THE REPUBLIC OF UGANDA

CAPACITY BUILDING STRATEGY 2006 - 2008

An Outline of the Approach and Process to be used in the Capacity Building of MGLSD, Districts and CSOs

(To ensure an effective national response to OVC and HIV prevention among youth)

MINISTRY OF GENDER, LABOUR AND SOCIAL DEVELOPMENT

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Abbreviations and Acronyms

CBO	Community-Based Organization
CBS	Community-Based Services
CC	Core Competency
CORE	Communities Responding to the HIV/AIDS Epidemic
CP	Competence Profiling
DOSA	Directions in Organizational Self-Assessment
GoU	Government of Uganda
ICRW	International Centre for Research on Women
ID	Institutional Development
IHAA	International HIV/AIDS Alliance
JHU	Johns Hopkins University (Bloomberg School of Public Health)
M&E	Monitoring and Evaluation
MGLSD	Ministry of Gender, Labour and Social Development
MTAC	Management Training and Advisory Center
NGO	Non-Governmental Organization
NOP	National OVC Policy
NSPPI	National Strategic Program Plan of Interventions
OCAT	Organizational Capacity Assessment Tool
OD	Organizational Development
OVC	Orphans and Vulnerable Children
PPU	Policy and Planning Unit
ROM	Results-Oriented Management
RT	Regional Team
ToT	Training of Trainer
TTAP	Training and Technical Assistance Plan
UPS	Uganda Public Service
USAID	United States Agency for International Development

Glossary of Terms

Capacity 'Capacity' is the organizational and technical abilities that enable an organization or community to mobilize and direct resources to achieve their objectives in accordance with their values.
Capacity has also been defined as the ability of individuals and organisations or organisational units to perform functions effectively, efficiently and sustainably. This implies that capacity is not a passive state but part of a continuing process and that human resources are central to capacity development. (UNDP, 1998). Capacity building consists of three basic elements (Alaerts et.al., 1991):

1. The creation of an enabling environment with appropriate policy and legal framework
2. Institutional development, including community participation
3. Human resources development and strengthening of managerial systems

Capacity building 'Capacity building' is the approaches, strategies and methodologies that organizations use to improve their performance in resolving issues and challenges.

Capacity building also refers to activities that improve an organization's ability to achieve its mission or a person's ability to define and realize his/her goals or to do his/her job more effectively. For organizations, capacity building may relate to almost any aspect of its work: improved governance, leadership, mission and strategy, administration (including human resources, financial management, and legal matters), program development and implementation, fundraising and income generation, diversity, partnerships and collaboration, evaluation, advocacy and policy change, marketing, positioning, and planning. For individuals, capacity building may relate to leadership development, advocacy skills, training/speaking abilities, technical skills, organizing skills, and other areas of personal and professional development. Capacity building is a long-term and continuing process

Strategy Strategy has been defined in many different ways by various management gurus. For our purposes strategy could be defined by any of the following statements:

- Strategy is that which top management does that is of great importance to the organization.
- Strategy refers to basic directional decisions, that is, to purposes and missions.
- Strategy consists of the important actions necessary to realize these directions.
- Strategy answers the question: What should the organization be doing?

Strategy answers the question: What are the ends we seek and how should we achieve them?

Competence Competencies are general descriptions of the behaviour or actions needed to successfully perform within a particular [work] context (e.g. job, group of jobs, function, etc). i.e. 'planning is a competence that he lacks'

Competency Competency refers to the level of competencies. i.e. 'his competency in planning leaves a lot to be desired'

Core competencies Core Competencies (CC) are the set of the most strategically significant and value-creating knowledge, skills and attitudes within a discipline, a service, or an organization.

Competency profiles A "competency profile" is defined as a set of competencies and includes associated behaviours that link directly to the work to be performed, as well as the levels of proficiency for each behaviour. Usually there are several competencies (5 -10) for any given position. This profile or set of competencies is specific to a job or group of jobs. With valid, fair and unbiased competency profiles, management can recruit, select, train, develop and reward employees in a manner that is consistent with the strategic vision and objectives of the organization. Therefore, any investment an organization makes in competency profile development has benefits far beyond the usefulness of the results.

Competency profiling Competency profiling refers to a process of identifying competency profiles.

Composite score A composite score represents a measure arrived at via some empirical aggregation of a number of economic, social and political variables. Although composite scoring was originally used to measure and compare degrees of social and economic development, the concept is now becoming widely used in institutional/organizational development measurement and comparison. In measurement of ID/OD, empirical aggregation of a number of carefully selected ID/OD variables is done.

Composite scoring/indexing Composite scoring/indexing entails the aggregation of any number of carefully selected ID/OD indicators. Composite indexing involves four basic steps, i.e. selection; scaling; weighting and aggregation; and validation. The steps of composite indexing do not necessarily follow in this sequence.

Systems Very simply, a system is a collection of parts (or subsystems) integrated to accomplish an overall goal (a system of people is an organization). Systems have input, processes, outputs and outcomes, with ongoing feedback among these various parts. If one part of the system is removed, the nature of the system is changed. One of the major breakthroughs in understanding the complex world of systems is systems theory. The application of this theory is called systems analysis. One of the tools of systems analysis is systems thinking. Very basically, systems-thinking is a way of helping a person to view the world, including its organizations, from a broad perspective that includes structures, patterns and events, rather than just the events themselves. This broad view helps one to identify the real causes of issues and know where to work to address them.

Procedures Procedures can basically be defined as a set of established forms or methods for conducting the affairs of an organized body such as a

business, club, or government.

Tools Something used in the performance of an operation. It is an instrument regarded as necessary to the carrying out of one's occupation, profession or given task

1 Introduction

Background

CORE Initiatives Uganda is a 4-year project supporting the Ministry of Gender, Labour and Social Development's (MGLSD) efforts to lead, manage and coordinate the national response to Orphans and other Vulnerable Children (OVC) and HIV prevention among youth. Its purpose is to expand targeted HIV/AIDS services for youth and critical services for orphans and other vulnerable children by strengthening partnerships between the Government of Uganda (GOU) and civil society, including faith-based and community-based organizations. The Project is funded by USAID.

Specifically, the CORE Initiatives Project will enable MGLSD to:

- Effectively lead, manage, coordinate, monitor and evaluate the national response to orphans and other vulnerable children and HIV prevention among youth;
- Expand the availability and quality of services for orphans and other vulnerable children; and
- Expand the availability and quality of HIV programming with youth.

CORE Uganda is led by CARE International Uganda (CARE Uganda). Other partners in the consortium include the International HIV/AIDS Alliance (IHAA), the International Centre for Research on Women (ICRW) and Johns Hopkins University Centre for Communications Program (JHU-CCP).

In order to achieve the project objectives, CORE Uganda's respective partners are implementing the following strategies:

- Grant-making, led by CARE International;
- Capacity-building, led by the Alliance;
- Advocacy and communication, led by JHU-CCP; and
- Monitoring & evaluation, led by ICRW.

Capacity needs assessment

A Capacity Needs Assessment (CNA) was planned, organized and conducted under the auspices of the MGLSD CORE Initiatives Project. The purpose of the assessment was to determine MGLSD and district management and operational capacity needs in providing leadership and coordination, and monitoring and evaluating the national response to OVC and AB/Y. The findings from the assessment formed the basis for developing this capacity building strategy for MGLSD and districts.

Capacity building issues

This capacity building strategy, to guide the capacity building process in the CORE Project, has been developed to address the following issues, namely the:

- Scope of the capacity building mandate, given the need to build capacity across the four different areas of work of the CORE Initiative, three of which fall under the respective responsibility of the three other CORE partners, and what this means for specific collaborations with these partners;
- Scale of the capacity building mandate, given the rapid pace and scale up of the granting component of CORE Uganda
- Coverage of the capacity building mandate, given the need
- Complexity of the capacity building mandate, given the decentralized public sector environment, fragmented national response to OVC and youth HIV prevention issues, and the challenges of government-CSO

relationships; and

- Measuring progress and success, especially in relation to the impact of the capacity building interventions on the quality as well as the quantity of work with youth, orphans and other vulnerable children

Strategic Plan

This document sets out the strategy to be implemented to build and strengthen capacity for providing leadership, coordination and operational oversight at the central, regional, and district levels under the CORE Initiatives Project. Based largely on the capacity needs assessment conducted in 2005, the strategy also derives from the original CORE Project proposal and reflects the thinking and concepts presented in that document.

Findings from the capacity needs assessment reveal the range and magnitude of needs to be addressed at the various levels in relation to the required core competencies as well as various organizational systems, procedures and tools. Given constraints of cost and other demands, the needs have had to be prioritized focusing on the key areas necessary to achieve CORE Initiative results over the next three years. In these areas at the various levels, the aim is to bridge the gaps in performance and functioning, to facilitate progress towards achieving the desired results. CORE and MGLSD will take the lead in the implementation of this plan supported by external resource persons and organizations.

2 Capacity Assessment

2.1 Public Sector

Purpose In late 2005, MGLSD/CORE staff conducted an assessment of public sector capacity at central and district levels to provide leadership, planning, coordination and evaluation of the national response to the needs of orphans and other vulnerable children and for HIV prevention with youth. The purpose of the assessment was to identify the capacity building needs that CORE must address in order to enable MGLSD to drive this national response. For this reason, a general assessment of the district capacity needs was done as opposed to individual district assessments.

Focus The assessment focused on the following areas of public sector activity:

- Management, Planning and Coordination
- Monitoring and Evaluation/Quality Assurance
- Advocacy and Communication
- Grants Management

Process The assessment team designed and used a modified competency profiling tool to collect data from offices directly related to OVC and youth HIV prevention in MGLSD and the districts. The following offices were identified as being directly related and were assessed using the tool.

MGLSD

- Directorate Gender and community development
- Department of youth and children
- OVC Secretariat
- Policy and Planning Unit (PPU)
- Department of Labour
- Personnel Office

District

- District Community Based Services Directorate or District Community Development Office
- Probation and Welfare Office
- Community Development Office
- Community Development assistant

The assessment was carried out in the following districts: (Kapchorwa (*East)*, Masaka (*Central)*, Gulu (*North);* and Bundibugyo (*West)*.

A guided questionnaire was developed to interview other key respondents (who were not targeted for competency profiling) from the MGLSD, other ministries, bilateral and multilateral agencies, NGOs, CBOs and Local Government officials. Information from these respondents was used to complete the capacity needs picture and to triangulate information from competency profiling.

Appendix 1 provides a more detailed description of the methodology used in this public sector capacity assessment.

2.1.1 Assessment Findings

The table below presents a summary of the key findings from the public sector capacity assessment.

On coordination *Capacity for clear OVC and Youth HIV prevention administrative and coordination structures and technical/administrative roles and responsibilities*	**General -** Need to orient personnel in the NIU and all OVC-related departments and units on the 'Report on Restructuring of the MGLSD' with focus on the roles, strategic objectives, the key functions and key outputs **Central (MGLSD) -** Need to: • Establish the NIU within MGLSD; • Draw a specific, measurable and time-bound agenda for the NOSC and TRC and develop operational guidelines to integrate NOSC and TRC operations into the general MGLSD functions. NOSC to ensure inter-ministerial coordination. • Establish an MGLSD interdepartmental coordination mechanism; and • Build required competencies for those involved in coordinating mechanisms. **Districts -** Need to: • Establish a district/sub-county/CSO OVC coordination mechanism • Develop systems/procedures and/or tools to facilitate operations of the coordination mechanisms at both district and sub-county levels; and • Build required competencies for those involved in coordinating mechanisms.
On planning *Capacity for effective multi-sectoral planning to address OVC and Youth HIV prevention issues*	**General -** Need to: • Create awareness of magnitude and complexity of OVC issues among those involved in the planning and budget approval process at national, district and sub-county levels; • Strengthen planning skills (general and multi-sectoral OVC); • Develop a system to collect, analyse and disseminate integrated OVC data for purposes of OVC planning by stakeholders in general and the instituted MGLSD and district OVC coordinated planning bodies in particular; • Develop an effective and safe partnership mechanism with districts; • Align annual budgets to sector and district development plans through strengthening planning skills **Central (MGLSD) -** Need to develop a functional and sustainable OVC multi-departmental planning process. **Districts -** Need to develop a functional and sustainable OVC multi-departmental planning process
On leadership *Capacity to accomplish desired goals through efficient and effective use of resources including the human resource*	**General -** Need to develop basic leadership and management skills: **Central (MGLSD) and Districts -** Need to develop MGLSD staff and Community-based Services Officers' competency to assess and lead sector performance in general and the NSPPI implementation in particular. This includes building of management and OVC technical core competencies for implementation of OVC programming (See appendix 3).
On staffing *Capacity for efficient and effective human resources to manage OVC and AB/Y programs*	**General -** Need to: • Provide detailed job descriptions to all newly recruited staff at start of job; • Induct all new staff in the first three months of employment; • Develop supportive line management attitudes and skills; • Carry out regular support supervision; and • Develop HRD plan at MGLSD and District levels. **Districts -** Need to develop an appropriate tool to assess candidates for recruitment into the district community development sector.

On comm. & advocacy	**General -** Need to: • Develop an electronic and print infrastructure and operational guidelines to improve organizational communication within the MGLSD and the districts; • Develop systems for disseminating policies, guidelines and other resources for implementers, i.e. a dissemination plan that accounts for the needs of stakeholders at the national, district, sub-county, parish and community levels; • Support MGLSD, district social services sector and NGO/CBO staff to disseminate key information to stakeholders (including policies, guidelines, and standards for OVC and AB/Y programming); and • Build necessary competencies for effective organizational communication and advocacy. **Central (MGLSD) -** Need to: • Develop an OVC/ABY communication and advocacy strategy for MGLSD to address the following issues; and • Develop a specific strategy to improve visibility and positioning of MGLSD.
On granting & resource mobilization	**Central (MGLSD) -** Need to establish a long-term granting mechanism for MGLSD **Districts -** Need to: • Establish an effective OVC and AB/Y district coordination mechanism; • Establish a functional OVC AB/Y district granting mechanism; • Establish a CSO/District reporting mechanism; • Develop a district OVC AB/Y CSO support supervision mechanism and tool; and • Develop a district OVC AB/Y CSO reporting mechanism and tools.
On monitoring & evaluation	**General** - Need to develop a National OVC MIS to cover MGLSD, districts, sub-counties, parishes and households. There is also a need to develop a performance monitoring system and plan that aligns MGLSD and District performance measurement to the ROM based performance measurement, the NSPPI and the Local Government performance system. **Districts** - Need to: • Improve the logistical support to district, sub-county and parish staff including equitable access to the existing computers; and • Build the M&E competencies of the district and sub-county staff.

2.2 Civil Society Sector

Purpose

In late 2005, CORE staff under the leadership and guidance of the Technical Advisor, conducted an assessment of civil society capacity to implement and evaluate projects that address the needs of orphans and other vulnerable children and for HIV prevention with youth. The purpose of the assessment was to:

- Identify capacity strengths and gaps/needs of CSOs;
- Generate baseline information/data to guide support supervision, monitoring and evaluation;
- Initiate the process of capacity building through an understanding of capacity building gaps/needs;
- Generate commitment towards addressing identified gaps/needs; and
- Draw capacity building action-plans to guide capacity building interventions with CSOs.

Process

The capacity assessment process used an approach based on facilitating a self-critical reflection on issues and questions affecting organizations at various levels. The assessment team used participatory tools with CSOs to examine existing strengths and gaps across a range of capacity areas and to identify priorities to be strengthened. This participatory process of assessment enabled organizations to describe their current situation, draw lessons and strategize to do things differently for change and improvement.

The assessment process, involving a broad participation from policy makers, management and staff of CSOs, also helped to generate a commitment to addressing emerging capacity gaps. This sense of ownership and commitment was ensured through an assessment process that emphasized self-identification and prioritization of capacity strengths and gaps/needs without external influences and impositions.

Facilitated capacity assessment workshops were conducted with individual grantee CSOs for a period of 1-2 days each. The capacity assessment workshops were attended by representatives of the Board, management and staff up to a maximum of 15 participants.

Focus: OVC grantees

Capacity assessments were conducted between November 2005 and January 2006 with eight grantee civil society organizations implementing activities with orphans and vulnerable children. Six of the CSOs assessed were NGOs and two were Faith-Based Organizations (FBOs). The CSOs implemented OVC activities in a total of 28 districts targeting an estimated number of 25,945 OVCs and 4,500 men and women.

The assessment team looked at grantees that were implementing OVC activities in the three key technical intervention areas, including programs that:

- *Integrate* HIV/AIDS prevention care and support services into one or more core program areas (CPAs) in underserved districts;
- *Assist* MGLSD in strengthening Child Protection services;
- *Strengthen* the capacity of civil society organizations (national non-governmental organizations, FBOs and CBOs) to plan, provide, manage and sustain OVC services.

The assessment looked at technical capacity to be effective in the following areas of OVC service delivery:

- Psychosocial support
- Child participation
- Child protection
- Socio-economic security

The assessment also looked at the organizational capacity of OVC CSOs to work efficiently and ethically toward their goals and objectives. For a full description of the assessment methodology see Appendix 2.

Focus: Youth HIV prevention grantees

Capacity assessments were conducted between August and October 2005 with 11 grantee CSOs implementing HIV prevention activities with youth. Seven of the CSOs assessed were NGOs and four were FBOs. The CSOs implemented activities in a total of 34 districts targeting an estimated number of 197, 800 youth, 38,356 women and 36,630 men. The assessment team looked at grantees that were implementing youth HIV prevention activities in the three key technical intervention areas, including programs that:

- *Target* primary and secondary abstinence and behavior change among youth aged 10-19 years;
- *Address* cross generational and transactional sex; and
- *Reduce* the risk of HIV infection among the engaged and newly married.

The assessment team focused on the following key strategies and activities implemented by the CSOs in their work:

- Community mobilization and outreach
- Training in life skills
- Youth clubs (such as stay alive clubs; anti-AIDS clubs)
- Training peer educators & counselors
- Media campaigns
- Youth role models
- Youth work camps
- Music dance and drama
- Video shows
- Parent-to child communication
- VCT
- Sensitization/awareness creation
- BCC/IEC materials development
- Training of trainers (TOT)
- Needs assessment/baseline surveys
- Advocacy
- Counseling and guidance
- Youth referrals
- IGAs for youth

2.2.1 OVC Grantee Assessment Findings

The table below presents a summary of the key findings from the capacity assessment with OVC grantees.

On technical capacity	**Socio-economic security** • Limited skills in micro-enterprise development; • Limited financial resources to institute IGAs for OVCs and their households; • Limited follow-up on OVCs who complete artisan training **Psychosocial support** • Limited skills in psychosocial support (life skills, child communication & counseling, play therapy, will-making, memory books preparation and integrating HIV prevention in psychosocial support). **Child participation** • Limited skills & tools in enhancing child participation; • Lack of mechanisms for accountability to OVCs, their households and communities; • Community beliefs and attitudes hinder child participation **Child protection** • Lack of skills to enhance social support & protection for OVCs • Project staff, communities and caregivers are not sensitized on child laws, child rights and the need to protect OVCs
On organization capacity	**Gender analysis & planning** • Lack of skills in gender analysis and planning • Lack of gender policy and resource materials • Gender not mainstreamed into policies, activities/programs and approaches **Monitoring & evaluation** • Limited M&E skills for project staff • Lack of a comprehensive M&E system (data collection, analysis + retrieval)

	• Limited documentation and sharing of lessons and best practices **Personnel management** • Limited skills in Human Resource Management • Unclear staff roles and responsibilities • Lack of policies—volunteer management; staff training/development; HIV/AIDS at workplace, staff recruitment and appraisal
On organization capacity (continued)	**Resource mobilization** • Lack of skills in and plans for resource mobilization • Over-dependence on external funding (donors) **Community mobilization, participation & involvement** • Limited community mobilization skills • Lack of community mobilization strategy • Minimal participation of communities/target group in decision-making and setting direction of CSOs (accountability) **Networking, linkages and collaboration** • Limited skills in, and lack of strategy for, networking and collaboration • Limited networking, collaboration and information sharing (minimal linkages with corporate sector) **Advocacy and communication** • Lack of skills in and strategy for advocacy and communication • Lack of IEC materials and those available are not pre-tested before use • Advocacy and communication activities are not well defined, not linked to NOP/NSPPI and not based on research and audience analysis **Grant making to CSOs/CBOs** • Lack of skills in grant making/management • Sub-granting mechanism is not documented and formalized • MOUs with sub-grantees are not finalized • Poor financial accountability by sub-grantees leadig to late disbursements

2.2.2 Youth HIV Prevention Grantee Assessment Findings

The table below presents a summary of the key findings from the capacity assessment with Youth HIV Prevention grantees.

On technical capacity	Inadequate skills in: • Guidance and counseling; • Life skills & peer education; • BCC approaches; and • HIV/AIDS and Sexual and Reproductive Health (SRH) education. Limited access to technical resources and knowledge in the above key areas.
On organization capacity	**Administration & Human Resources** • Current Strategic Plans are not in place • Lack of consolidated work-plans and budgets • New staff, field staff and volunteers are not well inducted into vision, mission and values • Lack of policies and procedures: volunteer management, HIV/AIDS at workplace, staff training, salary structure, performance appraisal **Program management, M&E and Reporting** • Lack of a comprehensive M&E system that ensures data collection, analysis,

storage and retrieval

- Needs identification, project design and evaluation do not sufficiently involve communities and other stakeholders
- Timely and quality reports are not produced for various stakeholders
- Limited documentation and sharing of lessons and best practices

Partnerships, Linkages and Networking

- Limited collaboration and sharing experiences among NGOs and other development partners
- Collaboration and networking among NGOs and other development partners is not formalized and strategic
- Referral system for youth is not formalized

Community ownership and accountability

- Limited participation by youth and other affected communities in decision-making, staffing and all stages of the project cycle

Communication, Advocacy and Lobbying

- Advocacy activities are poorly defined (obscured by service delivery)
- Lack of advocacy and communication strategy
- Lack of IEC materials for advocacy work
- Limited research and audience analysis to back up advocacy and communication work

3 Strategic Approach

Build capacity at the District level

Given the Government of Uganda's emphasis on decentralization within the public sector, this strategy focuses not only on building the capacity of MGLSD at the central level, but also on capacity at the District and sub-County levels to plan, manage, coordinate and evaluate the response to the needs of orphans and other vulnerable children (and HIV prevention for youth). It is at the level of local government, in District administrations down to parish structures, that the effectiveness and sustainability of this response will be determined.

This strategy not only, then, confronts significant challenges in terms of the capacity building needs identified, but also the scale of a capacity building effort which seeks to establish the foundation for an effective OVC response across all the Districts of Uganda. To meet this challenge, the strategy will use an approach that combines the contracting of Technical Support Organisations (TSOs) and the creation of Zonal Teams who will co-facilitate district training and provide ongoing technical support to staff in all the Districts to carry out their mandated OVC functions. Building strong Zonal Teams at the regional level is necessary to achieve the required coverage. Strengthening national capacity in this way will enhance the sustainability of the OVC response. Page 17-18 provide more details on the Zonal Support Teams approach.

Strengthen structures as well as skills

Although training activities, focused on improving the core competencies identified in the capacity needs assessment, figure prominently, this strategy is also concerned with the need to strengthen key structures and processes for more effective planning, management and coordination. The strategy will focus on strengthening structures and processes within MGLSD, across relevant ministries and between government and civil society.

Much of this effort will be concerned with supporting and developing the work of existing structures, such as the OVC Secretariat and the National OVC Steering Committee, as well as working with the Community-Based Services departments in Districts to develop needed structures for planning, management and coordination at that level. Pages 15 and 19-21 provide more details on the approach to strengthening structures and processes at central and district levels.

Strengthen partnership between government and civil society

The CORE Uganda Initiative highlights the importance of greater collaboration and coordination between government agencies and civil society actors in mounting a more effective response to HIV/AIDS, referred to as public-private partnerships. This strategy, therefore, attends not only to the respective capacity building needs of central and local government on the one hand and CSOs on the other, but also on their mutual capacity to build and maintain these public-private partnerships with respect to the OVC response and HIV prevention for youth.

Again, the emphasis will be on strengthening relationships at the District level, in part through strengthening mechanisms for district level coordination of CSOs and in part by involving government officers, mostly at the district level, in CSO capacity building activities, as participants but also in some cases as trainers and technical resource persons.

Build technical and OD capacity

The capacity building assessments with government and CSO grantees identified not only a range of technical capacity building needs that are specific to work on OVC and youth HIV prevention issues. The assessment teams also highlighted a number of critical organizational development needs that are facing CSO grantees and administrative and managerial issues confronting government units and staff.

In response, this strategy will address both technical/programmatic and organizational/administrative capacity building needs. The strategy will use a mix of technical advice and guidance, hands-on technical assistance, training, coaching and mentoring, and facilitated technical exchanges through study/observation visits and sharing of experience and lessons.

Many communication and advocacy materials already exist in relation to supporting the development of OVC work and youth HIV prevention. For this reason, Alliance will work closely with JHU within CORE to collate, adapt and disseminate existing materials, emphasizing those materials already developed and adopted by GoU. Alliance will also draw on its own, innovative materials in developing OVC programming and gender and sexuality work with young people to further complement the materials already in use.

Enact rolling program of capacity building

In order to keep pace with the rapid scale up of CORE's CSO granting, as well as to achieve the scale required by district-level capacity building, CORE/Alliance will design and deliver a rolling program of technical and organizational capacity building.

For CSO grantees, the rolling program will comprise an intensive first year of capacity building inputs on prioritized technical areas specific to the needs of OVC and youth HIV prevention grantees respectively (see pages 29-35 for discussions of these priorities). These inputs will be delivered through workshops and follow-up coaching during site visits.

Organizational development needs, which are largely common across both OVC and youth HIV prevention grantees, will be addressed mainly through support supervision site visits, as well as a workshop on monitoring and evaluation that Alliance will develop in partnership with ICRW. After the first year, the intensity of capacity building inputs will be reduced, with the emphasis being placed on refresher trainings and the maintenance and application of learning. Page 32 provides more details on the rolling program for CSO grantee capacity building.

In relation to capacity building with central and local government, the contracted TSOs, with co-facilitation by the Zonal Support Teams, will implement a 10-day capacity building curriculum with district staff, delivered in two 5-day workshops addressing OVC technical and administrative/management issues respectively. This curriculum will be rolled out to all Districts and followed up with site visits by Zonal Support Team members to districts in order to provide on-site coaching and mentoring, and monitor the capacity building process. More details are provided in pages 17-18

Conduct ongoing learning & sharing

This strategy also recognizes the importance of creating opportunities for peer-to-peer learning and sharing. Annual Learning Exchange meetings will bring together CSO grantees from different RFAs to share experiences and lessons from their work on OVC issues and HIV prevention for youth. Where possible, Ministry and selected district staff will participate in these learning exchanges. In relation to work with the public sector, an annual meeting will be held with Ministry staff and all the Zonal Support Teams to

review and learn from the implementation of capacity building activities.

A certain number of districts will also be selected as Sites of Learning, in which intensive documentation, monitoring, analysis and reflection processes will be implemented in order to learn ongoing lessons about how best to translate capacity building inputs into improved outputs in OVC work at the district level. 'Sites of Learning' is discussed in more detail in pages 21 and 22.

Assure quality of work

In relation to quality assurance, CORE will emphasize the strengthening of M&E skills, as well as systems and tools, within its capacity building work with both CSO grantees and central and local government units. The detailed capacity assessments conducted in the development of this strategy have established a baseline against which progress can be measured.

Implementation of this strategy will involve third-party providers of technical assistance. In order to assure the quality of their work, clear deliverables will be specified in Terms of Reference, against which organizations and consultants will be required to report. Post-workshop evaluations will be used to assess the quality of implementation and findings will be used to refine their design and delivery. Support supervision site visits, to both districts and CSO grantees, will be used to assess the translation of capacity building inputs into improved outputs. An evaluation of the effectiveness of the whole capacity building strategy, designed and implemented by CORE, will be conducted in the final two quarters.

4 Result Area One: Public Sector

4.1 Objectives

The overarching goal of the CORE Initiative's capacity building strategy under Result Area One is that MGLSD capacity to effectively plan, manage, coordinate and evaluate the national response to orphans and other vulnerable children and for HIV prevention among youth is strengthened.

In order to achieve this goal, and based on the needs identified by the capacity assessment, the strategy will pursue the following objectives, namely to:

1. Strengthen needed structures, systems and tools within the public sector to plan, manage and coordinate the national response;
2. Improve the core competencies of government staff at central, district and sub-county levels to use these structures, systems and tools effectively;
3. Build technical and institutional capacity within MGLSD to implement a communication and advocacy strategy in support of the national response;
4. Build technical and institutional capacity within MGLSD to oversee an effective and sustainable grants administration mechanism; and
5. Build technical and institutional capacity within MGLSD to monitor and evaluate the national response.

A combination of a participatory approach (with MGLSD/Districts) and a technical input was used to determine the priorities that the capacity building process can handle in the given time and with the available resources. A list of the priorities in presented as Appendix 3.This list only covers the areas of planning, management and coordination.

Focus on OVC issues

It is clear that the strengthening of OVC planning, management and coordination capacities at central and district level follows from and is based on the development and completion of the NOP and the NSPPI. In the absence of such policy and operational guidelines with respect to youth HIV prevention, specific plans to build capacity to plan, manage and coordinate the national response to youth HIV prevention are premature. For this reason, this strategy focuses on public sector capacity with respect to coordinating the OVC response but will be subject to revision when the GoU has completed its process of developing policy and operational guidelines for youth HIV prevention work.

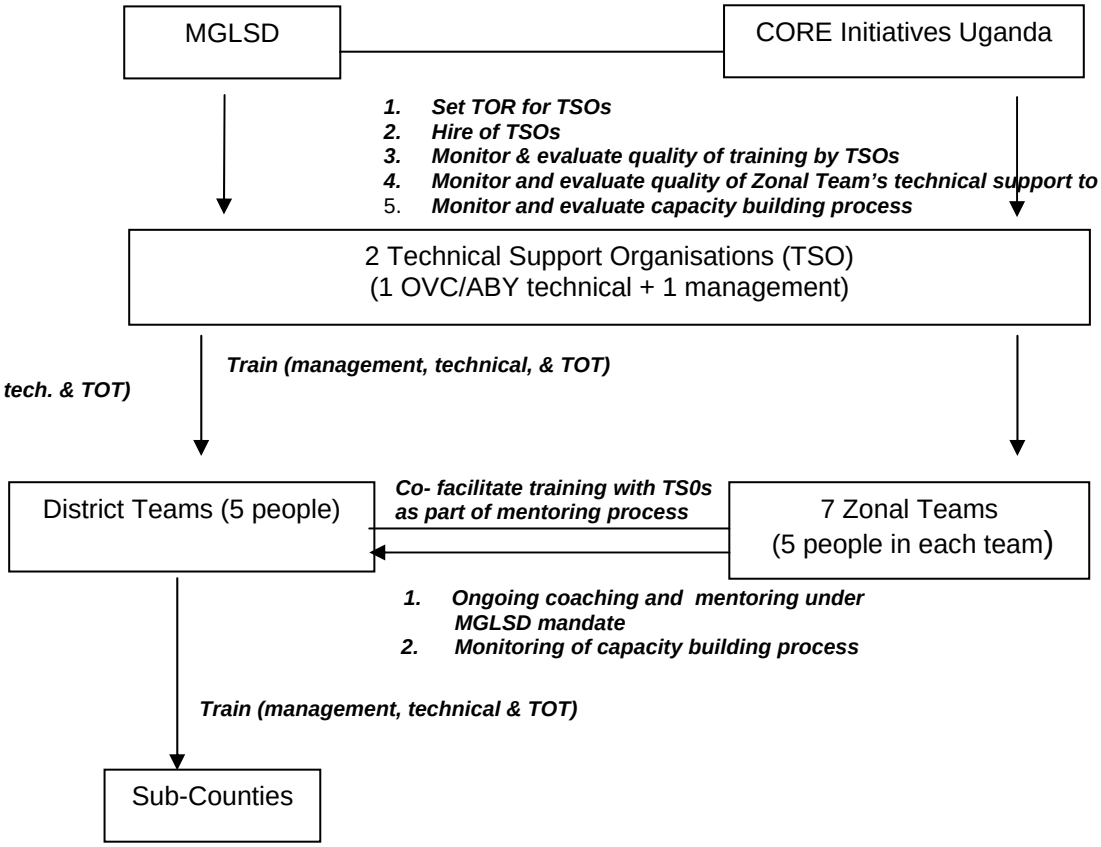
4.2 Activities

Capacity building activities directed toward the accomplishment of the fore-mentioned objectives will be targeted at the following points for strategic intervention:

- Central Government
- Technical Support Organisations (TSOs)
- Zonal Support Teams
- Local Government
- "Sites of Learning" in selected districts
- Nsamizi Training Institute

The diagram below shows the strategic points and their expected role:

Roles for the strategic capacity building intervention points



4.2.1 *CORE project*

CORE Project will plan, lead and coordinate the capacity building process. It's main role will include:

- Planning
- Provision of technical support for development of systems/tools, training.
- M&E (capacity building) and documentation

4.2.2 *TSOs*

Two TSOs will be hired by CORE. One TSO will have expertise in management and the other in OVC technical areas. Each TSO will be expected to provide two teams so that two training courses can be carried out simultaneously. The role of the TSOs will include:

- Development of identified systems/tools for MGLSD and districts (all centrally done to ensure standardization of district OVC service delivery). See Appendix 3.
- Building the priority competencies of the seven Zonal Teams
- Building the priority competencies (see Appendix 3) of identified

officers at MGLSD and districts

4.2.3 *MGLSD*

Inter-department coordination within MGLSD

Inter-departmental coordination of OVC activities is currently hampered by the following challenges:

- Responsibility for OVC issues is spread across several Directorates and departments (child protection; street children; children in residential care; children beyond parental care; children within the juvenile justice system and so on)
- MGLSD does not have an OVC department - it has a Department of Youth and Children that has an OVC Secretariat;
- Resource constraints have meant that the recommendation to create an OVC National Implementation Unit within MGLSD that will sit above all Departments and will co-ordinate their OVC-related work has not been implemented (and there is no provision to create an OVC NIU within the new MGLSD structure); and
- Current OVC coordination efforts, through Directorate meetings that gather all relevant departments, are hampered by a lack of planning or consultation between different departments prior to the Directorate meetings.

Planned activities

To address these challenges, it is planned that by the end of the 4th quarter of year 05/06, CORE/Alliance will:

- Organize and facilitate a one-day planning meeting with senior staff to discuss options for inter-departmental OVC coordination, including the possible use of the Sector Working Group as a coordination mechanism;
- Develop, with contracted TSOs, a proposal on the structures, systems and tools that will improve inter-departmental coordination within existing resource constraints;
- Develop TORs for Zonal Support Teams to complement the MGLSD's role in supporting districts,

Over the remaining period of the Strategic Plan, the Alliance Senior Technical Adviser will provide mentoring support to MGLSD staff, and in particular the OVC Secretariat, to strengthen their implementation of coordination structures, systems and tools. CORE/Alliance will also:

- Organize a one day review workshop for MGLSD staff and other stakeholders every six months to support inter-departmental coordination; and

External Resource: Contracted TSOs

The Alliance will contract TSOs to provide specialist training, coaching and mentoring on management and OVC/AB/Y technical areas. The TSOs will provide technical assistance on several capacity building activities, including:

- Proposal development on inter-departmental and inter-ministerial OVC coordination; and
- Curricula development for training MGLSD staff and for use by Zonal Teams in supporting District level staff on needed core competencies;

The Alliance Senior Technical Adviser is finalizing a scope of work for the contracted TSOs and it is envisaged that a contract with TSOs will be signed by the end of the 3rd quarter of year 05/06.

- Provide at least three days coaching every six months for selected MGLSD staff on inter-departmental coordination issues.

Inter-ministerial coordination

Inter-ministerial coordination of OVC activities is currently hampered by the following challenges:

- MGLSD is currently not recognized as lead agency for OVC and AB/Y responses;
- MGLSD is currently not coordinating the work of the Ministries of Health, Education and Justice on OVC issues;
- While the National OVC Steering Committee (NOSC) and its Technical Resources Committee (TRC) have completed their initial mandate to develop the NOP and the NSPPI and have shifted their role from policy-making to implementation, their progress has been limited by resource constraints and a lack of clarity about their mandate with respect to ongoing inter-ministerial coordination of the OVC response; and
- In the absence of authorized allocations for OVC work, OVC issues do not receive the planning and subsequent resources that they require as an area of work.

Planned activities

To address these challenges, the following activities will be completed by the end of 2006 (the 1st Quarter of year 06/07),:

- An inter-ministerial OVC coordination study tour to a country in sub-Saharan Africa to learn from their experience in strengthening inter-ministerial coordination of responses to orphans and vulnerable children;
- Meetings with an inter-ministerial coordination working group to debrief the learning from the study tour and to identify options for OVC coordination in Uganda;
- Strengthening the NOSC and TRC for effective inter-ministerial OVC coordination (CORE in conjunction with MGLSD)

A two-day annual strategic planning workshop for the NOSC and other mechanisms that are established to ensure greater inter-ministerial OVC coordination will be organized by CORE together with MGLSD.

Core competency

The capacity assessment of the public sector identified a number of core competencies among staff, at ministry and district levels, in need of strengthening. Given the scale of the capacity building initiative envisaged by this strategy, there is still a need to set priorities for the core competencies on which capacity building activities will focus. This priority setting was done through a participatory process involving key staff in MGLSD and staff from 63 districts. (See Appendix 3 on priority areas identified)

Planned activities

Based on this set of priorities, CORE/TSOs will develop a training curriculum for MGLSD staff from the following units and departments:

- The Directorate of Gender and Community Development
- The Department of Youth and Children
- The OVC secretariat
- The Planning Unit
- Department of Labour
- Youths and Children Focused MGLSD bodies

The curriculum will comprise of two major elements. A five-day curriculum

will cover general management issues (see Appendix 3).

The curriculum will also cover ToT modules to enable MGLSD staff to be involved in training and supporting district staff. The second element will be a five-day OVC technical curriculum covering key priority issues (see Appendix 3).

Human resource development

MGLSD's capacity to plan and manage human resource development more effective emerged as a clear issue during the capacity assessment. TSOs will be tasked with proposing an HRD planning process for MGLSD, which will be finalized before the end of September 2006. This process will identify the human resources required by the MGLSD to carry out its mandate to lead the national response to the needs of orphans and other vulnerable children, as well as outlining the activities that will recruit, train and support these human resources.

4.2.4 Zonal Support Teams

Rationale

Building public sector capacity to effectively plan, manage, coordinate and evaluate the national response to orphans and other vulnerable children (and HIV prevention for youth) requires work with local as well as central government. Given the GOU decentralization arrangement, the Districts have become the key sub-national, decentralized units for the implementation of national policy. A truly national response to orphans and other vulnerable children therefore requires that capacity be built across all districts, in relation to identified gaps and needs.

Among the key outputs for MGLSD is technical support and guidance to districts and semi-autonomous bodies. Currently the Children and Youth Department has less than eight senior members of staff. Of these, only about three or four are available for this function. Capacity building is a continuous process that needs to be supported by a regular and effective support supervision process. In order to work at this scale, seven Zonal Support Teams will be formed, trained and supported, These teams will complement the MGLSD to monitor the capacity building process and to provide on-going technical support to district levels staff. The capacity of the Zonal Support Team members will be further built through their participation as co-facilitators in the training of district level staff by the contracted TSOs.

The strategy takes cognizance of the fact that zonal team members are part of district teams and may not be seen as appropriate for support supervision of fellow district staff. This issue has been discussed with MGLSD and it is agreed that the MGLSD will issue guidelines on this arrangement. The Ministry of Health experience with zonal teams will be relied upon when developing these guidelines. District training sessions, will provide an opportunity to make it clear that this arrangement is purely a facilitatory one and has nothing to do with hierarchy.

This use of Zonal Support Teams has been adopted because:

- MGLSD has limited human capacity to offer technical support to all districts as statutorily required
- It is more cost-effective (travel and per diems)
- More districts can be covered in less time
- It allows quarterly training evaluations and coaching/mentoring to be carried out in a more cost-effective manner.
- It is seen as a potential way of maintaining a sustainable pool of trainers who can be utilized by the MGLSD and other stakeholders

- It has been successfully used by MOH

Selection For this purpose, the country will be demarcated into seven zones/regions; Central, South East, North East, West, South West, North and West Nile. CORE/Alliance will ask MGLSD to identify five high performing officers from the district Community-Based Services departments from each region. These five officers from each region will constitute the seven Zonal Support Teams. It is envisaged that this selection process will be completed by the end of the 3rd quarter of year 05-06.

Role The role of the Zonal Support Teams will be to co-facilitate training (with hired TSOs) of selected officers in all 76 districts of Uganda (and any new ones that may be created during the project period). It is envisaged that the District Officers who will be trained and supported by the Zonal Support Teams will include:

- District Community Development Officer (head of department)
- Senior Community Development Officers (2)
- Senior Welfare and Probation Officer
- Senior Labour Officer
- Labour Officer

In addition to co-facilitating training, Zonal teams are expected to provide ongoing technical support to districts on a quarterly basis. Technical support will be for purposes of:

- Further building of the prioritised competencies and identification of other competence gaps
- Effective use of systems developed

CORE is aware that this is an ambitious plan, which faces a number of challenges, including existing workload pressure faced by Zonal Support Team members, the availability of staff to be involved to these teams and the risks to quality assurance posed by the model itself. To meet these challenges, the MGLSD staff together with contracted TSOs and CORE will play a critical role in not only training but also coaching the Zonal Support Teams in their work – see below for more on this. The involvement of senior MGLSD management will also be sought in order to secure the involvement of District Officers to the Zonal Support Teams as well as the commitment of their respective District Managers to enable them to carry out their duties as Zonal Team members.

Training The MGLSD, contracted TSOs and CORE will be responsible for training of the Zonal Support Teams. This training will be based on the curriculum used in the training of MGLSD staff (see above). The central training team will condense this material into a 10-day ToT curriculum, which will also include material on the operational guidelines for districts to implement their statutory responsibilities as well as guidelines on relationships with CSOs. This ToT curriculum will be delivered in two 5-day workshops, as follows:

- The first workshop will cover OVC planning, management, coordination and evaluation issues, as well as modules to improve the Zonal Support Team members' training skills. The 5th day of the workshop will be reserved for observed practice, in which each Zonal Support Team member will get the opportunity to present a piece of the curriculum to an invited audience (most likely Kampala division staff) and get feedback on their skills.

- The second workshop will cover OVC technical issues in relation to the Core Program Areas. Once again, the 5th day of the workshop will be reserved for observed practice.

It is envisaged that the central training team will complete this 2-workshop ToT process for Zonal Support Teams, most likely in two clusters (one cluster of four teams and one cluster of three teams), by the end of July 2006.

4.2.5 *Local Government*

Core competency

The two TSOs to be hired will be responsible for strengthening the core competencies of the selected District Officers to carry out their statutory functions, including the use of District-level structures and systems for enhanced OVC planning, management and coordination.

Planned activities

The two TSO teams will train all five officers (where they exist) from the Community-Based Services Department. Training will be done in clusters of five districts. Since there will be two TSO teams it will be possible to train two district clusters concurrently. District training has been phased in such a way so as to synchronise with the district granting process (see timeline on page 27).

Each cluster will receive two 5-day training workshops based on the curriculum used to train the Zonal Support Teams; the first workshop will focus on OVC planning, management, coordination and evaluation issues and the second workshop will focus on OVC technical issues. In order to foster closer working relationships between local government and civil society, CSO grantees will be invited to send participants to the OVC technical workshops that involve the officers of Districts in which the CSOs are working.

One of the days in each of the workshops will be devoted to supporting district staff in improving their own training skills and developing implementation plans for their training of staff from sub-Counties.

District Officers will be trained in the second 5-day workshop, on OVC technical issues. It is planned that all selected District Officers, in all 76 districts of the country, will have undergone 10 days of training in core competencies for an effective response to the needs of orphans and other vulnerable children by end of April 2007.

In each District, the group of trained officers will be expected to develop a 3-day OVC training curriculum for sub-County staff. It is important to note that the training at this sub-County level will not include the ToT component because sub-Counties are the lowest levels of the Community-Based Services Department and therefore have no onward training role.

These District Officers will then implement the sub-County training according to an agreed schedule over the remaining eleven months of this Strategic Plan (November 2007 to September 2008).

One-two Zonal Support Team members will observe at least one sub-County training every quarter in order to assess the quality of the training provided by District Officers in terms of content and training skills and give appropriate feedback in order to maintain or improve the quality.

In the 2nd quarter of year 07-08, all Zonal Support Team members and CORE/MGLSD team will convene for a 1-day progress review conference. This conference will be an opportunity to review monitoring data on the implementation of this training and mentoring strategy, identify and share lessons concerning good practice as well as discuss ways to address

emerging challenges.

District coordination

Strengthening planning, management and coordination of the response to the needs of orphans and other vulnerable children at the District level will involve addressing the:

Limitations of the District HIV/AIDS Committees: DHACs can play some coordination role related to the HIV/AIDS aspects of the OVC responses. But OVC issues are crosscutting and will go beyond the scope of the DHAC's remit.

Potential for the Community-Based Services department: The wide-range of social welfare services that fall under the remit of the CBS department makes it a better location for the District-level OVC coordination role. It is important to note however that the fact that the DHACs are health sector driven may make it difficult for the CBS department to influence them on OVC issues and coordination.

Potential for the District Planning Committee: There is some potential for the District Planning Committee to play a role in planning and monitoring at District level, and in coordination between the various departments of local government. Enhancing the role of the District Planning Committee would require that resources be directed toward District-level data collection on OVC issues (and youth HIV prevention).

At the moment, OVC planning at District level is based only on data from national surveys. The recent decision to allocate funds for OVC work within the Poverty Alleviation Fund, which makes for a large component of District funding, will facilitate greater resourcing of District-level coordination structures, systems and tools.

Lack of coordination between government agencies and civil society actors at District and sub-County levels: There is limited coordination of OVC planning and activities between local government and CSOs. Districts and CSOs have separate, parallel implementation plans related to OVC.

Planned activities

In order to address the challenges and opportunities outlined above, the following activities will be undertaken:

In August, (4th quarter of year 05-06), the CORE/Alliance, with the support of MTAC, will organize and facilitate a 2-day consultation meeting between MGLSD staff and ten selected Districts to adapt the central-level coordination mechanism for the District level. This adaptation will be based on a proposal to locate the responsibilities and resources for coordination within the Community-Based Services department in each District. It is proposed that an inter-departmental coordination committee be established within the CBS department and that this committee be responsible for:

- Coordinating the OVC response across the District (with the possibility of expanding this remit to include youth HIV prevention at the appropriate time), including not only coordination across local government units but also between local government and CSOs;
- Managing the provision of technical assistance to District and sub-County staff on OVC (and youth HIV prevention) issues;
- Monitoring the OVC response through implementation of an MIS system that is to be developed by CORE and MGLSD; and
- Reporting to MGLSD. In the absence of a National Implementation

Unit at central level, the committee could report to the Department of Youth and Children. It is important to note that in a decentralized context where districts report to the Ministry of Local Government, and not to MGLSD, the relationship between the CBS department and MGLSD remains to be clarified.

In order to foster stronger relationships between central and local government, and between the public sector and civil society, the Alliance Senior Technical Advisor will take the lead in developing operational guidelines targeting the respective stakeholders and their roles in the implementation of the NSPPI. These guidelines will be based on the recommendations of the NSPPI, findings from the capacity assessment, Ministry of Health experience in public-private partnership in health, and a consultation meeting with selected Districts and CSOs to be convened by the end of the 3rd Quarter of year 05/06.

4.2.6 Sites of Learning

Rationale

A key feature of this Strategic Plan will be its effort to identify, document, share and apply lessons on how best to strengthen capacity to plan, manage, coordinate and evaluate the national OVC (and youth HIV prevention) response. This effort will be critical in answering questions such as:

- Which capacity building approaches and activities are most helpful in developing the structures, systems and tools necessary for a more effective national response?
- Which capacity building approaches and activities are most helpful in maintaining the effectiveness of these structures, systems and tools?
- Which forms and frequencies of training, coaching and mentoring are most helpful in strengthening coordination between central and local government?
- Which forms and frequencies of training, coaching and mentoring are most helpful in strengthening coordination between local government and CSOs?

In order to answer these and other questions, some ten Districts will be selected to operate as Sites of Learning.

Operation

The Alliance Senior Technical Adviser, together with ICRW and MGLSD staff, will develop a set of documentation and learning tools and processes. These will emphasize the use of participatory approaches to gather, analyze and share qualitative data, as well as peer-to-peer learning processes. District Sites of Learning will:

- Fully integrate all CORE program components;
- Be trained and coached in the use of these tools and processes;
- Be funded to implement these tools and processes, as well as to organize and participate in intra-District and inter-District learning events;
- Meet quarterly with respective Zonal Support Teams to get support supervision in relation to the implementation of the documentation and learning tools and processes and to troubleshoot emerging problems; and
- Meet bi-annually with the central training team, who will assess and address the quality of implementation of the documentation and learning tools and processes.

It is important to note that "Sites of Learning" are serving an operational research function, as opposed to the operational demonstration function served by Model of Demonstration Sites. Those Districts that are selected to be Sites of Learning will receive the same level of financial and technical support for their OVC (and youth HIV prevention) activities as other Districts. The only extra financial and technical support they will receive will be specifically for the additional documentation and learning activities that they will be mandated to carry out.

Selection

Districts will be selected to be Sites of Learning on the basis of the following criteria:

- Demonstrated interest and commitment in strengthening its co-ordination and support supervision role vis-à-vis other departments, sub-county staff and the CSO sector;
- Potential to implement coordination role;
- Good rapport with MGLSD, the CSO sector and CORE;
- Presence of a minimum of two CORE CSO grantees;
- Ease of access for regional and central teams;
- Geographical distribution; and
- A mix of rural and urban districts.

Planned activities

A more detailed description of the Sites of Learning component of this Strategic Plan, and the selection of the ten Districts as Sites of Learning, will be completed by CORE/Alliance by the end of June 2006 (3rd Quarter of year 05/06). The Alliance Senior Technical Adviser will work together with ICRW and MGLSD to develop documentation and learning tools and processes during the first half of year 06/07.

Training and coaching for District staff in the use of these documentation and learning tools and processes will take place during the third quarter of year 06/07.

Sites of Learning will then become operational for the remaining 15 months of this Strategic Plan. Every quarter during this period, Zonal Support Teams will conduct support supervision site visits to their respective Districts to support implementation of the documentation and learning tools and processes and to troubleshoot emerging problems. Further quality assurance will be provided by the central training team, who will conduct bi-annual visits to the Sites of Learning to assess and address the quality of implementation of the documentation and learning tools and processes.

4.2.7 Nsamizi Training Institute

Rationale

The mandate of Nsamizi Training Institute is to train civil servants in community development. It is envisaged that Nsamizi Training Institute will play a role in public sector capacity building for a more effective national response to the needs of orphans and other vulnerable children (and HIV prevention for youth).

Nsamizi was selected as a strategic capacity building point for the following reasons:

- It was established to provide capacity building for the sector (MGLSD);
- It has an established infrastructure and an administrative structure;
- Compared to other aspects of community development, OVC issues have not taken a key position in the institute's training programs;

- It is flexible in its training curricular;
- It can be used to handle highly technical priority thematic areas/modules that the Zonal Support Teams cannot handle; and
- Its involvement in the capacity building process will ensure continuous capacity building after project period.

Role

The key role for Nsamizi Training Institute in this public sector capacity building project will be to develop and deliver specialized courses in OVC technical areas for ministry and district officials. These courses will address technical areas in more depth than will be possible in the training and mentoring provided by the Zonal Support Teams, and will be made available to public sector staff once the Zonal Support Teams have completed their training of district staff.

Planned activities

During year 06/07, CORE/Alliance together with MGLSD will support Nsamizi Training Institute in designing the training modules that will be offered as part of this capacity building strategy. These training modules will be implemented during year 07/08 for selected MGLSD and district Community-Based Services Department staff.

4.3 Outcomes

Monitoring and evaluation

A detailed M&E plan to evaluate the effectiveness of this strategy will be developed in collaboration with ICRW within CORE. As already noted, the in-depth capacity assessment has provided a baseline of information against which progress in strengthening structures, systems and competencies can be measured. Alliance will work closely with ICRW to ensure that public sector staff at central and district levels have the capacity to use and benefit from the MIS for OVC work that is being developed by MGLSD with the support of ICRW.

Alliance will also work closely with ICRW to develop a set of indicators that can be used to measure progress in building capacity with respect to planning, management and coordination. These indicators will be incorporated into M&E tools to be used by CORE/Alliance, MGLSD and the Zonal Support Teams to assess the effectiveness of capacity building interventions. Periodic support supervision site visits to districts will be used for performance measurement using the composite scale developed as a result of the capacity assessment. As already noted, an overall evaluation of this capacity building strategy will be undertaken in the final two quarters of the period of this strategic plan.

Outputs

Using the proposed strategy the following outputs will be achieved:

- 35 zonal OVC and youth HIV/AIDS prevention trainers
- At least 14 MGLSD staff with core competencies
- At least 316 district CBS staff with core competencies
- At least 1,170 sub-county CBS officers with core competencies
- Key mechanisms, systems and tools to support OVC (and Youth HIV prevention) initiatives made operational at central (MGLSD) and district levels

4.4 Timeline

3rd quarter 2005-06 work-plan	Mar		April				May				June				
	20-24	27-31	3-7	10-14	17-21	24-28	1-5	8-12	15-19	22-26	29-2	5-9	12-16	19-23	26-30
Finalize MGLSD capacity building strategy															
Develop a proposed scope of work for TSOs															
Put out RFAs for technical assisitance															
CORE/Alliance to review TSOs proposal															
Sign contract with TSOs															
TSO/CORE develop and agree on training curriculum (one curriculum for MGLSD, Zones and districts but adjusted as needs dictate). Training curriculum to cover management and OVC technical areas.															
TSO/CORE develop and agree on support supervision tools and processes: 1. MGLSD to district supervison 2. District to S/county supervision 3. District to TSO supervision															
Decision on number and location of Zonal Teams															
CORE identifies 10 Districts for Sites of Learning															
CORE/MGLSD recruits members of Zonal Teams															
CORE develops proposal for operating the Sites of Learning															
CORE/MGLSD reviews TORs for NOSC and TRC and developes two year operational plan for NOSC and TRC in a 2 day workshop with TRC (NOSC to fulfil the inter-ministerial OVC coordination function)															

CORE/MGLSD/TRC present draft operational plan to NOSC for approval in a 1 day workshop																
1 day meet with senior staff to discuss intra-MGLSD OVC coordination																
t4th quarter 2005-06 work-plan	July				August					September						
	3-7	10-14	17-21	24-28	31-4	7-11	14-18	21-25	28-1	4-8	11-15	18-22	25-29			
TSO/CORE finalizes mechanism for intra MGLSD coordination, based on ministry feedback																
TSO/CORE deliver 2 x 5-day management training/ToT workshops for Zonal teams (2 clusters)																
TSO/CORE/ delivers 2 x 5-day OVC/ToT workshop for Zonal teams (2 clusters)																
TSO/CORE deliver 5-day management training/ToT workshops for the ten contracted districts (2 clusters trained concurently)																
TSO/CORE/ delivers 5-day OVC/ToT workshop for the ten contracted districts (2 clusters trained concurently)																
TSO/CORE deliver 5-day management training/ToT workshops for ministry staff (at least 10 people)																
CORE/Alliance/external consultants delivers 5-day OVC/ToT workshop for MGLSD staff (at least 10 people)																

Capacity Building Work-plan for Years II and III – by quarter	Year 2006/7: Sept 06 – Sept 07												Year 2007/8: Oct 07 – Sept 08											
	1st Q			2nd Q			3rd Q			4th Q			1st Q			2nd Q			3rd Q			4th Q		
	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
Central Level																								
Inter-ministerial OVC coordination Study Tour																								
1 day review workshop every 6 months to support intra-MGLSD coord. Mechanism																								
TSO/CORE/MGLSD develop and agree on HRD guidelines and plan/tools for implementation																								
Continuing work with OVC secretariat on support to NOSC and TRC																								
TSO/CORE/MGLSD develop and agree on Staff induction manual																								
TSO/CORE/MGLSD develop and agree on guidelines on the use of the performance appraisal tool (public services format)																								

Capacity Building Work-plan for Years II and III – by quarter	Year 2006/7: Sept 06 – Sept 07												Year 2007/8: Oct 07 – Sept 08											
	1st Q			2nd Q			3rd Q			4th Q			1st Q			2nd Q			3rd Q			4th Q		
	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
District Level																								
CORE/TSO delivers 10-day Management and OVC/ToT workshop for the remaining (66 to 70 districts). 2 TSO teams each to train 1 cluster of 5 districts per month (trainings expected to last 7 months)																								
1 day progress review conference for all Zonal team members + MGLSD staff																								
Quarterly support supervision visits to districts by Zonal team members																								
Nsamizi Training Institute: Design of training modules																								
Nsamizi Training Institute: Implementation of training modules																								
Sites of Learning preparation – development of documentation/learning tools/processes																								
Sites of Learning – implementation of documentation/learning tools/processes																								
Sites of Learning – bi-annual visits to districts by central team members																								
Sub-County Level																								
Each district develops 3 day OVC training and timetable for sub-county training																								
Districts implement 3 day OVC training for sub-counties																								
M&E																								
Capacity-Building Performance Monitoring																								
Capacity-Building Performance Measurement (using composite score)																								
Financial and Logistical Support to Districts																								
Project Evaluation																								

5 Result Area Two: Services for OVCs

5.1 Objectives

The overall goal of the work of the CORE Initiatives Project under its Result Area Two is the expanded availability and quality of services for orphans and other vulnerable children through strengthened public-private sector partnerships. The CSO granting mechanism established by CORE is working to expand the availability of OVC services. The objectives of the capacity building component of CORE's work on OVC services, under the leadership of Alliance, will be to

- Improve the technical quality of such services; and
- Enhance the organizational development of the CSO grantees that are delivering such services.

5.2 Activities

5.2.1 Overview

Priorities

Determination of priorities must take into consideration several parameters, including the identified needs of children (and the CSOs that are serving them), the Core Programming Areas for OVC work outlined in the NSPPI and the areas of work specified in the RFA under which the CSO's have been contracted. In balancing these considerations, it is clear that there are three priority areas in which the OVC technical capacity of CSOs are in need of strengthening, namely:

- Psycho-social support
- Child protection
- Child participation

The capacity assessment also identified "economic strengthening" as an important area of work in need of further capacity building. At the same time, CORE/Alliance recognizes that "economic strengthening" activities have not been included in the RFA guidelines for OVC grantees to date because of the significant challenges faced by this work, notably the scale and severity of poverty that such activities must confront. With limited resources itself, it is the view of CORE/Alliance that it could only take on support to economic strengthening activities where the CSO was already strong and did not require much capacity building input in order to be effective in this work.

Approach

The scale up in the availability of OVC services, through successive RFAs to CSOs, is continuing apace. This poses a challenge in terms of a capacity building plan that can keep pace with the rapidly expanding number of grantees and can adequately build technical and organizational capacity to enhance the quality of their work.

To meet this challenge, the approach to capacity building proposed by this strategy will include:

- A reoriented capacity assessment process;
- A rolling program of technical and organizational capacity building;
- Collaboration with public sector units and staff;
- Peer learning; and
- Quality assurance.

Re-oriented capacity assessment

The capacity assessment process conducted with CSOs prior to the development of this strategy has provided a wealth of information about CSO needs. This information has guided the development of this strategy and will provide the baseline against which the progress of the strategy can be measured. This strategy proposes that for subsequent RFAs, for both OVC and youth HIV prevention grantees, a scaled-down and reoriented assessment process be used in order to:

- Move more quickly in to capacity building – it is acknowledged that the lengthy duration of the initial process of capacity assessment contributed to the delay in the commencement of capacity building activities;
- Supplement existing information – given the depth of the initial process of capacity assessment, it is no longer necessary to repeat such a detailed assessment but rather focus on adding to what is already known about the capacity building needs of grantees (which are unlikely to differ markedly from RFA to RFA); and
- Focus the assessment on helping CSO grantees to refine their planned projects and then identifying their capacity building needs that arise from this project design.

Rolling program

As already noted on page 11, this strategy proposes a rolling program of capacity building, with an intensive period of capacity building activities in the first year of grantees' projects and an emphasis on maintenance and application of learning in subsequent years. With respect to OVC grantees, the first year of a grantee's rolling program will include workshops on technical capacities (discussed in more detail below) with follow up support supervision site visits to assist and monitor the translation of workshop learning into practice. For each of the subsequent years of a grantee's project, grantees will be provided with refresher training on key issues and skills and more specialist training on a theme or topic related to OVC work that has emerged as requiring more in-depth attention.

With respect to organizational capacity building, OVC grantees, together with youth HIV prevention grantees, in their first year will receive workshops on monitoring and evaluation (provided jointly with ICRW) and human resource development. Support supervision site visits will be used to address program management issues and these will continue throughout the life of a grantee's project on a bi-annual basis.

Demand for these capacity building inputs will increase year-by-year not only because of the increase in the number of grantees with successive RFAs but also because it is envisaged that CSOs will be able to continue to access CORE's capacity building support whether they continue to receive financial support or not. Although it is impossible to predict exactly what this will mean for the demand for capacity building, it is safe to assume that demand is set to rise significantly. The most likely scenario to meet this demand will be to offer multiple workshops on the same topic (for example, on community participation), possibly on a regional basis.

Public sector partnering

Strengthening partnerships between CSOs and the public sector is a key element of the CORE approach to improving the planning, management, coordination and delivery of OVC services in Uganda. District staff from Community Based Services departments will, where possible, participate in training workshops and learning exchanges (see below).

On some technical issues, such as Child Protection, CORE/Alliance will aim to work with District staff as one of the providers of such capacity building, given the experience that District staff have in this area of work. The support supervision site visits to CSOs conducted by Alliance staff and consultants will also seek to meet with Community Based Services staff in the districts where the CSOs are working.

Eventually it is envisaged that MGLSD and district staff will take over this capacity building function from the CORE Initiative. The Alliance regards the effort to partner closely with the public sector at this stage as a preparatory step toward this eventual goal. It is also envisaged that as MGLSD takes over the CSO granting function from CORE, the capacity-building package and process may need to change.

Peer learning exchange

As already noted, a key element of this strategy is to create opportunities for peer-to-peer learning and sharing. Annual Learning Exchange meetings will bring together CSO grantees from different RFAs to share experiences and lessons from their work on OVC issues. Where possible, ministry and selected district staff will participate in these learning exchanges.

5.2.2 Technical Capacities

Psycho-social support

The Alliance has contracted REPSSI (Regional Psychosocial Support Initiative) to design and deliver capacity building inputs on psycho-social support. REPSSI is a regional initiative to scale up psychosocial care and support for children affected by HIV/AIDS. REPSSI launched its technical psychosocial care and support capacity building programs in May, 2002. Based in South Africa, REPSSI works in 13 countries in East and Southern Africa in collaboration with over 140 partner organizations.

The Alliance and REPSSI will meet with MGLSD to agree on training materials to be used for the capacity building, in order that the work done by REPSSI is in alignment with the curricula on psycho-social support that MGLSD has developed and uses. It is envisaged that Community Based Services staff from respective districts will participate with CSO staff in the training workshops provided by REPSSI.

An introductory training workshop has already been held and will be followed by other modules to be designed by Alliance and REPSSI in response to identified and emerging needs. Given that CSO grantees usually work in multiple districts, it is envisaged that each of these training workshops will be delivered twice (possibly on a regional basis) in order to maximize the number of districts covered. Further trainings will be provided on a quarterly basis for the first year of a grantee's rolling program of capacity building, and followed up by support supervision site visits conducted by the Alliance and REPSSI.

Child protection

The precise nature of the capacity building inputs on the "child protection" theme are still being determined by Alliance, in consultation with its CORE partners and MGLSD. CSOs, together with MGLSD and district staff, have an important role to play in sensitizing communities and care givers to the rights of the child and the laws of the land. Training for CSOs will thus emphasize close collaboration with district and sub-County staff. A range of public sector staff, covering the range of statutory functions with respect to ensuring the protection of children, will participate in such training and in some cases, these trainings on child protection issues will be provided by district staff, together with CORE/Alliance. Once again, training workshops will be followed up by support supervision site visits,

which are especially important given the need to encourage the reporting and recording of child abuse cases.

In order to support this capacity building work on child protection, the Alliance will work closely with JHU within CORE to collate, develop and distribute simple materials and tools for community sensitization in child protection. This will include getting access to and using national and international documents on child rights as well as other relevant legislation; designing dramas; and developing other relevant material on child protection. The Alliance will also work closely with JHU to support the dissemination of the popular version of the NOP and NSPPI.

Child participation

As with the issue of child protection, the precise nature of the capacity building inputs on the "child participation" theme are still being determined by the Alliance, in consultation with its CORE partners and MGLSD. It is envisaged that inputs on this theme will include two training workshops as well as follow up support supervision site visits. These inputs will focus on developing the skills that CSO staff need to actively engage children and communities in all phases of the project. It will be critical to target communities and care-givers because they are key in encouraging or hindering child participation in project activities.

5.2.3 Organizational Capacities

Monitoring & evaluation

Weak M&E skills and a lack of M&E systems were identified as important areas in which to build the organizational capacity of CSO grantees under both Result Areas Two and Three. The Alliance will work closely with ICRW to design and deliver an M&E workshop for both OVC and youth HIV prevention grantees, that will be provided to CSOs (possibly on a regional basis) during the second quarter of the first year of their project award. Support supervision site visits for the remainder of the project period will be used to support the application of learned skills and the implementation of project M&E systems.

Human resource development

Also in the second quarter of the first year of the capacity building rolling program, the Alliance will oversee the design and delivery of one or more workshops on human resource development for CSO grantees. This input on HRD will focus particularly on issues relating to the management of and support to community volunteers, given the critical role they play in delivering OVC services.

Program management

Bi-annual support supervision site visits, lasting some two to three days per grantee, will not only follow up on the technical capacity building workshops described above but will also provide coaching and mentoring in relation to organization-specific program management issues. Depending on the needs of specific CSOs, the Alliance together with CARE will also use such visits to address issues concerning grant management and granting systems development.

5.3 Outcomes

Monitoring & evaluation

The Alliance will work closely with ICRW within CORE to refine a monitoring and evaluation plan to track and assess the outcomes of capacity building activities with OVC grantees. The indicators, tools and systems that will be developed will be related explicitly to the ongoing work on the set of minimum quality standards for the national OVC response that CORE/Alliance is developing for MGLSD.

Outputs

Outputs of capacity building activities with OVC grantees are based on

annual estimates as follow:

- Number of training workshops: 6 per year
- Number of people (project staff) trained: 25X6 = 150 per year
- Major skill areas are: Psychosocial support, child protection, M&E, Human Resource Development & Community Mobilization and Participation.
- Capacity assessments: 2 per year. These assessments are considered to be part and parcel of capacity building.
- Number of participants in capacity assessments: 15X2X12 organizations= 360
- Lessons sharing and learning meetings (OVC): once a year (30 participants in attendance
- Support supervision site visits: conducted on a quarterly basis for 2 cycles of grantees.
- Participants: 4X15peopleX12organizations= 720. This assumes that different people are met on each visit.
- Number of OVCs reached: Ist cycle of OVC grantees (8) are expected to reach 37,520 OVCs and 66 CBOs in one year. The second cycle is coming on board soon and is expected to have more organizations. Around 45,000 OVCs are estimated to be reached by cycle II.

6 Result Area Three: Youth HIV Prevention

6.1 Objectives

The overall goal of the work of the CORE Initiative under its Result Area Three is the expanded availability and quality of HIV prevention programming for youth. The CSO granting mechanism established by CORE is working to expand the availability of such programming. The objectives of the capacity building component of CORE's work on youth HIV prevention programming, under the leadership of Alliance, will be to

- Improve the technical quality of such programming; and
- Enhance the organizational development of the CSO grantees that are delivering such programming.

6.2 Activities

6.2.1 Overview

Priorities

The capacity assessment identified the following technical areas of HIV prevention programming for youth that are in need of strengthening, in terms of knowledge, skills, processes and materials for:

- Facilitating HIV, sexuality, gender and life-skills education;
- Provision of counseling and guidance;
- Mobilizing and supporting community action with active engagement of young people and the community;
- Creating enabling environments through community action and advocacy for policy change and implementation; and
- Providing youth-friendly services and referrals.

Principles

As an initiative that is focused on strengthening the Government of Uganda's (GoU) capacity to plan, manage and coordinate the national HIV/AIDS response, the principles of CORE's work on HIV prevention for youth are essentially those of the GoU. The government has adopted a comprehensive policy on HIV prevention that seeks to use a range of approaches to changing HIV risk behaviour and reducing vulnerability to HIV infection. Such approaches, and the prevention messages that they involve, are to be tailored to the specific needs of particular target groups, given an assessment of their vulnerability. In this comprehensive approach, messages on sexuality and sexual health include sexual abstinence, fidelity and condom use as complementary emphases that will vary according to the circumstances of the target group.

Within this framework, the Alliance regards the following principles as central to effective and ethical HIV prevention programming with young people:

Participation: Young people, PLHA and the community actively engaged in project design, implementation, monitoring and evaluation.

Rights: A rights-based approach, that provides full and accurate information on prevention options

Dignity: Programming that challenges and does not contribute to stigma and discrimination against people living with HIV/AIDS

Inclusion: The most vulnerable young people actively engaged in the work

Evidence: Evidence-based, public health approach that separates sound HIV prevention practice from moralizing messages on sexuality

These principles will guide Alliance's capacity building work under Result Area Three. To ensure transparency, Alliance will work with the other partners in the CORE Initiatives Project to see that these principles are reflected in the RFA guidelines that go out to potential CSO grantees (in the same way that RFAs for OVC services include a set of OVC programming guidelines).

Through greater participation in CORE's Technical Review Committee on grantee selection, Alliance will also be able to support the CORE Initiatives Project in ensuring that it selects grantees, whose vision, values and ways of working reflect these principles. A greater role in CORE's pre-award planning workshop for grantees would also allow the Alliance to assist grantees in shaping their projects in accordance with these principles.

Alliance will also work together with the other partners in the CORE Initiatives Project to respond to GoU requests for assistance in developing policy and implementation guidance on HIV prevention with youth that will mirror that which was developed for the national OVC response (the NOP and NSPPI).

Approach

The capacity building approach to be used with youth HIV prevention grantees will mirror that used with OVC grantees, including:

- A rolling program of technical and organizational capacity building. For grantees under Result Area Three, the rolling program will include an emphasis on life skills education, community mobilization and participation, and youth friendly service provision and referrals;
- A reoriented capacity assessment process that focuses on assisting CSOs in refining their planned projects and in identifying their capacity building needs (see page 29 for more on this); and
- Peer learning and sharing.

6.2.2 *Technical Capacities*

Materials: development, collation & distribution

Alliance will not seek to reinvent the wheel but will look to collate the extensive amount of materials on youth HIV prevention, working closely with JHU within CORE to identify the best materials that most closely align with the principles outlined above. Such materials will be reviewed in a workshop with selected CSO grantees and an initial package will be developed for distribution to all grantees. Use of these materials will be tracked through support supervision site visits, and further gaps and the utility of new materials will be assessed by Alliance on an on-going basis.

HIV and Life Skills

Life skills education is a key part of the Alliance framework for HIV prevention with youth. Such education puts HIV prevention in the context of increasing young people's self-esteem as well as developing their skills in problem solving, critical thinking, and negotiation, especially with respect to the skills that both young women and young men need in dealing with gender norms and pressures. The capacity assessment identified a clear need to strengthen CSO grantees knowledge of and skills in integrating HIV prevention work into life skills education with youth.

A workshop on HIV and Life Skills will be provided to grantees during the first quarter of their grant award. This workshop will focus on:

- Increasing knowledge in HIV prevention, gender and sexuality;
- Building non-stigmatizing attitudes towards young people's sexuality and HIV; and
- Increasing skills in facilitating interactive learning activities with young

people.

This workshop will be followed-up by support supervision site visits. These capacity building inputs will draw on the life skills training materials that have already been developed by GoU.

Linked to this emphasis on life skills will be an effort to strengthen CSO skills in youth guidance and counseling, which was ranked as the number one priority by grantees during the capacity assessment process. Training in youth guidance and counseling will aim to build knowledge, values and skills for work with different client groups and on different issues (e.g.10-14 year olds, and engaged and newly married on relationships and fidelity, VCT).

Community mobilization & participation

Information on CSO relationships with young people and their communities will be gathered on support supervision site visits. This will feed into the design of a training workshop on community mobilization and participation, to be provided to grantees during the third quarter of their first year of CORE funding. This training will equip participants with skills to actively engage young people and communities in participatory assessment and planning to address the causes of vulnerability to HIV infection.

Youth-friendly services

Issues related to youth-friendly services will be identified during the design phase of the projects. Access to youth friendly services is another key component of best practice in HIV prevention with youth. It is widely acknowledged that it is critical that young people have access to services that are youth-friendly and comprehensive; i.e. they should include provision of VCT, diagnosis and treatment of STIs; as well as counseling on abstinence, faithfulness and use of condoms.

Grantees will be asked to map available services in their sites and identify activities with respect to increasing the access of youth to services based on needs and gaps. Alliance capacity building inputs will be based on these activities and may include training to improve services for young people, setting up a referral system or providing services in new ways.

Organization capacities

As noted in Section 5.2.3, capacity building activities on organizational development issues will be conducted jointly with OVC grantees. See page 31 for a description of these activities.

6.3 Outcomes

Monitoring & evaluation

The Alliance will work closely with ICRW within CORE to refine a monitoring and evaluation plan to track and assess the outcomes of capacity building activities with youth HIV prevention grantees. The indicators, tools and systems that will be developed will be related explicitly to the emerging work on policy and implementation guidance on youth HIV prevention that is being developed by GoU.

Outputs

These are also based on annual estimates calculated as follows:. I have almost a similar situation for AB/Y grantees.

- Number of training workshops: 6 per year
- Number of people (project staff) trained: 25X6 = 150 per year
- Major skill areas are: Adolescent Communication & Counseling, Life skills, M&E, Human Resource Development & Community Mobilization and Participation.
- Capacity assessments: 2 per year.
- Number of participants in capacity assessments: 15X2X12

organizations = 360

- Lessons sharing and learning meetings (AB/Y): once a year (30 participants in attendance)
- Support supervision site visits: conducted on a quarterly basis for 2 cycles of grantees.
- Participants: 4X15peopleX12organizations= 720. This assumes that different people are met on each visit!
- Number of youths reached: 1st cycle of AB/Y grantees (11) are expected to reach 197,800 youths in one year. The second cycle has just come on board and has 13 organizations. Around 200,000 youth are estimated to be reached by cycle II.

6.4 Timeline for Result Areas Two and Three

3rd quarter 2005-06	Mar		April				May				June				
	20-24	27-31	3-7	10-14	17-21	24-28	1-5	8-12	15-19	22-26	29-2	5-9	12-16	19-23	26-30
Finalizing CSO capacity building strategy	X														
Workshop on Psycho-social Support for OVC I		X													
Kate Harrison visit		X	X												
Capacity assessment/project refinement with AB/Y II			X	X											
Guidance and Counseling Training for AB/Y I					X										
Annual Leave					X	X			X	X					
Child Protection Good Practice Review Meeting (OVC I)								X							
Review and re-planning workshop for AB/Y I												X			
Gill Gordon visit														X	X
AB/Y and OVC materials collation/review meeting (with JHU)														X	
HIV and Life Skills workshop for AB/Y I + II															X

4th quarter 2005-06	July				August					September			
	3-7	10-14	17-21	24-28	31-4	7-11	14-18	21-25	28-1	4-8	11-15	18-22	25-29
Capacity assessment/project refinement with OVC II	X												
M&E workshop (OVC I+II, AB/Y I)		X											
Guidance and Counseling training for AB/Y II			X										
Counseling training for OVC I+II			X										
Review and re-planning for OVC I				X									
Site support supervision visits to AB/Y + OVC grantees					X	X	X	X	X				
H.R. Development workshop for OVC + AB/Y grantees										X			
CORE planning and reporting (Alliance R&R)											X	X	X

Rolling Program	Year 2005/6: Oct 05 – Sept 06						Year 2006/7: Sept 06 – Sept 07												Year 2007/8: Oct 07 – Sept 08											
	3rd Q			4th Q			1st Q			2nd Q			3rd Q			4th Q			1st Q			2nd Q			3rd Q			4th Q		
	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
OVC I						?																								
Psycho-social support training																														
Child Prot. Good Prac. Review Meeting (OVC I)																														
Counseling training (with OVC II)																														
Review and re-planning workshop																														
AB/Y I				?																										
Guidance and Counseling Training																														
Review and re-planning workshop																														
OVC II			1st year of grantee project													Project continuation period														
Capacity assessment/project refinement																														
Counseling training (with OVC I)																														
Psycho-social support training																														
Child Protection capacity building (TBD)																														
Child Participation capacity building (TBD)																														
AB/Y II	1st year of grantee project												Project continuation period																		
Capacity assessment/project refinement																														
HIV and Life Skills workshop																														
Community mobilization + participation workshop																														
Lessons sharing & learning meeting (cross RFAs)																														
Review and re-planning workshop																														
Refresher training																														
Thematic training																														
OVC + AB/Y II																														
M&E workshop																														
Support supervision site visits																														
H.R. Development workshop																														

Rolling Program (continued)	Year 2005/6: Oct 05 – Sept 06						Year 2006/7: Sept 06 – Sept 07												Year 2007/8: Oct 07 – Sept 08											
	3rd Q			4th Q			1st Q			2nd Q			3rd Q			4th Q			1st Q			2nd Q			3rd Q			4th Q		
	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
OVC III										**1st year of grantee project**												**Project contin. period**								
Capacity assessment/project refinement										■																				
Counseling training											■																			
Psycho-social support training												■			■			■			■									
Child Protection capacity building (TBD)																														
Child Participation capacity building (TBD)																														
AB/Y III						**1st year of grantee project**													**Project continuation period**											
Capacity assessment/project refinement						■																								
HIV and Life Skills workshop								■																						
Community mobilization + participation workshop												■																		
Lessons sharing & learning meeting (cross RFAs)													■												■					
Review and re-planning workshop															■												■			
Refresher training																			■											
Thematic training																								■						
OVC + AB/Y III																														
M&E workshop										■																				
Support supervision site visits											■				■						■	■							■	
H.R. Development workshop												■																		
CORE																														
Annual Leave (2 weeks in the month)	■	■											■	■												■	■			
Capacity-Building Performance Monitoring	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Capacity-Building Performance Measurement					■				■	■	■			■	■		■					■	■					■	■	
Program Evaluation																													■	■

Appendix 1 Public Sector Capacity Assessment Methodology

Modified competency profiling approach

A 'modified competency profiling approach', that included the elements of systems, tools procedures, was used to assess operational, management and technical/programmatic needs of the MGLSD and districts. This 'modified competency profiling approach' was used for the following reasons:

1. Competency profiling (CP) is a relatively modern and globally accepted concept in ID/OD
2. CP has replaced the conventional JTR analysis in the Uganda Public Service (UPS), (see job profiles, performance appraisal tool etc) Compared to instruments like Composite Attributes, Institutional Self-reliance, Organizational Capacity Assessment Tool (OCAT), New Directions in Organizational Self Assessment (DOSA), Training and Technical Assistance Plan (TTAP) and Institutional Strength Assessment (ISA), (widely used and documented in NGO institutional capacity assessments but with limited information on appropriateness in the public sector) CP is more aligned to specific mission, strategy and role outputs of institutions.
3. CP is capable of combining assessment of technical and ID/OD competencies in one sitting and in a similar context of a specific mission, strategy and role outputs
4. CP is an important building block in result oriented management (ROM) already being implemented by UPS
5. With CP it is possible to define institutional attributes in terms of the specific competencies, tools/procedure/coordination mechanisms the institution needs to fulfill its role (compare to the commonly used cluster of institutional resources, institutional performance, institutional sustainability)
6. With CP you are able to come up with composite scores of ID that are not only based on the institution's role but also take into consideration the work environment (measurement standards are set by the persons in the identified roles). Most other tools depend on perception or generic scales or indices for measuring
7. CP can also be easily used to develop institutional performance indicators.

In addition CP will provides most of the data needed for development of more tools, such as:

- A training programme
- A recruitment and induction tool
- A guidelines to using the existing competence based performance appraisal tool
- A support supervision tools
- Inter and intra coordination mechanism guidelines

Modified competency profiling tool

A modified competency profiling tool was designed and used to collect data from offices directly related to OVC and ABY in MGLSD and the districts. A guided questionnaire was developed to interview other key respondents (who were not targeted for CP) from the MGLSD, other ministries, bilateral and multilateral agencies, NGOs, CBOs and Local Government officials.

This was done to give a holistic picture of the planning, budgeting, coordination, M& E and implementation of the national response to OVC and AB/Y. Information from these respondents was also used to complete the capacity needs picture and to triangulate information from competency profiling.

Measurement of ID & OD

In order to monitor and evaluate the capacity building efforts, an ID/OD measurement tool was developed. This tool will measure ID/OD achievements in the targeted areas of OVC/ABY:

- Planning
- Coordination
- M&E
- Communication and Advocacy
- Grants Management

To measure the above elements two broad categories of variables have been selected:

- Core competencies
- Systems/processes/tools

The selection of these variables is based on the assumption that building the levels of core competencies and putting in place appropriate systems/processes/tools was a key and realistic ID achievement that the CORE project can achieve in the given project period and resources (as articulated in the project proposal document)

For each of the five components the required core competencies and the key systems/processes/tools were identified using the competency profiling tool and information collected from other respondent's interviews. For each of the identified core competencies the existing level was determined (both at MGLSD and districts). The existing level for each competence will be an average score of all the identified respondents that have gone through the competency profiling exercise. In a similar way for each of the systems/processes/tools identified the existing levels of functionality were determined. Using the same process indicators for levels of competence and functionality were determined. For core competencies measurement a modified (from the original 6 to 4 point ratings) nominal Amod Scale was used. For the systems/processes/tools functionality measurement, a functionality 4-point scale was developed. An aggregate measure of a combination of all the variables (competencies and systems/processes/tools) will be taken as the "composite score" for ID/OD. There will be two composite scores one for the Districts and another for the MGLSD

Determining the baseline composite score

For each of the two (MGLSD and districts) total for competency score will be 4 x n (where n is equal to the number of competencies that will be selected for inclusion in the capacity building plan i.e. competencies that the programme intends to build). The % score on competencies will thus be:

$$\frac{Z \text{ (actual score)}}{4 \times n} \times 100$$

Similarly the total for systems will be 4 x y (where y will be number of systems that will have been selected for building/strengthening).

The % score of systems will thus be:

$$\frac{\text{W (actual score)}}{4 \times y} \times 100$$

Composite score will be =

$$\frac{\%\ \text{score of competencies} + \%\ \text{score of systems}}{2}$$

The measurements of the variable at the assessment time will be used as baseline information on which capacity building initiatives will be monitored. The composite score at the time of the assessment will be used as baseline information on which all future evaluations of ID will be based. In the future, yearly composite score assessments of ID/OD (using the same tools) will be done in each of the selected programme districts and results will be compared to the baseline.

Appendix 2 Civil Society Capacity Assessment Methodology

OVC Capacity assessment tool

The capacity assessment exercise utilized the "CSO Capacity Analysis Tool". The tool identifies three major areas of capacity analysis namely:

a) Capacity for quality service delivery--Existence of appropriate knowledge, skills, competencies and systems/mechanisms for meeting the needs and aspirations of clients/beneficiaries;

b) Organizational capacity--Existence of systems, strategy and culture in organizations for effective and sustainable organizational functioning and performance.

c) Institutional capacity--Ability of organizations to effectively establish, sustain linkages/partnerships with other development actors and respond appropriately to their operating environment.

Capacities assessed in…

Specific areas that were assessed were as follows:

Capacity for quality service delivery

- Psychosocial support;
- Child participation;
- Child protection;
- Social economic security

Organizational capacity

- Monitoring and evaluation;
- OVC program/project management;
- Governance and structure;
- Personnel management;
- Financial management;
- Gender analysis and planning;
- Leadership;
- Resource mobilization;
- Community mobilization, participation and involvement.

Institutional capacity

- Advocacy and communication;
- OVC policy work;
- Networking, linkages and collaboration;
- Grant making to CSOs/CBOs.

Youth HIV prevention

The capacity assessment exercise utilized the "NGO Capacity Analysis Toolkit" developed by the International HIV/AIDS Alliance with minor modifications. The toolkit identifies five capacity areas to be assessed and built for high quality responses to HIV/AIDS namely:

AB/Y technical capacity--the technical knowledge, skills and experience of key project staff in HIV prevention with youth & access to technical knowledge and resources;

Organizational strength--organizational capacity in four key areas namely:

- Leadership, Governance and Strategy;
- Administration and Human Resources;
- Program management, M&E and Reporting;

- Financial management and sustainability

Partnerships, linkages, coordination and networking--The ability of CSOs to form successful and productive working relationships with other organizations, including government agencies, private sector, regulating authorities and other NGOs/CBOs;

Promotion of participation of youth and other affected communities--The promotion of participation of youth and other affected communities in projects/activities, management and decision-making structures of CSO;

Involvement in evidence and consultation based-advocacy--The ability of CSOs to influence a broad range of institutions using evidence and consultations, to promote the interests of the CSO and its beneficiaries.

The capacity assessment tool reflects a holistic approach to capacity assessment in which technical/programmatic, organizational and institutional development issues and questions are examined within CSOs. This is critical since organizations are complex with different components that interact. Capacity assessment and capacity building should be much more than "tying nuts and bolts" at the levels of skills, resources, structure and systems only. For effective capacity development, an organization needs to address all the different components and consciously manage their interaction.

Scoring indicators

For each capacity area to be assessed, participants individually scored their organization on a scale of 1-4. Keeping individual scores anonymous, participants in groups discussed and decided together what the group score would be for each capacity area. Reasons/criteria for scoring were discussed in groups to enable reaching consensus. Qualitative discussions were also held to back up individual and group scores. Based on capacity gaps/needs identified, capacity building action plans were drawn stipulating 1) the gaps/needs identified 2) action needed to address the identified gap/need 3) time-frame 4) responsibility 5) resources required.

Limitations and challenges

The capacity assessment exercise was essentially a facilitated "self-assessment" in which organizations rated themselves in various capacity areas. Although participants were encouraged to be open and objective, there was inherent bias and a tendency to score highly. The capacity assessment tool was limited and could not accommodate all the issues and questions that the organizations assessed were confronted with. Qualitative discussions filled in the gaps though.

The time allocated (1-2 days) was not adequate given the multiple areas to be assessed and the need to ensure full participation. It was difficult to schedule the capacity assessments and ensure full participation of board members, management and staff due to busy schedules. The capacity gaps/needs identified were diverse posing challenges in building capacity in the short and long term. There was an expectation that CORE Initiative would address all the prioritized capacity gaps/needs in the one year of project implementation.

Youth HIV prevention capacity assessment tool

The capacity assessment exercise utilized the "NGO Capacity Analysis Toolkit" developed by the International HIV/AIDS Alliance with minor modifications. The toolkit identifies five capacity areas to be assessed and built for high quality responses to HIV/AIDS namely:

AB/Y technical capacity--the technical knowledge, skills and experience of key project staff in HIV prevention with youth & access to technical

knowledge and resources;

Organizational strength--organizational capacity in four key areas namely:

- Leadership, Governance and Strategy;
- Administration and Human Resources;
- Program management, M&E and Reporting;
- Financial management and sustainability

Partnerships, linkages, coordination and networking--The ability of CSOs to form successful and productive working relationships with other organizations, including government agencies, private sector, regulating authorities and other NGOs/CBOs;

Promotion of participation of youth and other affected communities--The promotion of participation of youth and other affected communities in projects/activities, management and decision-making structures of CSO;

Involvement in evidence and consultation based-advocacy--The ability of CSOs to influence a broad range of institutions using evidence and consultations, to promote the interests of the CSO and its beneficiaries.

This approach to capacity assessment and capacity building of CSOs is in line with observations by New Trans Century Foundation (1996) regarding capacity building programs:

"Capacity building programs are intended to strengthen an organization's ability to provide quality and effective services, while being viable as an institution. This means supporting an organization to be programmatically sustainable (providing needed and effective services), as well as organizationally sustainable (with strong leadership and having necessary systems and procedures to manage by), while ensuring that it has sufficient resources (human, financial and material) that are utilized well. Finally, this support must help the organization to understand the external environment (political, economic and social) it operates in and develop a relationship with it that is sufficiently stable and predictable".

Scoring indicators

For each capacity area to be assessed, participants individually scored their organization on a scale of 1-5. Keeping individual scores anonymous, participants in groups discussed and decided together what the group score would be for each capacity area. Reasons/criteria for scoring were also discussed in groups to enable reaching consensus. Qualitative discussions were also held to back up individual and group scores. Based on capacity gaps/needs identified, capacity building action-plans were drawn stipulating 1) the needs/gaps identified 2) action needed to address the identified gaps/needs 3) time-frame, 4) responsibility and 5) resources required.

Limitations and challenges

The capacity assessment exercise was essentially a facilitated "self-assessment" in which organizations rated themselves in various capacity areas. Although participants were encouraged to be open and objective, there was inherent bias and a tendency to score highly. The capacity assessment tool was limited and could not accommodate all the issues and questions that the organizations assessed were confronted with. Qualitative discussions filled in the gaps though.

The time allocated (1-2 days) was not adequate given the multiple areas to be assessed and the need to ensure full participation. It was difficult to schedule the capacity assessments and ensure full participation of board

members, management and staff due to busy schedules. The capacity gaps/needs identified were diverse posing challenges in building capacity in the short and long term. There was an expectation that CORE Initiative would address all the prioritized capacity gaps/needs in the one year of project implementation. Give the fact that the report is for all the 11 CSOs assessed, some fine details for each CSO assessed have been left out.

Appendix 3 Identified Systems/Tools and Core Competencies Needs

MGLSD
Systems, procedures, tools
• Advocate for the recruitment of competent CDOs at sub-county levels
• Creation of awareness on magnitude and complexity of OVC issues
• Define agenda for the NOSC and TRC and develop operational guidelines to integrate NOSC and TRC operations into to the general MGLSD functions.
• Define the roles and responsibilities of NCC vis-a–vis the roles and responsibility of MGLSD on issues of children.
• Develop a national (MGLSD) granting mechanism
• Develop an MGLSD support supervision tool and process (MGLSD to Districts)
• Develop competence profiles of key MGLSD personnel in the OVC and AB/Y sections
• Develop mechanism to continually update OVC mapping
• Develop operational guidelines for the UPS performance appraisal process
• Development of a national NSPPI implementation performance monitoring system and plan (MGLSD part)
• Development of an effective and safe partnership mechanism with districts
• Establish a task/role HRD planning process
• Establish formal report mechanism (MGLSD/grantees)
• Establish inter departmental OVC coordination mechanism
• Establish MGLSD mechanism to monitor and support supervise districts
• Establishment of the NIU
• Establishment of a MGLSD OVC multi-sectoral planning process
• Establishment of an inter-ministerial OVC coordination mechanism
• Include multi-sectoral planning on support supervision agenda
• Introduce a transformational management style and culture
• Orientation of personnel in all OVC related departments and units on the key functions and key outputs of MGLSD (as per the restructuring)
• Review staff induction manuals and processes
• Revitalize the Intra-Ministerial Vulnerable Population Taskforce
Core competencies
• Advocacy skills
• Capacity needs assessment and planning skills
• General strategic planning skills
• Knowledge and skills on the bottom up district planning and budgeting skills
• Knowledge and understanding of the National OVC policy
• Knowledge and understanding of the NSSPI
• Knowledge of the national and district planning and budgeting cycle and process
• Line management skills

MGLSD
• Lobbying skills
• Multi-sectoral OVC planning skills
• Participatory appraisal, and monitoring skills
• Performance appraisal skills
• Performance measurement skills
• Child counseling and communication skills
• Support Supervision skills
• Written and verbal communication skills (including computer skills)
• Trainer of trainer (TOT) skills

DISTRICTS
Systems, procedures, tools
• Aligning annual budgets to sector and district development plans
• Develop a district support supervision tool and process (MGLSD to sub-counties)
• Develop competence profiles of key MGLSD personnel in the OVC and AB/Y sections
• Development of a district NSPPI Implementation performance monitoring system and plan (MGLSD part)
• Establish a district task/role HRD planning process
• Establish NGO to district reporting mechanism Develop competence profiles of key MGLSD personnel in the OVC and AB/Y sections
• Establishing of district/sub-county OVC coordination mechanism.
• Establishment of a district OVC multi-sectoral planning process
• Facilitating parishes in developing annual plans
• Introduce a transformational management style and culture
• Recruitment of competent CDOs and CDAs at sub-county levels
Core competencies
• Advocacy skills
• Capacity needs assessment and planning skills
• Participatory appraisal, planning and monitoring skills
• Capacity needs assessment and planning skills
• Community mobilization skills
• Knowledge and skills on the bottom up district planning and budgeting skills
• Knowledge and understanding of the national OVC policy
• General strategic planning skills
• Knowledge and understanding of the NSSPI

DISTRICTS
• Knowledge of the national and district planning and budgeting cycle and process.
• Line management skills
• Lobbying skills
• Multisectoral OVC Planning skills
• Performance appraisal skills
• Performance measurement skills
• Staff Induction skills
• Support Supervision skills
• Written and verbal communication skills (including computer skills)
• Psychosocial support
• Child counseling and communication skills
• Community mobilisation skills

Appendix 4 Prioritized Systems/Tools and Core Competencies Needs

MGLSD **Systems, Procedures and Tools:**

- Establishment of a MGLSD OVC multi-departmental coordination and planning process
- Establishment/strenghening of an inter-ministerial OVC coordination mechanism (strengthen NOSC and TRC)
- Establishment of MGLSD mechanism and tool to monitor, support and supervise districts
- Review staff induction manuals and processes
- Development of operational guidelines for the UPS performance appraisal process
- Establish a task/role HRD planning process
- Orientation of personnel in all OVC-related departments and units on the key functions and he key outputs of MGLSD (as per the re-structuring)

Core Competencies:

Management

- General strategic planning skills
- General management and leadership skills
- Support supervision skills
- Capacity needs assessment and planning skills
- Knowledge of the national and district planning and budgeting cycle and process
- Computer skills
- Performance appraisal skills (using the public service tool)
- Knowledge and understanding of the national OVC policy and the NSPPI
- TOT skills
- Operational knowledge of tools and systems developed

OVC Technical

- Multi-sectoral OVC planning skills
- Understanding psycho social support
- Introduction to family law
- Measurement of quality of OVC services
- Child counseling
- Understanding NOP and NSPPI

Districts **Systems, Procedures and Tools:**

- Establishment of a district OVC multi-departmental planning process
- Establishment of district OVC coordination mechanism
- Establishment of a district task/role HRD planning process
- Development of a district support supervision tool and process (MGLSD to sub-counties and CSOs)
- Establishment of NGO to district reporting mechanism

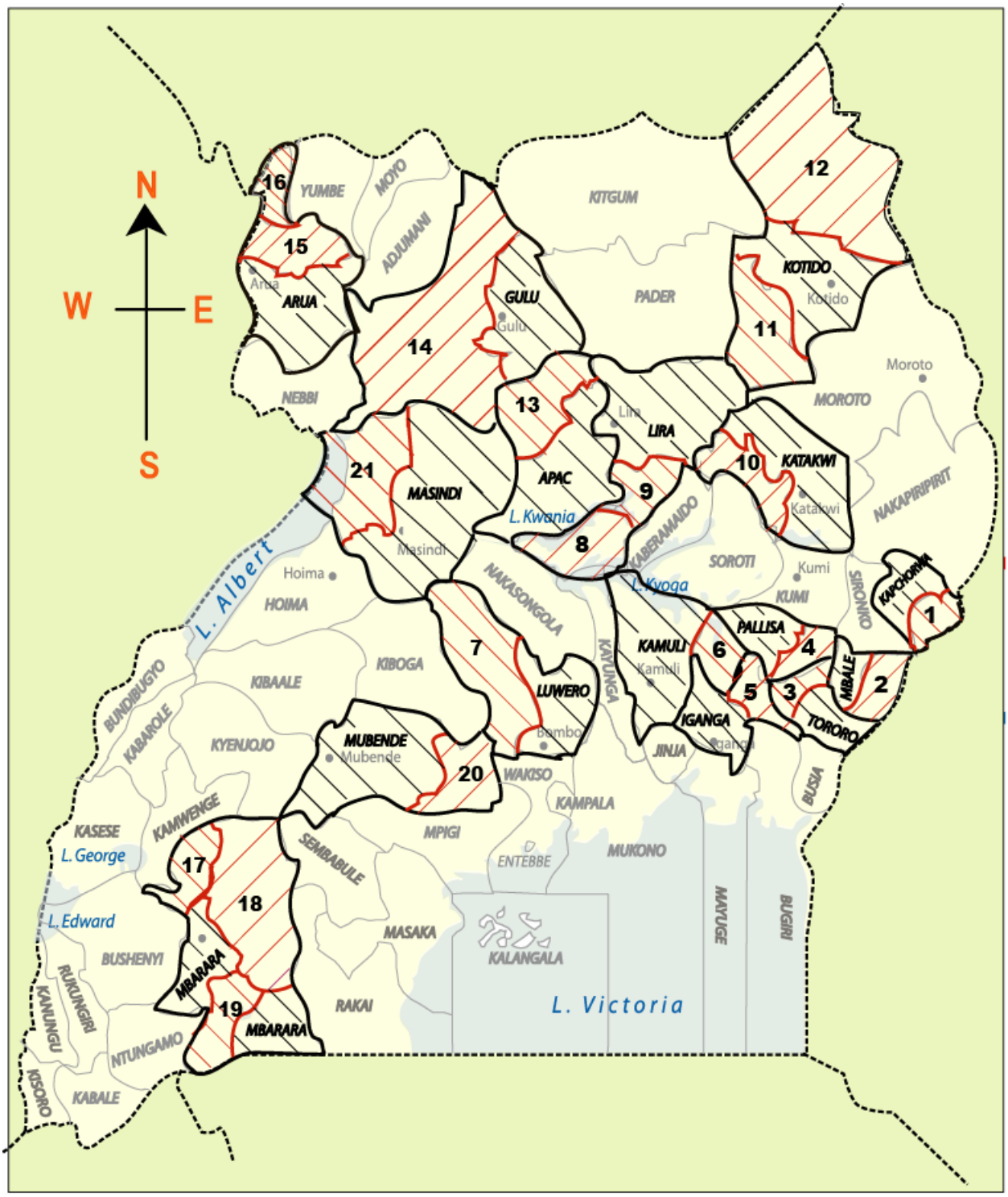
Core Competencies:

Management

- General strategic planning skills
- General management and leadership skills
- Support supervision skills

- Capacity needs assessment and planning skills
- Knowledge of the district planning and budgeting cycle and process
- Computer skills
- Performance appraisal skills (using the public service tool)
- Knowledge and understanding of the national OVC policy and the NSPPI
- TOT skills
- Operational knowledge of tools and systems developed

OVC Technical

- Multi-sectoral OVC planning skills
- Understanding psycho social support
- Introduction to family law
- Measurement of quality of OVC services
- Child counseling
- Understanding NOP and NSPPI
- Community mobilization skills

Appendix 5 Map of Uganda