promote a better understanding of NPI partner activities in Uganda, facilitate improved networking among those six partner organizations, and improve their understanding of USAID/Uganda's expectations of NPI partners.

CDC/HRSA

NuPITA coordinated with CDC and HRSA, the other funding agencies for NPI, when delivering NPI-wide activities such as the two launches (for round 2 and round 3 partners), the two state of the art (SOTA) workshops in 2010 and 2011, and the end of project meetings held in 2012. NuPITA participated on planning committees with CDC and HRSA representatives and worked very closely with them (as well as USAID) in the overall design and management of these activities.

TA-NPI and FHI360

From the beginning of the project, NuPITA worked to an extraordinary degree to put the needs of all NPI partners first, which necessitated establishing close communication and collaborative relationships with the other two technical assistance providers. TA-NPI and NuPITA shared the main project office in Kampala along with cost sharing many of the support staff positions. The TA-NPI Project Director and senior management team for NuPITA frequently met to discuss upcoming trainings, share capacity building tools and strategies, and work to extend opportunities each other's partners.

Because JSI and Initiatives implemented both the NuPITA and TA-NPI projects, extensive coordination and communication between the staff of these two projects was essential. The two projects shared training curricula, resource materials, and strategies for effectively meeting partners' needs. Both home and project office staff members communicated with each other daily and worked together to maximize the outputs and where feasible, streamlined the inputs for NuPITA.

Similarly, NuPITA collaborated closely with AED/ FHI 360, which worked with NPI partners from all three rounds. This close collaboration facilitated the sharing of best practices and technical resources and ensured that the potential synergies were fully leveraged. NuPITA contributed to FHI's efforts to develop a website to consolidate NPI technical assistance resources and provided technical review and editorial support on all of "NPI-Connect" topic briefings written by AED and FHI 360. NuPITA took the lead on eight NPI Connect topic briefings (VAT reporting, SF 270, shared project allocation costs, OCA, human resources, performance appraisals, supportive supervision, and volunteer management) which were shared with all partners.

NuPITA also worked with TA-NPI and AED/FHI 360 in planning and delivering the two launches for rounds 2 and 3 (held in June 2008 and February 2009 in Tanzania and Uganda, respectively). These early successes helped establish communication norms and relationships which were instrumental in the success of the two SOTAs held in 2009 and 2010 in South Africa. Whenever possible, NuPITA worked to include FHI 360 partners in training activities as well as link NuPITA's partners to AED/ FHI360 trainings (such as resource mobilization), which not only benefited them technically but in terms of enhancing their networking with other NPI partner organizations.

> ***How we do capacity building is at least as important, if not more so, than what we do.***
>
> -Barbara Durr, Project Director, NUPITA as part of her presentation on 'Capacity Building and Ubuntu: The NuPITA Experience' RATN Summit

Other Stakeholders

NuPITA was continually on the lookout for opportunities for our partners to benefit from the wider community of implementing organizations and improve their programming. The existing network of other USAID partners and programs provided fertile ground for this. NuPITA would routinely send out email announcements to our partners alerting them of opportunities for coordination, learning, or development, and support their participation as far as possible. A specific example was supporting two partners (ICOBI and Retrak Ethiopia) in 2010 to attend a training on the Child Status

Index delivered by MEASURE Evaluation. NuPITA also supported the participation of a number of partners at various conferences over the course of the project, including an orphans and vulnerable children conference in Nairobi in 2010, the PEPFAR meeting in Namibia in 2009, and others.

In 2012, NuPITA collaborated with AIDSTAR-One, another USAID-funded project, so that five African Palliative Care Association (APCA) programme staff could attend a NuPITA sponsored finance for non- finance managers training facilitated by Mango, a UK-based NGO specializing in financial management capacity building. In addition, as a matter of course, AED/FHI360 and TA-NPI partners were invited and included in NuPITA supported activities.

NPI Advisor Kennedy Onjuku (right) and AMURT Staff Member Emmanuel Kithi.

A final example of looking outside our immediate sphere for learning, sharing, and networking opportunities for the benefit of our partners and the wider capacity building community was NuPITA's participation as one of the organizers of the Regional AIDS Training Network (RATN) HIV Capacity Building Summit held in Nairobi, Kenya in March 2011.

The Summit was an initiative of the Regional AIDS Training Network (RATN), which received initial funding from the Swedish International Development Agency to carry it out. Nearly 250 participants from 19 countries attended the event. NuPITA, with USAID's encouragement, was able to support the conference through membership on the organizing committee, providing consultants to manage the event logistics and serve as rapporteurs, and by hosting preparatory meetings for the skills building session presenters. Five NuPITA partners and eight NuPITA staff presented in plenary, oral, poster, and skills building sessions.

In mid-2012 and with USAID approval, NuPITA worked with RATN to plan and support a follow-up meeting that reviewed progress on the action plans from the first HIV Capacity Building Partners Summit.

EFFECT OF CAPACITY BUILDING ON SERVICE DELIVERY RESULTS

External Final Evaluation

In May 2012, NuPITA commissioned an external final evaluation. While not all NPI partners were interviewed, the cross sections of organizations is representative of the organizations with which NuPITA worked.

The project goal was to increase the quality of program implementation and to strengthen the institutional capacity of NPI partners. The project objective was to have all supported NPI partners achieve at least 90 percent of their implementation plans and PEPFAR targets, and to be able to clearly document changes and the actions taken to achieve organizational capacity improvements.

In order to determine the effect of NuPITA's capacity building on the HIV service delivery results of the partner organization, the evaluation team assessed:

The extent to which the NuPITA partners have changed their HIV service delivery approaches over the life of the project, and the effect it has had on their service delivery results; and
The extent to which the changes in the NuPITA partners' service delivery approaches have been influenced by the capacity building inputs provided by NuPITA.

The extent to which the NuPITA partners have changed their service delivery approaches was assessed through the following indicators:

- Major gaps identified during the TCAs and key inputs offered to address identified gaps;

> ***Our [country program] has been transformed from a traditionally managed organization to a modern one, thanks to NuPITA support… We never dreamt we could get [EU funding]. We are competing with very big international organizations and…are being grouped with these giants now…We built these systems through NuPITA, which has taken us several levels up. We are poised to become an international giant.***
>
> *— Key informant interview respondent, Kenya*

- Institutionalization of internationally recognized standards and procedures;
- Changes in the quality of support supervision;
- Use of program data to monitor service outcomes and inform management decisions;
- Changes in the functionality of referral systems/linkages;
- Use of the Child Status Index;
- Changes in scope and approach in service delivery; and
- Changes in number of beneficiaries reached.

Building Stronger Organizations through NuPITA Support

During the partner satisfaction survey and the evaluation, most sampled NPI partners reported the following capacity building inputs as the most useful and beneficial to the success of their projects:

Specific Trainings

Most of the sampled NPI partners reported that NuPITA trainings greatly enhanced their knowledge and skills and helped in building overall organizational capacity. The trainings also helped to strengthen the organizational capacity for resource mobilization and compliance with USAID and PEPFAR regulations and reporting requirements. They also allowed partners to share experiences.
AMURT reported that the NuPITA trainings have assisted them to upgrade the quality of the organizational human resources, financial, and monitoring & evaluation systems, and in networking with other organizations to learn about their management and programmatic practices.

> ***I can tell you that we are a totally new organization now [because of NuPITA support]. We adopted better approaches in service delivery (especially in behavior change communication), expanded geographical scope from two to six South African municipalities and also expanded target groups to also include [populations at risk]. As if that is not enough, some of our services are reaching people with disabilities.***
>
> *— Key informant interview respondent, South Africa*

OCA/TCA/CLOCAs

All partners noted that the OCAs, TCAs, and CLOCAs were key in advancing their organizational growth. They provided structure and a roadmap towards identification of needs and capacity improvement. All sampled partners were able to report steady improvements in their projects after implementing activities to address the identified gaps. Those with sub-partners were able to support them to address their capacity problems in a more systematic manner.

On-site Technical Advisors

All NPI partners reported that the on-site technical advisors helped in supporting them to address partner specific problems, improve monitoring & evaluation systems, improve training and facilitation methods, and provide monitoring & evaluation visits and assessments. All partners with NPI Advisors reported that they were excellent technical references who provided invaluable customized support to project monitoring & evaluation, documentation, compliance, human resources, and resource mobilization.

Increasing the Reach of Partner Programs

The final evaluation showed that all sampled NPI partners had a positive change for all the PEPFAR indicators. There was a significant increase in the number of beneficiaries reached with key services. Overall, the total number of primary beneficiaries reached for all nine sampled partners was 305,884 (compared to a target of 227,857) with a variance of 34%. Figure 2 shows that, as a whole, the sampled NPI partners who were provided with technical assistance by NuPITA exceeded their targets with variances ranging from 13-82%.

Another critical area for sustaining activities is the availability of adequately trained human resources, who are vital for maintaining the intended intervention at the required level of service quality. Five of the eight sampled organizations retained their core staff at the end of the NPI project, while one had to lay off the field staff but was able to keep its managerial staff. Remarkably, four of the responding organizations reported having hired new staff, and another was planning to do so if funds allowed. In the case of Mfesane and AMURT, among the newly staff hired were the NPI Advisors earlier deployed by

NuPITA within their technical assistance package. The opportunity to participate in NuPITA-organized training activities was reported as a contributing factor to staff motivation and ultimately to their retention. Skills gained during these trainings also played a role not just in developing staff careers but also in the overall quality of the services rendered.

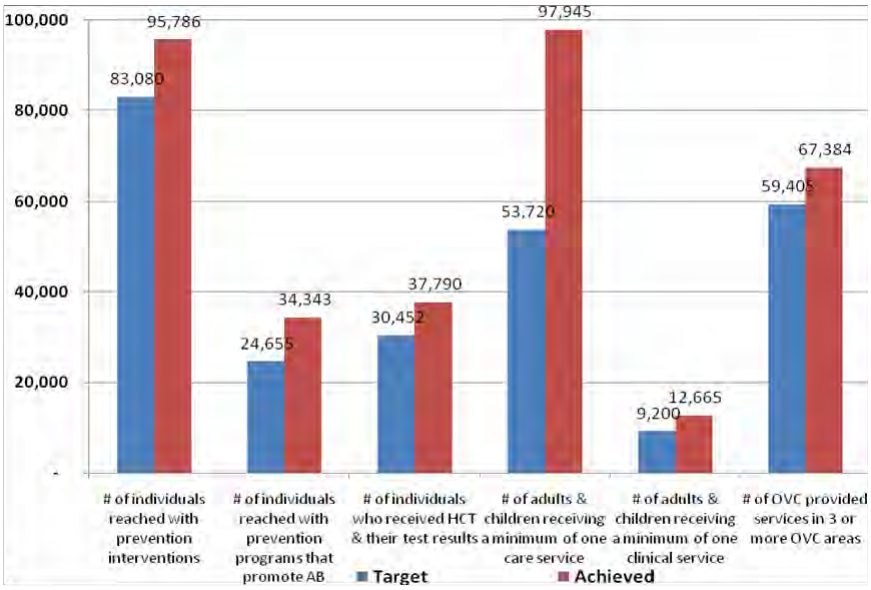
Some of the relevant inputs that partners have received from NuPITA to enhance institutional sustainability include individual and group trainings on cost share, documentation, leadership, resource mobilization, financial sustainability, and strategic planning.

Support was tailor-made to improve on our weaknesses; they didn't say 'you have to do it this way.'

Specifically, the two-day training on essentials of financial sustainability dealt with those financial issues that affect organizations' abilities to achieve their missions and objectives. The workshop on resource mobilization – attended by seven of the nine NPI organizations sampled for this evaluation – focused on donor assessment, donor expectations, strategic networking, and resource mobilization systems. The training included practical sessions on donor funding searches and how to conduct face-to-face interactions with potential donors.

Nearly all project trainings took place between 2009 and mid 2012. Most accounts from the respondents indicated these training opportunities were useful, enriching, and specific to the topics they intended to cover. However, the timing of specific trainings was mentioned by a number of them as a constraint. In particular, a number of respondents felt the training on resource mobilization should have been scheduled much earlier in the course of the project for its obvious repercussions on the partners' ability to prepare for their own sustainability. A different criticism of the NuPITA support for resource mobilization was raised by another respondent, who would have preferred more direct, agency-specific links with funding agencies and alerts in case of any request for application released by USAID and other important donors; an approach, in the words of this respondent, of, "There is this funding opportunity and you are well placed to access it. Here are your gaps; let's fix those." (Although resource mobilization may seem to take on disproportionate weight as the NuPITA project was closing, a number of partners also requested accelerated attention to the topic and agency-specific support for donor approaches during the mid-project client satisfaction survey; requests that became a key recommendation of the evaluators.)

Figure 2: Comparison of Targets and Results for PEPFAR Indicators



Specific criticism of timing and the approach to resource mobilization aside, all respondents felt that other

Table 2: Summary of Findings on Service Delivery-Related Indicators for NPI Partner which were interviewed as part of the NuPITA Evaluation – September 2012*

	Retrak	Wellshare	FXB	ICOBI	SJCC	GRACE	Mfesane	AMURT
Scope/ Range	Scope and coverage now include life skills activities for young boys	No change	Prevention expanded to include segmented messages for AB/ ABC and home-to-home approach for reaching out of school youth	Scope expanded to include health/medical and better approaches PS support	New approach: CHWs disseminate HIV prevention messages, introduced expanded community fostership	Changed from mass campaigns to small groups and repetitive sessions	Adopted better approaches and expanded scope	Expanded to include HIV prevention, IGAs, PMTCT, vulnerable groups, HCT
Beneficiary Number	Surpassed most of their targets				Half of the targets surpassed	Surpassed targets for PEPFAR indicators & underachieved on others	Surpassed most of their targets	
SOPs & Guidelines	Improved and increased use			Improved and increase use & transferred to sub-partners		Improved and increased use		
Support Supervision	Tools and guidelines in place and used							
Referral System	More functional referral network (with MOUs and many collaborating partners)	Disseminated referral directory	More functional referral network (referral directories and referral slips in place and used)		More functional referral network with tools in place and processes being institutionalized	Limited functionality due to lack of funding	More functional referral network with tools in place and processes being institutionalized	More functional referral network (with MOUs and many collaborating partners)
Data use for Decision Making	Increased use of data to inform management decisions							
CSI	Was introduced and used at household and individual levels to direct support				Attended training but the CSI not yet used- although there is a plan to roll them out	Was introduced and used at household and individual levels to direct support		Not applicable

* This table provides a snapshot of partner achievements related to service delivery and sustainability. For more detailed information, refer to the individual partner reports found in the evaluation report.

NuPITA technical assistance largely contributed to the steps partners had taken over the course of NPI towards becoming more sustainable. The NuPITA approach of working alongside its partners rather than prescribing and dictating solutions was
widely appreciated and cited several times during the interviews: *Support was tailor-made to improve on our weaknesses; "they didn't say 'you have to do it this way.'*

The evaluation found evidence that the sampled NPI partners were able to surpass their targets because of changes in scope and approaches in service delivery – which were made possible because of the technical support provided by NuPITA – as described in the subsequent sections of the evaluation report.

In general, results presented in this report emphasize increased numbers of beneficiaries reached by project services, perhaps the most relevant achievements by NPI partners.

Changes in Scope and Approach in Service Delivery

The evaluation showed that most (7/8) of the sampled NPI partners changed the scope and approaches they were using in service delivery as a result of the technical assistance received from NuPITA. For example, the staff of Mfesane in South Africa now believe they are running "a totally new organization." The organization adopted better approaches in service delivery especially in behavior change communication, expanded geographical scope from an initial two to six South African municipalities, and also expanded target groups to include vulnerable groups and people with disabilities.

ICOBI in Uganda has been able to adopt better approaches in psychosocial support: The organization was able to organize an exchange visit with the National Community of Women

> ***Before NPI, we were focusing purely on treatment, now we support OVC care, HIV prevention, economic strengthening [income generation]… We have added PMTCT, which is now a major project for us. We are also now targeting [at risk populations].***
>
> *— Key informant interview respondent, Kenya*

Living with HIV and AIDS and adopted a "kids club" approach for psychosocial support of vulnerable children. Initially the organization was focusing on supporting education for orphans and vulnerable children, but because of NuPITA's technical support, the scope of services has expanded to include provision of medical services and block payment of tuition fees. FXB/Uganda was able to include child participation in the menu of services using participatory tools that were provided by NuPITA to reach younger children with child protection services. As a result, child protection has now become a core component of their work.

Institutionalization of Internationally Recognized Standards and Procedures

All the sampled NPI partners reported that support from the NuPITA project led to a significant professionalization in their methods of work. Under NuPITA, most had developed and, at the time of the evaluation, were using the following standard operating procedures and guidelines: Project implementation manual, support supervision plans, implementation guides for key activities such as children's psychosocial clubs, selection guidelines for apprentice service providers, project performance monitoring plans, data flow charts, reporting formats, customized project quality standards for different project activities, timesheets, performance appraisals,

asset inventory, and branding guidelines. All the standard operating procedures and guidelines were found, either through key informant interviews or demonstration, to be documented. NPI partners even used them with their implementing sub-partners and across their other, non-NPI projects. The use of standard operating procedures and guidelines was reported to have translated into better quality of services offered to the project beneficiaries.

Changes in the Quality of Support Supervision

All nine sampled NPI partners reported significant improvements in the quality of support supervision that they are conducting. By the time of the evaluation, all nine reported that they had developed comprehensive periodic support supervision reports that clearly identify issues to be addressed and evidence of actions taken to address them.

All these improvements were associated with the assistance received in developing a support supervision strategy and tools, in addition to the trainings that they attended. NuPITA provided a very broad range of group and organization-specific trainings and addressed the gamut of managerial and technical needs of high-quality HIV and AIDS programming. As just one example of how trainings and direct technical assistance reinforced each other, elements of support supervision were contained in the following illustrative trainings (in addition to training on support supervision itself): Quality assurance and quality improvement, team building and communication, change management, performance appraisal, and building effective referral systems.

Use of Program Data to Monitor Service Outcomes and Inform Management Decisions

All the sampled NPI partners reported significant improvements in the use of project performance data to inform management decisions. This is associated with support received from NuPITA in the form of monitoring & evaluation trainings, use of consultants and resident advisors who mentored the NPI partners to develop monitoring & evaluation frameworks/plans, reporting formats, and alignment of reporting tools to performance indicators. Some of the NPI partners reported conducting monthly monitoring and quarterly and annual reviews of their program and service delivery data which were not done before the NPI cooperative agreements. Through these reviews, they were able to change implementation strategies when under-achievements were recorded for some interventions.

> ***Our support supervision to CBOs is now better organized and more systematic. Reports are compiled, the approach is more collaborative and participative than before when a more directive policing attitude was used.***
>
> ***— Key informant interview respondent, Uganda***

Use of the Child Status Index

All of the NPI partners who were serving orphans and vulnerable children were trained and provided with the Child Status Index tool for use in monitoring the well-being of OVC and their households. All NPI partners who had started using the tool reported that it was very useful, especially in the following ways:

Monitoring and evaluation was not in our culture before NuPITA, but now it is second nature. NuPITA helped us develop an M&E plan and now we have data collection tools and conduct regular review meetings to assess progress…[For instance,] we realized that very few people were using our home-based HIV counseling services because of stigma and decided that instead of testing for HIV only, we would offer a cocktail of tests (including blood sugar, malaria, etc.) as a way of reducing the stigma and encouraging people to take up the HIV testing that was later offered as part of the cocktail.

— Key informant interview respondent, South Africa

a) Used to identify the specific needs of a child and his/her household and to translate these needs into intervention strategies. ICOBI in Uganda was able to use the tool to identify service delivery gaps, and as a result the organization was able to effectively direct interventions to address their needs.

b) Used by staff/caregivers to monitor problems and benefits in their efforts in serving children. Additionally, the tool is now being used to advocate for resources and improvements in service quality. The staff of WellShare International reported to have acquired skills to assess vulnerabilities of children and their households following the Child Status Index trainings. They also reported to be using analyzed Child Status Index data to assess benefits of their activities and advocate for more resources from UNICEF and the Uganda Civil Society Fund.

c) Used to raise awareness among frontline staff (such as community health workers and caregivers) about the multiple dimensions of child well-being to help them understand and address these areas routinely in their work. The staff of Mfesane, in South Africa, reported that all community health volunteers oriented in the use of the Child Status Index consider it to be a very useful tool that constantly reminds them of the multiple dimensions of child well- being that should be routinely assessed.

d) Although Retrak, ICOBI, GRACE, and FXB all collected electronic Child Status Index data, it would have been helpful to more systematically use a database for internal monitoring, analysis of partner use of the tool, and external dissemination of results.

Changes in the Functionality of Referral Systems/Linkages

Most of the sampled NPI partners (6/8) reported improvement in the functionality[4] of their internal referral networks/linkages and with external service providers to support delivery of comprehensive HIV and AIDS services. This ranged from basic awareness of a need to develop a referral system (GRACE and ARC) to documenting complete referrals (Mfesane, Retrak, FXB, AMURT). At a minimum, there is a referral directory of mapped out service providers that was disseminated for use among network members.

[4] Functionality of referral linkages for networked services was assessed based on the presence of established critical elements of networked services such as: MOU with other service providers, use of referral forms/slips, presence of a coordinating organization, organization of meetings of network members and presence of a feedback loop.

Where fully functional referral systems were reported, a referral slip is used whenever clients are referred for a needed service and a feedback loop exists, where a referred client reports back to the referring organization about services received. Only one of the nine sampled partners still experiences limited functionality of referral activities in spite of the support received from NuPITA. This group reported lack of a referral directory, referral documentation, and feedback on referred clients and coordination meetings for network members. In addition, a number of partners noted that their clients were expected to pay for referral services – a serious barrier to use – making the referral link ineffective.

Effects of Capacity Building on the Sustainability of Organizations

The evaluation team specifically explored whether NuPITA partners experienced changes in their overall institutional sustainability since the start of their NPI cooperative agreements, and whether those changes had been influenced by capacity building inputs provided by NuPITA. Similar to the first evaluation objective, this objective was found to be consistent with the overall goal of NuPITA to increase the quality of program implementation and to strengthen the institutional capacity of NPI partners.

Institutional sustainability can be defined as the measure of an organization's ability to fulfill its mission and serve its stakeholders over time.[5] Achieving institutional sustainability is a goal towards which all organizations strive.

A further distinction was made between financial and programmatic sustainability, as defined by the evaluation team based on its review of NuPITA program documents. Financial sustainability was defined as the ability to secure the resources from reliable and diverse sources necessary to achieve organizational goals. Programmatic sustainability was defined as the ability of the organization to secure and manage sufficient resources (not necessarily limited to financial resources) to effectively and consistently deliver services or sustain benefits after the donor's technical, managerial and financial support has significantly decreased or ended.

Various indicators were identified and chosen to determine any change or progress in NPI partners' institutional sustainability. These indicators provided a quantifiable measure in specific areas of sustainability and allowed for comparison over time and across similar institutions.

In the area of financial sustainability, the main indicators selected were:

- The existence of different funding sources than USAID;
- The existence of different collaborating partners;
- The existence and use of a costed strategic plan; and
- The existence and use of a resource mobilization strategy.

Indicators to assess programmatic sustainability included:

- The existence of networks/linkages;
- The existence of and adherence to organizational policies, procedures and practices;
- The retention of trained and skilled human resources relevant to the services offered; and
- The existence of a plan to sustain critical activities beyond the life of the project.

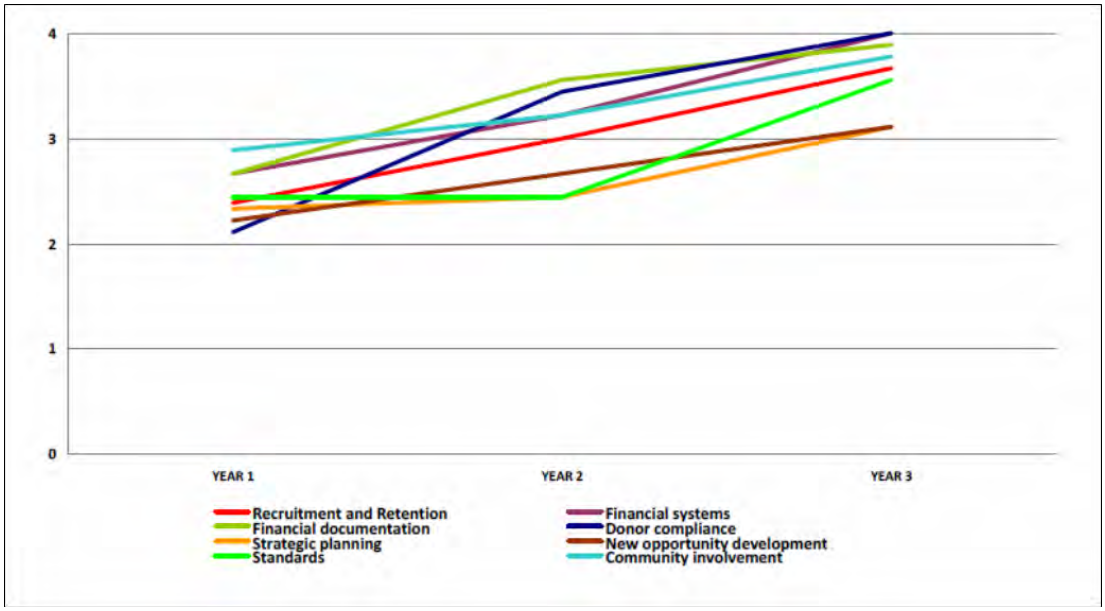
A brief summary of the main findings by those proxy indicators included in the interview checklist disaggregated by NPI organization is

[5] Hal Swerissen.June 2007.Understanding the Sustainability of Health Programs and Organisational Change.Melbourne:La Trove University.

displayed in Table 3.

A vital component of financial sustainability is funding diversification, referring to the number of sources that provide the organization's financial resources. All but one of the NPI partners assessed during this study showed that their funding base had increased with more sources contributing to it – some of which had not been accessible to them before the NPI project and the technical assistance received by NuPITA. Some of these new funding opportunities consisted of multi-year funding, which was reported as a significant achievement for organizations used to receiving funding for just one year. Remarkably, six of the eight sampled organizations whose information was comprehensively collected during the evaluation received additional funding from USAID either as prime beneficiaries or sub-grantees; while Mfesane received grants from different South Africa government departments, namely health, education and social development departments. To put it in a respondent's words, "we have almost become irresistible to local donors."

Figure 3: Aggregated Average Scores for Selected Sustainability Sub-Domains



One of the factors widely reported during the interviews to have played a pivotal role in this funding diversification – though not directly and objectively verified by the evaluation team – was having structured and sound systems of financial, administrative, and program procedures and policies in place. Documentation of management systems and efficient procedures for administration and finances were largely recognized as keys for sustainability. This was in fact deemed to have been a strong indicator of the overall organization's competence and strength, which in turn attracted new donors and qualified the NPI partners for further and diversified funding. As clearly stated by one of the respondents, "donors are very happy with our systems and that is all because of NuPITA."

The case of Mfesane is illustrative, since they were requested by the South African government to share documentation of their financial systems and job descriptions with other organizations and public-sector entities, a validation of the government's strong recognition and appreciation of their administrative capabilities. This recognition translated directly into the government's decision to issue seven grants to Mfesane, according to interviews with Mfesane representatives.

All sampled organizations were concerned about the need to diversify their funding base and aware

that an adequate resource mobilization plan is an essential requirement for this. The evaluation team found that six of eight put in place measures to address resource mobilization, with a seventh under development. In addition, three of the five NPI partner international organizations had decentralized at least partial responsibility for fund raising from headquarters to the country offices, as part of their NuPITA-supported resource mobilization strategy. NuPITA helped with registration of these groups as local non-governmental organizations and all had either received or were being considered for local grants for which they had previously been ineligible.

> ***I am what I am because of NuPITA, I have acquired a lot of knowledge and skills from the NuPITA trainings and right now I think I can manage any HIV project.***
>
> *— Key informant interview respondent, Uganda*

Local fundraising had significantly improved for four of the partners. At FXB, for instance, all staff now know that they are responsible for the whole resource mobilization process, including the identification of partners and linkages. Some respondents expressed their satisfaction in having developed a considerable degree of confidence and ability when going out to market their projects in different forums and when communicating with high-profile donors. A quote of one of the respondents demonstrates improved confidence: "We have knowledge, confidence, and data. We can contribute to the discussion now."

Additionally, NuPITA-supported documentation of each partner's NPI project achievements in the form of printed booklets of success stories, DVDs or technical briefs helped in the process of disseminating the organization's results and eventually its marketability and attractiveness to donor agencies. This was seen as a result of the specific NuPITA-led training on documentation strategies and how to showcase project Successes, "a wonderful, wonderful input" as a respondent defined it.

As part of this striving for visibility and in line with NuPITA's advice, many of the NPI partners used various avenues to strengthen their links with the USAID Mission in their respective countries. Three partners reported having held meetings at the Mission offices to share their project's successes. AMURT now participates regularly in Chief of Party breakfast meetings at the Mission. On World AIDS Day, the USAID Mission in Uganda included an account of FXB's achievements in the Embassy's electronic newsletter. At least two interviewees offered the information (not asked as an interview question) that field sites had received visits from both USAID and CDC officials to cultivate relations. Respondents largely associated improved relations with USAID, a donor agency previously seen as inaccessible or "intimidating," to NuPITA efforts to facilitate presentations and interactions with the Missions.

One local organization featured in the evaluation sample, ICOBI, reported never having been invited to any technical meeting prior to their partnership with NuPITA. By the time their three -year project ended, they were part of the forum for developing the National HIV and AIDS Strategic Plan II, a member of the Regional AIDS Training Network, and they had become the regional reference organization on home-to-home HIV counseling and testing.

Participating in technical working groups and other forums significantly improved the visibility of NPI partners that do so. For example, Retrak Uganda took part in the national process for the development of a National Strategic Programme

Plan of Interventions for Orphans and Vulnerable Children, giving this small, independent NGO greater involvement and credibility on the national scale.

An additional observation on improved linkages was the formation of a "group of five" NPI partners in Kenya which shares information on forthcoming projects and grant opportunities. These five organizations, previously supported by NuPITA or TA-NPI, submitted a joint proposal to the European Union, demonstrating – as reported by sampled NuPITA partners – improved ability to partner with other agencies.

The presence of a costed strategic plan (or of a financial or business plan) was another indicator of financial sustainability assessed during the evaluation. Strategic planning is the mechanism organizations use to clarify their mission and objectives as well as prioritize the activities needed to accomplish them. Six of the eight responding organizations reported having a strategic plan in place, while another one was in the process of developing it. The development of strategic plans was largely attained through the inputs received from NuPITA – including individualized trainings on strategic planning and targeted follow-up and support – and in most cases plans were found to be linked to a strategy to sustain current programmatic activities beyond the life of the NPI agreement.

AMURT peer educators with the tools of their trade.

Table 3: Summary of Findings on Sustainability-Related Indicators Disaggregated by NPI Organization interviewed as part of NuPITA Evaluation, September 2012*

	Retrak	Wellshare	FXB	ICOBI	SJCC	GRACE	Mfesane	AMURT
Funding Sources	Increased and diversified (USAID incl.)	More USAID Funding			Increased and diversified (USAID incl.)	Most program activities came to an end	Increased and diversified (Gov't Incl.)	Increased and diversified (USAID Incl.)
Collaborating Partners	Increased and diversified					Stagnant	Increased and diversified	
Strategic Plan	Under development	No plan in place	Costed strategic plan in place					
Resource Mobilization	Fundraising decentralized to field office		Fundraising partially decentralized to field office	Resource mobilization committee in place	Resource mobilization strategy developed	Fundraising committee in place	Resource mobilization strategy developed	
Linkages	Improved, more visible, in many TWG			Participating in several forums	Improved, more visible in many TWG	Limited	Improved, more visible in many TWG	Improved
Standards and procedures system	All in place, made them marketable		Many policies and procedures improved		All in place, made them marketable	Systems in place, not enough for more funding	Gov't asked to share their systems with other NGOs & public	All in place, made them marketable
Skilled HR	Retained and hired more staff	Retained most staff; plan to hire more	Field staff laid off, managers retained	Retained key staff and hired more	Retained and hired more	Laid off some and retained others	Retained most staff and hired NPI Advisor	Retained all key staff; hired NPI Advisor
Sustaining Activities	Activities sustained with new funding	Through districts and CBOs	Improved	Developed a sustainability plan for every project	Developed a sustainability plan	Trying strategy for long-term funding	Developed a sustainability plan for HBC activities	Developed a sustainability plan

**This table provides a snapshot of partner achievements related to service delivery and sustainability. For more detailed information, refer to the individual partner reports in the evaluation report.

NuPITA NO-COST EXTENSION PERIOD ACTIVITIES

Support to Missions

As part of JSI's end-of-project activities, USAID/Washington agreed that meeting with in-country Missions to share lessons, experience, and results could be helpful as USAID field staff develop their strategies and processes to work with local partners under USAID/Forward. As a result of these discussions, USAID/East Africa asked JSI to meet with two regional partners, Regional Center for Quality Health Care (RCQHC) and the African Network for the Care of children Affected by HIV and AIDs (ANNECA) in Kampala during November 2012 to determine if there was interest for an assessment.

JSI also met with the USAID/Uganda Mission to share experiences and tools developed during work with NPI partners. Soon after the meeting, USAID in Kampala identified The AIDS Support Organization (TASO) and Reproductive Health Uganda (RHU) as local implementing partners that would benefit from capacity building to strengthen their internal programmatic and organizational systems. RHU requested that NuPITA/JSI facilitate a TCA in behavior change communication; however there was not enough time remaining in the project to accommodate the request. To the effect, NuPITA shared the tools so that RHU can consider adapting them.

The East Africa Capacity Building Workshop – Nairobi

From January 29-31st 2013, USAID/East Africa's USAD Forward staff facilitated a capacity building workshop for USAID staff in Africa and at headquarters. JSI was asked to be part of the planning committee for the second day during which implementing partners were invited to present their experiences and contribute to the discussions on local capacity development. JSI staff attended a number of planning meetings in December and January, identified resources for presentations, facilitated two break-out sessions and worked with an NPI partner on their plenary presentation.

Documentation

During the final three months of NuPITA, JSI and Initiatives worked on finalizing, completing, and updating where necessary the tools, reports, and documents generated over the life of the NuPITA project. All products can be found on JSI's website.

The NuPITA model can be useful as one experience to inform new initiatives including local capacity Ddvelopment and USAID Forward: "An ambitious reform effort…to change the way the Agency does business—with new partnerships, an emphasis on innovation and a relentless focus on results. It gives USAID the opportunity to…unleash its full potential to achieve high-impact development."

LESSONS LEARNED FOR FUTURE CAPACITY BUILDING PARTNERSHIPS

The evaluation findings are relevant to future capacity building programming because they contain strong evidence linking technical assistance provision with the ability of organizations to implement high-quality HIV and AIDS programs. For future capacity building partnerships, NuPITA brings lessons of particular importance. These include:

- **Capacity building support is highly valued by all sampled partners**, to the point of willingness to forego some direct funding in the future in exchange for capacity support. All partners felt strong capacity building was essential for any new U.S. government partners, and that all partners could benefit from updates in HIV programming and continued support for improving their management skills.

- **Transformative organizational change is labor-, time- and resource-intensive.** All respondents acknowledge the intensity of effort needed to achieve long-term systemic changes in organizations. In looking to be both cost efficient and effective, donors and their partners need to be clear on institution-building objectives and the inputs needed to achieve them.

- **While cost efficiency and value-for-money were not part of the scope of work, it became clear that capacity building efforts can have a larger thanexpected impact**. many of the NPI partners work in multiple countries and confirmed that they have adopted or adapted their new systems across their global organizations.

- **Separating technical assistance support from contractual and administrative oversight of the recipient** helps to focus the technical assistance provider on offering support of direct value to partners who have an option to accept or decline it and generate mutual trust and open, collegial relationships.

- **Partners appreciated the breadth and quality of the overall technical assistance package and of the autonomous process of requesting it.** Although evaluators attempted to link specific NuPITA inputs to outputs, partners consistently declined to highlight a particular input when discussing progress. Instead, they expressed their appreciation for the complementary nature of the support including OCAs and TCAs, tailored technical assistance provided by the NuPITA team and on-site placement of NPI Advisors, structured learning visits, and trainings.

- **Open, trusting and ongoing relationships** that allow both a deep knowledge of partner capacities and the ability to tailor assistance to specific needs contribute strongly to efficient change.

- **Sequencing project startup so that the technical assistance provider has even a brief head start on staffing and fundamental support designs** before NPI partner agreements begin would have given more time for even sequencing of technical assistance and perhaps a smoother project startup.

- **Partner-driven technical assistance for capacity building** is more meaningful to partners and is more readily embraced and acted upon.

The **New Partners Initiative Technical Assistance (NuPITA) Project** was a USAID-funded initiative to increase the quality of program implementation and strengthen the institutional capacity of 14 nongovernmental organizations that provide HIV prevention and care services in eight sub-Saharan African countries. These 14 organizations were PEPFAR New Partners Initiative (NPI) Round 2 and Round 3 grantees.

Implemented by John Snow, Inc., and partner Initiatives Inc., with offices in Kampala, Uganda and Nairobi, Kenya, the project provided technical assistance (TA) to the NPI grantees in HIV prevention and care services, financial management and compliance with USG regulations, and organizational development (OD).

NuPITA provided technical assistance to:

Round 2 NPI Partners

American Refugee Committee International (ARC) – Minnesota, USA, working in Uganda
Camfed USA Foundation (Camfed) – California, USA, working in Tanzania
Children's Emergency Relief International (CERI) – Texas, USA, working in South Africa
Integrated Community-Based Initiatives (ICOBI) – Bushenyi District, Uganda
Tearfund* – Teddington, United Kingdom, working in Kenya
Woord en Daad – Gorinchem, Netherlands, working in South Africa

Round 3 NPI Partners

Ananda Marga Universal Relief Team (AMURT) – Maryland, USA, working in Kenya
European Cooperative for Rural Development (EUCORD) – Brussels, Belgium, working in Nigeria
François-Xavier Bagnoud Foundation (FXB) – New York, USA, working in Rwanda and Uganda
GOAL – Dublin, Ireland, working in Uganda
Grassroots Alliance for Community Education (G.R.A.C.E.) – working in Kenya
Kindernothlife (KNH) – Duisburg, Germany, working in Kenya
WellShare – Minnesota, USA, working in Uganda
Retrak – Manchester, United Kingdom, working in Uganda and Ethiopia
Tearfund* – Teddington, United Kingdom, working in Zambia

© 2012, John Snow, Inc. The New Parlners Initiative Technical Assistance Project (NuP/TA) is funded by the United States Agency for International Development through Contract No: GHS-1-00-07-00002-00 and is implemented by John Snow, Inc. in collaboration with Initiatives Inc.

This document is made possible by the generous suppori of the American people through the United States Agency for International Development (USA/D). The contents are the responsibility of John Snow, Inc. and do not necessarily reflect the views of USAID or the United States Government.