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NuPITA Case Studies in Capacity Building

Implementing Early Childhood Development Strategies & Addressing Stigma

New
Partners
Initiative
Technical
Assistance
Project
(NuPITA)

Case
Studies in
Capacity
Building

Faced with increasing numbers of orphaned and vulnerable children (OVC) stranded in the wake of the AIDS epidemic, it is critical that communities find ways to care for the physical and emotional health of young children, Africa's next generation. The creation and maintenance of early childhood development (ECD) centers and an awareness of best practices in childhood development can help communities go beyond simply helping orphans and vulnerable children to survive, by also helping them to understand what these very young children, and indeed all children, need to thrive.

Kenyan NGO G.R.A.C.E., implementing an OVC project which aimed at engaging a network of indigenous youth groups and community-based organizations in support of orphans and vulnerable children, saw ECD centers as points of entry for providing care to OVC and HIV prevention education. Because

they work through sub-partners, G.R.A.C.E.—through its NPI funding and with organizational and technical support from NuPITA—focused on improving capacity for 15 sub-partners to establish ECD centers in three provinces in Kenya, through which they provide core services either directly or indirectly to orphans and vulnerable children. The services include education,



*Children at the Kangoya ECD centre, Kiambu, Kenya.
Photo Robin Hammond/Panos.*

Early childhood development (ECD) is a critical component to bringing up children who are inquisitive and ready to learn. ECD centers not only provide education, but can be used as entry points for a range of services to OVC and their respective households, including psychosocial support, medical care, and engagement with the community in support of children. The ECD center approach recognizes that supporting Africa's next generation is critical to helping communities thrive in the long-term.

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medical care, psychosocial support, protection, nutritious food from kitchen gardens, and economic strengthening.

NuPITA worked closely with G.R.A.C.E. from the inception of its grant to strengthen its administrative and service systems underpinning its HIV service delivery to clients. In Year 2, NuPITA offered



Mary Wanja was trained in how to establish a kitchen garden by G.R.A.C.E. Photo Robin Hammond/Panos.

a technical and organizational capacity assessment to specifically assess its technical capacity to deliver HIV prevention and OVC services under the NPI cooperative agreement. Action plans were drawn up as part of the assessment, which laid out

a roadmap for providing continued structured support by NuPITA. This support included an assessment which allowed G.R.A.C.E. to identify gaps, which were filled through action plans, along with a range of support from group trainings to embedded advisors.

Having worked with NuPITA on an organizational capacity assessment, G.R.A.C.E. cascaded capacity assessments down to sub-partners selected to establish ECD centers. Their goal was to establish a baseline of sub-partner capacities and develop a strategy for improving each partner's ECD services as appropriate. With those assessments in hand, G.R.A.C.E. then worked with NuPITA staff to identify approaches and trainings to improve CBO technical capacity in early childhood care.

Coming from a background in child protection and early childhood development, Pascal Mailu, Director of G.R.A.C.E. Africa, is passionate about the NGO's ECD focus. "We are addressing an area the Kenyan government has neglected since independence. There is no policy for ECD and there is such great need."

In 2008, the Grassroots Alliance for Community Education (G.R.A.C.E.) received a grant through the USAID/President's Emergency Plan for AIDS Relief (PEPFAR) New Partners Initiative (NPI) to expand HIV prevention programming. The grant included organizational development and technical assistance from the New Partners Technical Assistance Project (NuPITA), implemented by John Snow, Inc.

G.R.A.C.E. seeks to build the capacity of community based organizations to implement self-determined and sustainable initiatives for better health and development. Working through a network of over 100 partners, G.R.A.C.E. provides capacity building support in areas as diverse as leadership and governance, economic empowerment, and care and support.

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He also saw great benefit in using many aspects of the NuPITA tools and support methods with sub-partners to build program capacity and services: “We helped these partners develop basic skills in ECD management, including modes of service delivery, the delivery of services in each area, how to recruit teachers, and conduct interviews. We even assisted them in writing job descriptions.”

Because G.R.A.C.E. did not have effective strategies to make centers sustainable without stigmatizing beneficiaries, G.R.A.C.E. staff requested facilitation support to assess the issue and think through possible implementation approaches. “And everyone had an opportunity to express challenges and concerns,” Pascal said. “That inclusive process made it easy later, because after each session people took responsibility for action plan items.”

As part of the action plan to reduce stigma at ECD centers, NuPITA engaged an HIV & AIDS specialist to help the NGO develop standards and protocols for care. These standards and protocols would serve as detailed guidelines for G.R.A.C.E. staff to ensure that all clients received services of uniformly high quality and enable the organization to better monitor performance when meeting the needs of its clients. One important result of this assistance was a simple means of identifying a specific individual’s HIV status for staff without “labeling” that person by name within the record system. “Our specialist suggested using codes, so no one would know if a client was HIV-positive or negative,” described Janet Onyalo, G.R.A.C.E. M&E officer. “People who didn’t know the code could not identify the client.”

Stigma was also an issue for HIV-negative families at ECD centers. “People felt our center was only for HIV infected kids or adults, and non-infected people did not want to come or bring their children,” Janet said. “We knew success required welcoming everyone, so the center integrated OVC and HIV prevention and care, and welcomed parents who were not infected. It was clear there was a need to integrate OVC cases and HIV prevention components. It was important to encourage and



Children at the G.R.A.C.E. Kangoya Early Childhood Development Center, Kiambu, Kenya. Photo Robin Hammond/Panos

educate people hesitant about testing. Our efforts to do this became more pronounced because of the TOCA.”

“We were very keen to deal with stigma and discrimination,” Pascal explained. “And as a result, we strategized with NuPITA about one issue in particular: dealing with people who didn’t want to know their status because of stigma [associated with HIV infection].” By effectively ensuring that the knowledge of an individual’s HIV status was kept to that person alone, and allowing clients to manage whether and how to let others know, clients felt more comfortable being tested and receiving

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results. “But with these changes, now quite a number of community members know their status.”

Additional activities to further improve technical capacity in ECD have involved resource mobilization and sustainability. “Sustainability is one area we’ve fleshed out,” notes Pascal. “Some partners will sustain ECD centers beyond NPI funding. We plan to provide them with skills in resource mobilization—they already mobilize for food, volunteers, and finances, but they need skills to effect better coordination and develop strategic plans. They haven’t done enough of it, and they’re not sure they’re doing it right.” To address this challenge, NuPITA facilitated a strategic thinking and resource mobilization planning session that brought together all the partners in a four-day training. At the end of the training, partners left with action plans that would support their efforts to increase

their ability to conduct strategic thinking processes that would not only be applied in program planning but also in resource mobilization efforts.

The NuPITA approach to capacity building was essential to G.R.A.C.E. making necessary changes to expand ECD centers in Kenya. By working with the organization as a partner to effect change at its own pace, and building on its existing knowledge, G.R.A.C.E. was able to fully understand and appreciate the rationale behind suggested improvements. Rather than a top-down mode of problem solving, NuPITA worked side by side with its partner and addressed the multiple factors inhibiting quality services. “I felt like the process was quite useful; we took quite a bit of time,” Pascal said. “It confirmed the things we were doing right and helped us acknowledge difficult issues.”

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

Implemented by John Snow, Inc., and partner Initiatives Inc., with offices in Kampala, Uganda, and Nairobi, Kenya, the project provides technical assistance to the NPI grantees in HIV prevention and care services, financial management and compliance with US Government regulations, and organizational development.

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