

# NASON

*(Nebbi AIDS Services Organisations Network)*

## 3-YEAR STRATEGIC PLAN

2004 - 2007

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Foreword

This three year strategic plan was formulated in a participatory manner. It involved the work of the executive committees, co-opted technical people and members of NASON including even those who are still aspiring to join. Despite the opportunity provided by this approach for members of NASON to desire what they need for them, it was beneficial in that NASON looked at its dreams vis-à-vis the internal and external potentials that can be tapped for its operation.

In the plan NASON targets making a commendable contribution to the fight against HIV/AIDS as is the world over. This contribution is believed can be reached through making AIDS Services Organisations (ASOs) deliver quality services; opening political space for ASOs to be recognized as trust worthy agents of change; and having a NASON whose ability to coordinate ASOs is reinforced. These strategies hinge on the core values –CARERS- that will be the guiding principle of work. Thus, the strategic plan reinforces the commitment of NASON to its members as the direct beneficiaries and to persons (not) infected and (not) affected by HIV/AIDS.

I, therefore, call upon all stakeholders to support generously the implementation of this plan as we remain looking forward to *'a world free of HIV/AIDS'*.

Franklyn J.B. CONGA  
**Chairman/NASON**

ACRONYMS

AAN	=	Action Aid Nebbi
AFARD	=	Agency for Accelerated Regional Development
AIDS	=	Acquired Immune Deficiency Syndrome
ASO	=	AIDS Service Organisations
BCC	=	Behavior Change Communication
BP	=	Best Practices
CBO	=	Community Based organisations
CDA	=	Community Development Assistants
CHAI	=	Community HIV/AIDS Initiative
DAT	=	District AIDS Task force
DHAC	=	District HIV/AIDS Committee
HIV	=	Human Immuno-Deficiency Virus
IEC	=	Information, Education and Communication
NASON	=	Nebbi AIDS Service Organisations Network
OI	=	Opportunistic Infections
OVC	=	Orphans and Vulnerable Children
PMTCT	=	Prevention of Mother-to-child Transmission
STD	=	Sexually Transmitted Disease
STI	=	Sexually Transmitted Infection
TB	=	Tuberculosis
UNASO	=	Uganda Network of AIDS Services Organisations
VCT	=	Voluntary Counseling and Testing

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## 1.0 INTRODUCTION

Nebbi AIDS Services Organisations Network (NASON) was formed in 2001 by organizations that are involved in HIV/AIDS activities in Nebbi District, North Western Uganda. Its vision is that of 'A world free of HIV/AIDS' that will be achieved by way of *'enhancing the capacity of AIDS Services Organisations (ASOs) in Nebbi district to delivery quality services that promote the prevention of HIV/AIDS and mitigate its socio-economic impact through information sharing, training, resource mobilization, advocacy and lobbying, and monitoring'*.

After 2 years of activities, NASON has realized the need for a strategic plan that will guide its activities at least in the near future. In July 2003, the Executive Committee came up with a draft plan of action as part of that quest and finally in May 2004 a formal strategic planning workshop was organized and its output is the object of this document.

The first part of the document presents the background information about: Nebbi district where NASON operates; and the context within which it is operating. The second part presents a synopsis of NASON, and finally the last part details the strategic plans for the next three years.

### 1.1 BACKGROUND INFORMATION

#### 1.1.1 About Nebbi district- the action field

Nebbi district, located in North-western Uganda, is one of the 56 districts of Uganda. It is bordered by Arua district to the north, Gulu district to the east, Masindi district to the southeast and the Democratic Republic of Congo to the West and South. The district is composed of 3 counties (Jonam, Padyere and Okoro) subdivided into 16 sub counties and 3 town councils, 84 parishes and 1222 villages.

The district is a polyglot society with many ethnic groupings. The majority of the population is of Nilotic Origin (98%). Of this, 91% are of Alur ethnicity. The total population is 433,600 composed of 48% males and 52% females; distributed as 90 % rural and 10% urban; and is predominantly a young population with a high total dependency ratio (98%).<sup>1</sup>

The people of Nebbi district are basically rural, poor, and have a low quality of life. It can be observed that, a typical person from Nebbi district would have a home in a rural area with agriculture as the main occupation. S/he would be a member of a family of about six people depending on food and cash crops cultivated using hand hoes on a 0.5-hectare of land. The home would be a temporary hut made of wooden poles, mud walls, and grass-thatched roof. A woman would have a relative risk factor of about 7 times of being illiterate and faces the brunt of bearing about 6 children. Only three people out of ten in the village would have pit latrines. Doctors are virtually inaccessible. It is, therefore, not surprising that at least two children per family would not live to be five years old, and on average, a person should be dead at 45 years of age. The usual mode of transport is on foot or by bicycle. Very few people have access to a FM radio station launched in 1998 and a mobile telephone network that became operational in 2000.

#### 1.1.2 HIV/AIDS STATUS IN NEBBI DISTRICT

Nebbi district is still not well covered with respect to the fight against HIV/AIDS. There is no clear information about the gravity of the situation in the district. Figures for Nebbi district are scanty and incomplete. The STD/AIDS Control Programme, a national programme under the Ministry of Health released a surveillance report in June 2001 and June 2003 that indicates that clinical AIDS cases recorded in Nebbi district as at December 2000 and 2002 was stagnant at 668 (651 adults and 17 pediatrics).<sup>2</sup> These figure needs to be read with care because of under and mis-reporting because many people do not test, testing facilities are few, and the many myths that surround HIV/AIDS and its stigma shun away a lot of true cases. Thus, Nebbi district does not know how many people are affected neither does it know how many are infected nor those that have died from the disease to-date. This leaves the worry about AIDS that kill and more especially the productive age group, fresh. This situation is even worsening with the limited access points to HIV/AIDS services as shown below.

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<sup>1</sup> See UBOS (2002) *Population and Housing Census, District Preliminary Results*, Entebbe. Assuming the same growth rate, the population is projected to 514,981 by 2007.

<sup>2</sup> STD/AIDS Control Programme, Ministry of Health (June 2001 and June 2003) *HIV/AIDS Surveillance Report*. Kampala.

**Table 1 Preliminary results of Available HIV/AIDS Services<sup>3</sup>**

Sub-county	VCT	PMTCT	STI Mgt	Clinical care for OI	Infection Control	Clinical care for TB	Lab services	Targeted prevention of HIV	Home based care	Adolescent friendly services	OVC skills building
1. Atyak			4	4	4	1	1	1	1		
2. Erussi			5	3	5	1	1		1		
3. Jangokoro			2	2	2		1		1		
4. Kango			3	2	3	1	1		1		
5. Kucwiny			2	2	2	1	1				
6. Nebbi TC	1		14	13	12	2	9				
7. Nebbi	1		3	2	2		1		2		
8. Nyapea	1		3	2	3	1	2		1		
9. Nyaravur	1		2	2	2	1	1				
10. Paidha TC			1	1	1	1	1	1	1	1	
11. Paidha			2	2	2		1	1		1	
12. Pakwach TC	1		2	2	2	1	1		1	1	
13. Pakwach			2	2	2	1	1				
14. Panyango			5	4	6					2	
15. Panyimur			4	4	4	2	2			1	
16. Parombo			3	3	3	1	1	1			
17. Wadelai		1	2	2	2	2	2	1	1	2	
18. Zecu			2	2	2	1	1		1	2	
<b>Total</b>	<b>5</b>	<b>1</b>	<b>61</b>	<b>54</b>	<b>59</b>	<b>17</b>	<b>27</b>	<b>5</b>	<b>11</b>	<b>10</b>	<b>0</b>

Source: Nebbi District 5 Year Strategic Plan, 2003-2008

#### 1.1.2.1 Response to HIV/AIDS scourge in the district

In line with the Multi-sectoral AIDS Control Approach (MACA) developed by Uganda AIDS Commission (UAC) in its National Operational Plan<sup>4</sup>, there are a number of attempts in Nebbi district to fight HIV/AIDS. A district based Multi-sectoral Committees (DAT and DHAC) are in place and a District Focal Point Person assigned. Civil society participation and acceptance has also increased. Community Based Organisations (CBOs) thus operating in complementarity with the government and private sector institutions. The roles of CBOs are paramount because they are cost-effective, area-specific, local community needs oriented, strategic in their target groups and focus and above all are community based without the bureaucratic and institutionalized compartmentalization associated with many government bodies.

Current intervention activities revolves around:

- **HIV Prevention** - that includes initial and ongoing awareness raising as well as interventions to promote specific behavior change to reduce or retain the current risk/exposure level of HIV. Prominent areas have been in the provision of IEC on HIV life; the promotion of abstinence from premarital sex and mutual faithfulness among and between sexual partners; strengthening consistent and correct use of condoms; the promotion of community-based care and support for HIV/AIDS infected and affected persons; and the promotion of information and encouraging the use/adoption of family planning [methods].
- **Sexual Reproductive Health and Rights** - that focuses on adolescents and young adults within 10-24 age brackets to ensure a positive behavioral change on issues relating to sex and sexuality. This approach responds to the inadequate status of sexual health and reproductive rights in the district. Given that sex education by parents to their children is seen as a taboo coupled with the culture that promotes early sex and many sexual partners, infection risk and rate remains high. Rampant extra-marital affairs among couples and a weak community informal education channels for adolescents further increases the potential danger of a heightened infections magnitude.
- **Care and Support** - for PLWA and those affected by the disease. This is majorly a short-term coping to improve positive living, and community acceptance of HIV disease; and **Long-term coping** - that is a long term coping strategy aimed at the mitigation of the impact of HIV/AIDS on individuals, families, the community and existing institutions.

<sup>3</sup> During the district feedback workshop of NASON Members it was noted that, there is no PMTCT services in Wadelai, no VCT in Nebbi because the people accesses the services from Nebbi TC, and two OVC skills building exist in Nebbi TC that were excluded by the AIM needs assessment exercise.

<sup>4</sup> This plan focuses at preventing the further transmission of HIV; mitigating the socio-economic impact of HIV/AIDS; strengthening national capacity for the purpose of HIV/AIDS control; strengthening HIV/AIDS information system; and strengthening national capacity to undertake HIV/AIDS related research.

**1.1.2.2 Constraints to these initiatives**

The most constraining situation associated with these interventions in the district includes:

- ❖ Lack of integrated interventions that help build a holistic and responsive community. For instance, ASOs in the same area deliver disjointed information to the same clients, etc.
- ❖ Community social stigmatization of persons affected and infected by HIV/AIDS. This stems from the inadequate knowledge of the community members on the disease as well as the lack of self-esteem amongst the infected people.
- ❖ Culture still plays a vital role in the community regarding the spread of HIV/AIDS. It is mostly believed to be witchcraft. This presents a potential problem in the community since it becomes quite hard for community members to acknowledge and appreciate HIV/AIDS as a disease.
- ❖ Reproductive health and rights status in our community is poor as can be reflected from the high child marriages, low age at first intercourse, rampant home based abortion, the growing level of defilement and their associated effects. Adolescents and young adults lack adequate sex education.

**Table 2 SWOT analysis of responses<sup>5</sup>**

<p><b>Strengths</b></p> <ul style="list-style-type: none"> <li>• Political support to the fight against AIDS</li> <li>• Availability of district HIV/AIDS work plan</li> <li>• Competent human resources exist</li> <li>• Some positive attitude of the local community about HIV/AIDS</li> <li>• The multi-sectoral approach towards the fight against HIV/AIDS</li> <li>• Availability of health facilities in the district (54 units)</li> <li>• Availability of communication/transport facilities (radio, roads, internet)</li> <li>• Existing institutions like schools, colleges enhancing the fight against AIDS</li> <li>• Many CBOs are active in HIV/AIDS fight</li> </ul>	<p><b>Weaknesses</b></p> <ul style="list-style-type: none"> <li>• Poor parent to child relationship (fear, poor communication skills, culture, deviant behaviour)</li> <li>• Abject poverty in the households (lack of necessities, children don't want to identify with parents)</li> <li>• Lack of health workers especially laboratory staff, counselors</li> <li>• Lack of openness on issues of sex and sexuality</li> <li>• Inadequate laboratory services</li> <li>• Inadequate information to target groups on available services</li> <li>• Inadequate data/statistics on HIV/AIDS</li> <li>• Inadequate monitoring and evaluation of interventions</li> <li>• Negative cultural beliefs and practices</li> </ul>
<p><b>Opportunities</b></p> <ul style="list-style-type: none"> <li>• Donor funding e.g. Action Aid, UNICEF, World Bank, USAID, AIM</li> <li>• Favourable policies in place (government and other development partners)</li> <li>• Projects by other agencies e.g. AIM, AIC, MOH being implemented in Nebbi district</li> <li>• Access to technological innovations e.g. phones, e-mail</li> </ul>	<p><b>Threats</b></p> <ul style="list-style-type: none"> <li>• Insecurity in border areas, displacement of people</li> <li>• Unreliable funding by donor agencies</li> <li>• Voluntarism is dying out</li> <li>• Various beliefs and faiths against sex education and condom use</li> <li>• Death of fighters against AIDS</li> </ul>

<sup>5</sup> For a detailed analysis of local government actors, see Nebbi District Local Government (July 2003) *HIV/AIDS Strategic Plan, 2003/04 – 2007/08*.

## 2.0 ABOUT NASON

### 2.1 Origin

Following the Uganda Network of AIDS Services Organizations (UNASO) initiated workshop in Nebbi in August 2001, NASON was given birth to with an interim executive committee formed. In a follow-up meeting held at Nebbi Hospital Antenatal Clinic in the same month, the network was named Network of AIDS Services Organisations in Nebbi (NASON). The meeting also discussed issues related to constitution making, registration with local government, and member mobilisation. Overtime, NASON was registered with The Community Development Services Department and it also became a subscribed member of UNASO and Nebbi District NGO Forum. It also took a representative position for AIDS Services Organisations (ASOs) interests in the district local government multi-sectoral committees (the DAT and DHAC).

### 2.2 Genesis of the Strategic Plan

In May 2003 NASON held a retreat for Executive Committee members in Pakwach. The retreat among other things discussed the critical mass requisite for directing the action of NASON. A preliminary idea for the strategic plan was hatched. After the election of new office bearers in July 2003 the task of reviewing and finalizing the plan was taken on board. This, however, could not materialize because of funding limitation. Action Aid Nebbi salvaged this situation in May 2004 when a 2-day strategic planning workshop was organized. This workshop was facilitated by Agency for Accelerated Regional Development (AFARD) and was attended by the Executive Committee members and other co-opted members who helped tease out a more critical thinking in the planning process.

From the workshop, a draft plan was produced and this was circulated to all potential stakeholders who finally discussed the draft plan in a one-day district feedback workshop held in Nebbi town council. Importantly, this plan aims at results. The results are scaled cumulatively in levels from the lowest level *outputs* (from input investment) through the *outcomes* (i.e., reaction to interventions); to the highest-level *impact* (i.e., changes in the lifestyle of the organizations, their members and the entire community). In this view, the plan looks at NASON as a coordinating entity for the smooth operation of the member groups who impact on the lives of the people (affected, infected, and non-affected and non-infected by HIV/AIDS).

Given the ad hoc operation and the challenges as well as the lessons learnt, NASON has in the next 3 years decided to take conscious steps to effectively establish itself, build a widely accepted image and integrity, and strengthen its members to effectively discharge their roles and responsibilities. To realize this, a strategic position is a must. Focus on a specific target group, the courses of actions to take and the expected results are hereunder stipulated.

Thus during the two-days' Strategic Planning Workshop, participants agreed on a strategic direction based on, among other factors, the environment in which it is operating (refer to background), its accomplishments and challenges and a SWOT analysis.

### 2.3 Accomplishments and challenges

From its inception, NASON has strived to deliver benefits to its primary beneficiaries - the ASOs so that it can indirectly reach out to the persons infected with and affected by HIV/AIDS. Overtime, it has so far done the following:

- Formulated a constitution that was approved by the general assembly.
- Elected an executive committee headed by the Chairperson and has two representatives of PLWAs on it.
- Mobilized 12 groups to a fully registered status with membership and annual subscription fees paid.
- Trained 10 ASOs in proposal writing supported by Action Aid Nebbi and 23 ASOs in organizational strengthening supported by UNASO.
- Linked 33 groups to AIM (12), CARITAS (11), and CHAI (10). Already 4 ASOs are receiving support.
- Represent ASOs in DHAC, DHAT, and UNASO decision circles.
- Regularly distribute IEC/BP/BCC materials to ASOs.
- Acts as a lead agency for ASOs in World AIDS day.
- Participated in a two-day Monitoring and Evaluation workshop, a one-day general assembly and a 5-days TOT all in Kampala with UNASO support; and a number of workshops in the district under AIM Programme; and stepping stone training in Arua.

While these achievements may seem few for such a time span, notable challenges hamper the effective operations of NASON and thus its ability to deliver expanded and integrated benefits. Some of these gaps are identified in table 3 below. But, NASON has learnt that bigger voice increases access to resources. It has also realized that a network improve closer inter-organizational relationship to share experience and knowledge and provide encouragement to members to work harder and better. However, the sour lessons are also that poor membership limit local resource mobilization, ASOs have a high



tendency to wait for opportunity, and that there is need for a self-grown initiative because when UNASO left NASON on its own it was not easy to make a positive stride forward.

**Table 3 SWOT analysis of NASON**

<p><b>Strength</b></p> <ul style="list-style-type: none"> <li>• Stronger NGOs in the district are members of NASON</li> <li>• PLWA are active partners in HIV prevention and mitigation</li> <li>• NASON symbolizes unity in diversity</li> <li>• Willingness of ASOs to actively engage in self-reliance HIV/AIDS prevention and mitigation</li> <li>• Recognized by local government</li> <li>• Many ASOs have human resources that are skilled in their work</li> <li>• NASON starting to market itself</li> </ul>	<p><b>Weaknesses</b></p> <ul style="list-style-type: none"> <li>• Inadequately functional executive committees</li> <li>• Lack of shared vision and internalized mission</li> <li>• Limited capacity to coordinate (logistic, funds, skills)</li> <li>• A mobile office without a secretariat</li> <li>• ASO concentrate more time on own activities</li> <li>• ASO not fully aware of NASON and NASON not fully aware of ASOs</li> <li>• High expectations of ASOs from NASON</li> <li>• Limited opportunity to share experiences</li> <li>• Ad hoc operations without plan, guidelines, code of conduct, bank account</li> <li>• No contact persons are designated at ASO level for NASON activities</li> <li>• Weak ASO management (leadership, finance, programming)</li> <li>• Limited capacity (skills, funds) to deliver quality services to beneficiary communities</li> </ul>
<p><b>Opportunity</b></p> <ul style="list-style-type: none"> <li>• Many prospective ASOs</li> <li>• Global political and donor will and support</li> <li>• High HIV/AIDS infection rates</li> <li>• Increasing community interest in HIV/AIDS</li> <li>• Policy of education that mainstream HIV/AIDS in educational curricular</li> </ul>	<p><b>Threats</b></p> <ul style="list-style-type: none"> <li>• High income poverty level</li> <li>• Political uncertainty</li> <li>• Exploitation by some organization</li> <li>• High illiteracy rate</li> </ul>

From the above, NASON distilled its strategic direction as presented below.

### 3.0 STRATEGIC DIRECTION 2004-2007

#### 3.1 Vision

NASON foresees a future in which there is '**A world free of HIV/AIDS**'.

#### 3.2 Mission

*To enhance the capacity of ASOs in Nebbi district to deliver quality services that promote the prevention of HIV/AIDS and mitigate its socio-economic impact through information sharing, training, resource mobilization, advocacy and lobbying, and monitoring.*

#### 3.3 Core values<sup>6</sup>

Putting the mission statement to work requires ethical standards. The standards also called 'code of conduct'<sup>7</sup> focuses at the harmonious co-existence of member ASO, their good governance and zeal for quality service delivery. Hereunder are the guiding principles that members will have to abide by in their day-to-day operations both internally and in partnership.

- ❖ **Commitment** to quality services – taking a direction that does not just look at service delivery but a kind of services that is quality.
- ❖ **Accountability** and transparency - ASOs and NASON needs to be honest and non-secretive over what belong to the public. Other stakeholders need to be involved and informed of what is going on.
- ❖ **Respecting** the dignity of member ASO - NASON will not hijack the roles of ASO neither will any member underrate another member.
- ❖ **Exemplary** leadership - every ASO and NASON itself should demonstrate efficient, participatory, and democratic leadership.
- ❖ **Excellence** – professionally performing to the ethical requirements and always striving to be on the lead of whatever is within ones reach.
- ❖ Standing for the **Rights** of the disadvantaged - helping the marginalized echo out their voices to the community and policy custodians.
- ❖ **Self-reliance** – looking inwardly at own resources first and seeing donations as complementary and not a must.

#### 3.4 The target group: AIDS Services Organisations

The primary membership and target beneficiaries of NASON are ASOs. These ASOs are operational district wide. They are composed of an average of 24 people per group and are largely engaged in a multitude of activities ranging from HIV/AIDS to other activities related to agriculture, income generation, education, and environment conservation, among others. But at least each group has a minimum of two activities.

Following a capacity self-assessment conducted by AFARD on CBOs operational in Nebbi district and other civil society workshops under the District NGO Forum, it is evident that CSOs: are weak organizationally and under-resourced; are incapable of having significant impact on political issues and development policies; many have poor or no plans and budgets; have inadequate skills required to perform identified tasks; and mainly operate in isolation [from local government and fellow civil society organizations] or even in competition. These weaknesses were attributed to (i) the exploitation of CBOs by NGOs as their programme goal implementation conduits; (ii) the general poverty of group members; and (iii) the neglect by government to develop CBOs into important players in local development. All these inadequacies in CBOs, from which NASON draws its membership, inform on the interventions it can focus on.<sup>8</sup>

#### 3.5 Intervention focus

Over the next three years, 2004-2007, NASON will strategically position itself within the web of HIV/AIDS Control, Prevention, and Mitigation by providing a coordinating and facilitatory role to AIDS services organizations in Nebbi district. As an umbrella organization, taking up this niche must necessarily build legitimacy, credibility and acceptance by both its

<sup>6</sup> The core values are summarized as CARERS symbolized by the bold letters in the bulleted texts.

<sup>7</sup> These set codes are yet to be elaborated in a clear and succinct format so that they are easily understandable by, acceptable to and enforceable to members. The task will thus constitute part of what the executive committees must do.

<sup>8</sup> See Cwinyaai, W. et al (May 2001) *Report on Community Based organizations Inventory in Nebbi District*. Nebbi: AFARD; and Cwinyaai, W. et al (October 2003) *Report on Selected Community Based Organisations Capacity Self Assessment in Nebbi District*. Nebbi: AFARD.

member constituency and other partners. Given this stake, NASON aims at an operational goal that befits its mission and vision as stated below.

*Goal: A vibrant and sustainable NASON capable of coordinating and promoting ASOs in delivering quality HIV/AIDS services in the community*

Indicators

- An established and functional secretariat.
- A code of conduct established, popularized and being practiced.
- Operational guidelines formulated and in use.
- Annual action plan and budget are in place and being used.
- 60 ASOs registered and adhering to NASON values.
- ASOs delivering quality services.

**Strategic Objectives**

To achieve the above goal, a number of objectives (that is short term results) with accompanying activities will be pursued. These are outline hereunder.

**Objective 1: To provide relevant, reliable, and timely information to ASOs<sup>9</sup>**

Many ASOs are trapped in the 10 years back information they had started with without updates. This trap makes them ineffective, unable to face new challenges, and to keep afloat with current trends of debates and practices of HIV/AIDS prevention and mitigation. Thus, one of the vital strength in HIV/AIDS work is information. For NASON membership to effectively deliver the quality services expected of them, they need the information requisite for such a service delivery. ASO need to be updated with current findings – experiences, successes and failures. To avert this scenario, the following activities will be implemented.

*Activities*

- 1.1 *Conduct a baseline survey of ASOs.* In order to have a clearer picture of ASOs, NASON will conduct a baseline survey to establish where the ASOs are, what activities they are engaged in, what legal status they have, what linkages and operational capacity they have. The CDAs at the sub counties will be facilitated for this task. The result of the survey will help in mapping ASO related services, geographical gaps and advocacy with community development services department to facilitate local group actions in such areas.<sup>10</sup>
- 1.2 *Conduct research on best practices.* Over the plan period, NASON will research on what success and failure practices and factors are at play in the district. A case study approach of selected ASOs will be used. The annual best practices will be an eye opener for replication by or caution to other actors. This is fundamental because while awareness creation is important, without the accompanying positive change in attitudes and practices, given the dynamism of predisposing factors to infection and positive living, scarce resource utilization would not be yielding better result.
- 1.3 *Organize information sharing meetings.* NASON will annually organize one avenue for information sharing with member ASOs. This will provide opportunity for ASOs to explain in details, what they are doing, how they are doing it, what they consider strong and weak points as well as answer questions from other ASOs. The importance of this meeting is that it kindle the ASOs by popularizing their activities; enabling them to acquire guidance on how best to do what they are doing; meanwhile it also caution would be new entrants in a given approach to take care of the milestones thereis. This meting will be conducted in a cluster manner allowing for say VCT, PMCT, BCC actors to cross-fertile their experiences.
- 1.4 *Hold exchange visits to UNASO and a similar regional network.* To provide information needs exploring the best options available to collect, analyze, package, and disseminate information for various end-users. NASON executives will participate in two exchange visits to UNASO and one such district network in Western Uganda to learn how they are making positive stride in information management for HIV/AIDS.
- 1.5 *Publish local IEC/BCC/BP materials.* NASON will publish and disseminate quarterly local material in the form of posters, brochures, leaflets, newsletter, and newspaper cuttings for use at community levels through the ASOs as dissemination

<sup>9</sup> Such information includes AIDS programme, current facts on HIV/AIDS, success and failure stories, upcoming events, etc.

<sup>10</sup> Learning from the experience of the NGO Forum it is important that a team leader is hired to lead this process from inception to report dissemination.

agents. Further, annually 1 video documentary will be made with various shooting from what the member ASOs are doing and the final event will be the World AIDS Day celebrations.

- 1.6 *Participating in public events.* To popularize NASON and take its desired central position in the fight against HIV/AIDS, NASON will participate annually in World Aids Day, Women's Day, and Independence Day celebrations. During these days, NASON will reflect the role of HIV/AIDS in the agreed upon theme for the day. This will involve preparing few leaflets that mainstream HIV/AIDS into the theme and showing Nebbi's experiences. Further, during these days, support will be solicited for some ASOs (at most 2) on a rotating basis so that the district leadership is shown what is on the ground.
- 1.7 *Link NASON to UNASO and Action Aid Uganda website.* For NASON to be known by others, a discussion will be held with UNASO and Action Aid to have a portion of their website allotted to NASON. Once offered the web space, materials will be continually generated and uploaded onto these sites.
- 1.8 *Run radio programme and announcements.* In the event that NASON is faced with an upcoming event, the radio channel will be used to inform ASOs of the events. On few occasions will radio talk shows be held with other stakeholders such as local government departmental heads on programmes in their sector and how HIV/AIDS has (not) been integrated into those programmes.

**Objective 2: To mobilize resources for NASON membership activities**

To be effective, both NASON and ASOs need adequate resources –funds, skills, logistics, etc- in order to translate their plans into actions. Such resources are hard to come by. Many a times, ASOs have failed to implement their plans simply because they lack partial support. Building from the belief in self-reliance, NASON will help itself and member ASOs to sustainably engage in activities that will use more of local than external resources. Access to external resources will be seen as a complementary support. To do this the below activities will be executed.

*Activities*

- 2.1 *Human resource inventory.* In relation with activity 1.1, the baseline survey will include a human resource inventory aimed at assessing the personnel qualifications and competencies in ASOs. This will be part of the move to identify the human potential available locally and internally within the NASON constituency so that future activities are based on ASO skills cross-utilization.
- 2.2 *Membership contribution.* NASON will mobilize more membership from those ASOs who have not yet registered. Through this membership local contribution will be mobilized and will provide added funding base for NASON operations. Even within ASOs members will be encouraged to pay their annual subscription fee so that they are able to generate funds locally for their activities. Letters will be written to all members to honor their subscription obligations and where not followed, membership termination will be enforced.
- 2.3 *Public fundraising.* NASON will hold innovative public fund raising for specific activities. The public will be made aware of why and how of the fund raising. Radio spots will be made, leaflets posted and direct face-to-face movement to the public will also be done. This strategy will mainly be used for a one-off activity say generating funds for transporting participants for World AIDS day.
- 2.4 *Sharing logistics and skills.* A spirit of sharing will be popularized among ASOs. Where possible, members will be encouraged to share their logistics and skills so as to make effective each member and build a team spirit that will greatly reduce dependence on external resources.
- 2.5 *Fund seeking (through project proposal submissions).* NASON will also delve into fund seeking both for itself and its members. Project proposal will be written and funding sources sought. In the event that NASON generate a proposal for its members, the ASO involved will have a direct contact with the funding source so that the idea of NASON hiding or eating ASO funds does not arise.
- 2.6 *Lobbying local governments and donors.* NASON will also lobby local government at both district and sub counties as resource centers to integrate NASON/ASO plans into the district/sub county plan respectively. This move will require that NASON strategically gets informed of the practical local government planning cycle and informs all ASO members to actively participate in the process. NASON will also monitor the local government plan pledge for its membership once such a pledge is made so that the ASOs are not left out in the local government cash budget allocation.

**Objective 3: To monitor and evaluate ASO's HIV/AIDS activities**

Upholding the central coordinating role of NASON requires that it is in close touch with its members. NASON has to guarantee that members follow the code of conduct, deliver quality services and truly are where they claim to be. To do so, NASON needs to audit the operation of its members. The operations audit will however focus on HIV/AIDS activities such that it does not appear a trespass and domination of ASOs by NASON. This will help weed briefcase ASOs, build synergy between NASON and ASOs, ensure that NASON has trusted and accepted ASOs.

*Activities*

- 3.1 *Field visits to ASOs.* For NASON to uphold its integrity and code of conduct, visits (twice per annum per group) by executive committees will be made to look at the organization and its HIV/AIDS activities. This will also serve as a support visit that will also follow up training use and effectiveness. A minimum performance standard will be designed and this will provide a guiding principle for auditing the operation of ASOs. During such a visit beneficiary assessment will also be done to ensure that the ASOs are practically on the ground, recognized and appreciated by their clients.
- 3.2 *Collecting reports from ASOs.* NASON will quarterly collect plans, achievements, and challenges from the ASOs. This will be done on a simplified template designed for use of reporting. NASON will then consolidate the report and disseminate copies to various stakeholders. This will be the basis for generating an elaborate documentation of what NASON is doing and with what results.

**Objective 4: To lobby and advocate for HIV/AIDS friendly policies**

The notable centers of public policies are with government, traditional and religious leaders and donors. For instance, the current policy of USAID – AIM programme is constraining to smaller CBOs. The AIM application format is too rigid and demanding. In the church for instance, the tendency to uphold abstinence sanctioning the use of condoms; and in government lack of focus on PLWA makes it important for NASON to engage these actors in rectifying their constraining policies and/or formulating new ones where they are not in existence.

*Activities*

- 4.1 *Focused thematic advocacy/lobbying workshops.* NASON will hold such workshops as and when it is appropriate at both district and sub county levels. For instance, the need to have NASON and ASO plans integrated into the district/sub county plans will call for such a workshop with local government policy makers.
- 4.2 *Dialogue meetings.* While 4.1 above is a long-term venture with a broader target, in the short run NASON will hold dialogue meetings with other leaders such as religious and traditional leaders on how bad ways in our social and religious practices can be improved. This is important because most of these custodians of policies command a lot of respect and wield powers that their constituencies adhere to. Their design and execution of agreed upon modalities will increase avenue for better work of ASOs. For instance, if traditional leaders embarked on delayed sexual encounter (and with restricted number) the youth outside school can succumb quite easily just like for a priest to talk positively about a condom can increase condom use.
- 4.3 *Peaceful advocacy marching.* Unlike the wrong understanding of marching, NASON will hold peaceful demonstration marching by ASOs and well wishers as a sign of presenting its cause and interest on a given subject matter. This marching will be held with the acceptance of the police.
- 4.4 *Radio talk shows.* The ability to make a policy effective, acceptable and enforceable requires that it is understood by those it (will) affect. Such an approach demands that NASON hold a radio talk show to explain the policy position and its implication. During such a talk show it will be important to have one of the policy maker/implementer to deepen the policy explanations. People will also be encouraged to (phone) call in to ask questions.

**Objective 5: To provide adequate and relevant knowledge and skills for NASON membership**

For NASON to attain quality service it must build a competent ASO commensurate with its value of excellence and quality services. This should aim at ensuring that the ASOs have the competency in both managing themselves and their services. To do so, capacity building training will be required so that old capacities are updated and new ones built. However, this should be done on a needs-basis other than across the board approach and should be coordinated right from its inception to a follow-up stage such that what skills has not been adequately internalized and put to use can be beefed-up. To do so, the following activities will be pursued.

*Activities*

- 5.1 *Conduct ASO needs assessment.* A training needs assessment will be conducted for all ASO. This training needs assessment will also include a capacity self-assessment of the ASOs to understand their capacity strengths and weaknesses. This activity will be done on a one-by-one basis. Each ASO will be assessed independently and a report generated.
- 5.2 *Design of training manual.* From the report of 5.1 a one volume-training manual will be developed. A manual formulation team will be hired and the various aspects of the capacity gaps that require training will have a training portion in the manual. The object of having this one-size manual is to reduce the current tendency among many organizations engaged in training but without clear training contents. This reduces the quality of training and minimizes opportunity for training follow-ups.
- 5.3 *Conduct training of NASON leaders and ASO members.* NASON will conduct training to both its executives and ASO members in the various gaps identified. The training at ASO levels will be site based so as to promote interaction and frank discussions. Each ASO will receive a module equivalent to its gaps. Indicative estimates over the three years is that the training will cover:<sup>11</sup>
- 5.3.1 Management skills training in:
- Participatory leadership/governance skills – for 24 groups
  - Project/Programme design – for 30 groups
  - Financial management – for 52 groups
  - Human resource management (teamwork and conflict management) – for 30 groups
  - Communication skills and report writing – for 30 groups
  - Fund raising strategies – for 30 groups
  - Participatory planning, M+E – for 52 groups
  - Advocacy and lobbying – 30 groups
  - Policy analysis – 24 groups
  - Networking and coalition building – 30 groups
- 5.3.2 Technical skills training
- Facts on HIV/AIDS – for 24 groups
  - Counseling and community education – for 30 groups
  - Sexual Health and reproductive rights – for 20 groups
  - Succession planning and legal rights– for 24 groups
  - IGA selection, planning and management – for 40 groups
- 5.4 *Hold exposure visits.* To reinforce the ‘flip chart/manila’ based training, exchange and exposure visits will be held to encourage practical reality sharing. Inter ASO visits will be popularized internally within Nebbi. The ASOs will take full responsibility for this. External visits by good performing ASOs in other parts of Uganda will be the responsibility of NASON.
- 5.5 *Conduct training follow-up visits.* Ensuring that the imparted skills are functional at both ASO and NASON level requires that a follow-up visit is made to the trained beneficiaries to assess their practical use of the skills and if not to ascertain why not. However, for cost effectiveness, this will be integrated with the ASO monitoring visits.

**Objective 6: To strengthen NASON's networking and linkage capacity**

The realization of the above set objectives is dependent on the functionality and acceptance of NASON. This is because as a network, NASON needs to demonstrate and maintain a status of service delivery to its members who will on realizing the benefits accruing to them retain their membership and urge more new members to join. Striving to do so requires that NASON become known to its constituency and itself aware of its members. Besides, the implementation of NASON activities by the executives (who cannot account to itself) has to change. To do these, there is need to execute the following

*Activities*

- 6.1 *Establishing operational guidelines.* Organizational effectiveness depends on the systems and structures in place. With a fluid structure, NASON needs an operational guideline to help its operations (planning, financial control, asset management, human resource management and administrative standpoints). This will be developed in the first year by a hired consultant and will be discussed by the executives before approval by the general assembly.
- 6.2 *Establishing a functional secretariat.* NASON need to hire a qualified programme person who will coordinate all its activities as planned for by the executives. This person will be appraised in a participatory manner basing on her/his performance in view of the plan execution. The hired staff needs to be housed in a NASON office that will be furnished with basic furniture and equipments. A computer accessories and a motorcycle will be required.

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<sup>11</sup> These figures of groups are estimates. The true figure will be arrived at after the capacity needs assessment that should identify the training needs for all the groups especially in the areas where they are weakest.

- 6.3 *Membership mobilization.* That a number of ASOs are still not yet registered, there is need to mobilize their membership so as to increase the voice and resource base of NASON. Caution will however be taken to recruit viable and not briefcase ASOs. The application form will need to be scrutinized before acceptance of any ASO. Radio talk shows will be held to popularize NASON. Brochures will also be produced and distributed to various stakeholders.
- 6.4 *Regular meetings:* As per the constitutional requirements, NASON executives will need to meet quarterly to review progress and plan for the next quarter. In this meeting, reports from ASO operations will also be discussed meanwhile membership applications are also approved. A bi-annual general assembly will be held to keep members abreast of what is going on in NASON.

#### 4.0 FINANCIAL IMPLICATIONS

Over the 3-year period, the planned implementation will cost Ushs 365.4 million. Of this 17% will be raised locally from NASON membership contributions and in kind contribution of ASOs while 83% will be sourced from external agencies. The funds will be spent as follows: 36% in year 1, 45% in year 2, and 19% in year three. Cost minimization strategy will be used.

**Table 4 SUMMARY OF BUDGET ESTIMATE**

Codes	Cost centers	Total	Local	External	% share of total
1.00	Information sharing	83,459,500	0	83,459,500	23%
2.00	Resource mobilization	3,660,000	0	3,660,000	1%
3.00	Monitor ASO activities	11,041,200	3,960,000	7,081,200	3%
4.00	Advocacy and lobbying	19,112,500	650,000	18,462,500	5%
5.00	Capacity building training	176,686,400	53,520,000	123,166,400	48%
6.00	NASON Operations	46,760,000	0	46,760,000	13%
7.00	Management support	24,720,000	2,520,000	22,200,000	7%
	<b>Total</b>	<b>365,439,600</b>	<b>60,650,000</b>	<b>304,789,600</b>	<b>100%</b>

#### 5.0 IMPLEMENTATION PLAN

Below is the implementation schedule of the proposed activities. The administrative assistant will be directly charged with ensuring that the activities are implemented, resources permitting. His/her task will however depend on the ability of the executive committees to plan, review and mobilize resources. Importantly also is that fact that for some activities, consultants will be sources to work closely with NASON team (for internal skills building) meanwhile for other activities cross-utilization of NASON membership resources will be encouraged as much as possible.

**Table 5: Activity Plan**

Objective/Activities	2004/05	2005/06	2006/07
<b>Objective 1: To provide relevant, reliable, and timely information to ASOs</b>			
1.1 Conduct a baseline survey of ASOs.	X		
1.2 Conduct research on best practices annually; and impact studies (once).	X	X	X
1.3 Organize information sharing meetings.	X	X	X
1.4 Hold exchange visits to UNASO and a similar regional network.	X		
1.5 Publish local IEC/BCC/BP materials.	X	X	X
1.6 Participating in public events.			
- Women's day	X	X	X
- Independence day	X	X	X
- World AIDS day	X	X	X
1.7 Link NASON to UNASO and Action Aid Uganda website.	X		
1.8 Run radio programme and announcements.	X	X	X
<b>Objective 2: To mobilize resources for NASON membership activities</b>			
2.1 Human resource inventory.	X		
2.2 Membership contribution.	X	X	X
2.3 Public fundraising.	X	X	X
2.4 Sharing logistics and skills.	X	X	X

2.5 Fund seeking (through project protocols submissions).	X	X	X
2.6 Lobbying local governments and donors.	X	X	X
<b>Objective 3: To monitor and evaluate ASO's HIV/AIDS activities</b>			
3.1 Field visits to ASOs.	X	X	X
3.2 Collecting reports from ASOs.	X	X	X
<b>Objective 4: To lobby and advocate for HIV/AIDS friendly policies</b>			
4.1 Focused thematic advocacy/lobbying workshops.	X	X	X
4.2 Dialogue meetings.	X	X	X
4.3 Peaceful advocacy marching.	X	X	X
4.4 Radio talk shows.	X	X	X
<b>Objective 5: To provide adequate and relevant knowledge and skills for NASON membership</b>			
5.1 Conduct ASO needs assessment..	X		
5.2 Design of training manual.	X		
5.3 Conduct training of NASON leaders and ASO members.			
5.3.1 Management skills training in:			
• Participatory leadership skills	X	X	
• Project/Programme design		X	X
• Financial management	X	X	
• Human resource management (teamwork and conflict management)	X	X	
• Communication skills and report writing	X	X	
• Fund raising strategies	X	X	
• Participatory planning, M+E	X	X	X
• Advocacy and lobbying skills	X	X	X
• Policy analysis	X	X	X
• Networking and coalition building	X	X	X
5.3.2 Technical skills training			
• Facts on HIV/AIDS	X	X	
• Counseling and community education		X	
• Sexual Health and reproductive rights	X	X	
• Succession planning and legal rights		X	
• IGA selection, planning and management		X	
5.4 Hold exposure visits:		X	
5.5 Conduct training follow-up visits.	X	X	X
<b>Objective 6: To strengthen NASON's networking and linkage capacity</b>			
6.1 Establishing operational guidelines..	X		
6.2 Establishing a functional secretariat.	X		
6.3 Membership mobilization.	X	X	X
6.4 Regular meetings			
- Executive meeting	X	X	X
- Annual general meeting	X	X	X

## 6.0 MONITORING AND EVALUATION

For NASON to ably know its strategic plan implementation, it must track progress of all inputs and activities. It must also assess the beneficiary response to services offered by it to ASOs and by ASOs to their clients. Therefore, monitoring of progress will target at community, ASO and NASON levels. Any remedial actions so desired will also need to be based on a clear diagnostic study. The following will constitute the monitoring activities:

### 6.1 Periodic review meetings

Quarterly implementation reviews will be held at NASON level by the executives and some co-opted members. A cumulative bi-annual review meeting involving the general meeting will thus be held. This process of continuous assessment ensures that activities are implemented in line with the plan and regular updating done basing on lessons learnt. Resulting from these will be reports to the various stakeholders to inform and/or consult on progress and other related decisions.

### 6.2 Annual planning meetings

This 3-year plan requires an annual rolling action plan translation mainstreaming lessons learnt and emerging challenges. An annual planning meeting will be organised and attended by all stakeholders to review the annual progress and chart a new direction for the subsequent year. This will also provide a basis for an annual reviews and evaluation as well as reporting.



### 6.3 Reporting

The following reports will be submitted to the general assembly: Mid-year activity reports, Annual activity and financial reports; and annual audit reports. Copies of these documents will also be sent to other stakeholders.

### 6.4 Accountability to the population

The beneficiaries of the project will be involved in planning meetings and annual review /feedback meetings in addition to regular surveys and discussion during the course of the project. These are sessions where lessons are learned and avenues explored to ensure maximum beneficiary satisfaction within the constraints faced by the project. Involving other key stakeholder such as Local Government in these sessions will provide a continuation of the fight against HIV/AIDS even after the end of the project.

### 6.5 Annual audit

While NASON will delve into participatory impact monitoring methodology. It is expected that the annual audit will merge both financial, physical and community views – an independent perspective, which will then feed into the annual planning process.

The success of all these monitoring activities requires that:

- A clear annual workplan and budget is developed.
- Activity, progress and annual reporting formats are designed and put to use.
- Systems for control of assets and funds are put in place.
- The code of conduct is enforced both internally and with ASO.
- Activity mainstreaming is given due attention.

ANNEX 1: PROJECT RESULTS AND MONITORING FRAMEWORK

Activities	Output	Effects	Verifiable Indicators	Tools
<b>Objective 1: To provide relevant, reliable, and timely information to ASOs</b>				
1 Conduct a baseline survey of ASOs. 2 Conduct research on best practices annually; and impact studies (once). 3 Organize information sharing meetings. 4 Hold exchange visits to UNASO and a similar regional network. 5 Publish local IEC/BCC/BP materials. 6 Participating in public events. - Women's day - Independence day - World AIDS day 7 Link NASON to UNASO and Action Aid Uganda website. 1.8 Run radio programme and announcements	<ul style="list-style-type: none"> <li>• 1 survey conducted</li> <li>• 3 best practices case studies conducted</li> <li>• 3 information sharing meetings held</li> <li>• 2 national exchange visits made</li> <li>• 1000 copies each quarterly of posters, leaflets, brochures and newsletters published</li> <li>• 6 attendances at 3 national days annually made</li> <li>• 1 web space accessed</li> <li>• 12 radio spots ran</li> </ul>	<ul style="list-style-type: none"> <li>• Increased awareness about HIV/AIDS disease and services</li> <li>• Increased access to and use of HIV/AIDS services</li> <li>• Increased participation of ASO in NASON and HIV/AIDS activities</li> </ul>	<ul style="list-style-type: none"> <li>• # reporting 3 correct causes and prevention of HIV</li> <li>• # using various services e.g. PMCT, VCT, PTC</li> <li>• # of ASOs emerging</li> </ul>	<ul style="list-style-type: none"> <li>• Review meetings with ASOs and beneficiaries</li> <li>• Health report</li> <li>• NASON documentaries</li> </ul>
<b>Objective 2: To mobilize resources for NASON membership activities</b>				
2.1 Human resource inventory. 2.2 Membership contribution. 2.3 Public fundraising. 2.4 Sharing logistics and skills. 2.5 Fund seeking (through project protocols submissions). 2.6 Lobbying local governments and donors.	<ul style="list-style-type: none"> <li>• 1 inventory done</li> <li>• 60 members mobilized</li> <li>• 6 public fund raising held</li> <li>• 30 ASOs sharing logistics and skills</li> <li>• 20 lobbying sessions held</li> </ul>	<ul style="list-style-type: none"> <li>• NASON and ASO able to raise 30% of their resource needs locally.</li> <li>• ASOs up-scaling their activities</li> </ul>	<ul style="list-style-type: none"> <li>• % of ASO funds raised locally</li> <li>• # of ASO clients</li> <li>• % of local government funds allocated to ASOs</li> </ul>	<ul style="list-style-type: none"> <li>• Budget estimates of ASOs and NASON</li> <li>• Annual work plan and reports</li> <li>• Local government budget</li> </ul>
<b>Objective 3: To monitor and evaluate ASO's HIV/AIDS activities</b>				
3.1 Field visits to ASOs. 3.2 Collecting reports from ASOs	<ul style="list-style-type: none"> <li>• 60 visits made annually to ASO</li> <li>• NASON quarterly reports integrating 60 ASO reports</li> </ul>	<ul style="list-style-type: none"> <li>• ASOs complying with NASON code of conduct</li> <li>• ASOs delivering quality services to their clients.</li> <li>• Improved public image and acceptance of NASON</li> </ul>	<ul style="list-style-type: none"> <li>• # of ASO complying with code of conduct</li> </ul>	<ul style="list-style-type: none"> <li>• NASON reports</li> </ul>
<b>Objective 4: To lobby and advocate for HIV/AIDS friendly policies</b>				
4.1 Training in advocacy and lobbying skills. 4.2 Policy analysis: 4.3 Focused thematic advocacy/lobbying workshops. 4.4 Dialogue meetings. 4.5 Peaceful advocacy marching. 4.6 Radio talk shows.	<ul style="list-style-type: none"> <li>• 40 people trained in advocacy and lobbying skills</li> <li>• 3 policy analyzed and discussed</li> <li>• 3 workshops held</li> <li>• 19 dialogue meetings held</li> <li>• 3 marching held</li> <li>• 12 radio shows made</li> </ul>	<ul style="list-style-type: none"> <li>• Increased public and private support for ASOs and their clients</li> <li>• Acceptance and recognition of NASON by other stakeholders</li> </ul>	<ul style="list-style-type: none"> <li>• Political and market sector support to ASOs</li> <li>• Perception of government and private sector on NASON and AIDS</li> <li>• stakeholder participation in NASON activities</li> </ul>	<ul style="list-style-type: none"> <li>• NASON reports</li> </ul>
<b>Objective 5: To provide adequate and relevant knowledge and skills for NASON membership</b>				

<p>5.1 Conduct ASO needs assessment..</p> <p>5.2 Design of training manual.</p> <p>5.3 Conduct training of NASON leaders and ASO members.</p> <p>5.3.1 Management skills training in:</p> <ul style="list-style-type: none"> <li>• Participatory leadership skills</li> <li>• Project/Programme design</li> <li>• Financial management</li> <li>• Human resource management (teamwork and conflict management)</li> <li>• Communication skills and report writing</li> <li>• Fund raising strategies</li> <li>• Participatory planning, M+E</li> </ul> <p>5.3.2 Technical skills training</p> <ul style="list-style-type: none"> <li>• Facts on HIV/AIDS</li> <li>• Counseling and community education</li> <li>• Sexual Health and reproductive rights</li> <li>• Succession planning</li> <li>• Legal rights</li> <li>• IGA selection, planning and management</li> </ul> <p>5.4 Hold exposure visits:</p> <p>5.5 Conduct training follow-up visits..</p>	<ul style="list-style-type: none"> <li>• 1 needs assessment conducted</li> <li>• 1 manual (in 50 copies) produced</li> <li>• 396 groups trained in various skills</li> </ul>	<ul style="list-style-type: none"> <li>• Skills enhanced for client focused quality service delivery</li> <li>• ASOs have strong organizational systems and structures (able to plan, budget, write proposal, monitor its operation, check its leaders, and partner with others).</li> </ul>	<ul style="list-style-type: none"> <li>• # of ASOs with plan, and budget</li> <li>• # of ASO with prudent leadership and financial management systems</li> <li>• # of ASO members with skills to perform ASO tasks</li> <li>• beneficiary satisfaction</li> </ul>	<ul style="list-style-type: none"> <li>• Capacity assessment exercise</li> <li>• ASO visit reports</li> </ul>
<p><b>Objective 6: To strengthen NASON's networking and linkage ability</b></p>				
<p>6.1 Establishing operational guidelines..</p> <p>6.2 Establishing a functional secretariat.</p> <p>6.3 Membership mobilization.</p> <p>6.4 Regular meetings</p> <ul style="list-style-type: none"> <li>- Executive meeting</li> <li>- Annual general meeting</li> </ul> <p>6.5 Training in networking and coalition building.</p>	<ul style="list-style-type: none"> <li>• 1 operational manual produced</li> <li>• Office space hired; office equipped; an administrative assistant hired</li> <li>• 60 members mobilized</li> <li>• 12 executive meetings held and 3 GM held</li> <li>• 40 people trained in networking skills</li> </ul>	<ul style="list-style-type: none"> <li>• A strong and appreciated NASON with many committed members</li> <li>• A NASON that is known to ASOs (and donors)</li> </ul>	<ul style="list-style-type: none"> <li>• Regularity of Executive meetings</li> <li>• # of assets procured</li> <li>• # of members mobilized</li> </ul>	<ul style="list-style-type: none"> <li>• Minutes of meetings</li> <li>• Asset inventory</li> <li>• Member register</li> </ul>