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***MR .SAMSON AYIEKO, PROGRAMS DIRECTOR. STAFF PERFORMS JIGGERS MANAGEMENT AT SEGA TOWNSHIP TO A HIV+ PUPIL***

***MISSION: - Bringing hopes to A hopeless child!!!***

***VISION: - Creating a community of Social Progress for All!!!***

**KEL-KAMARAMI PLWAS COMMUNITY BASED ORGANIZATION [KKC-P]**

 **STRATEGIC PLAN**

 **2019 - 2021**

**OUR VISION**

Creating a Community of Social Progress for all!!!

**OUR MISSION**

 Bringing Hopes to A hopeless Child!!!

**OUR CORE VALUES**

* Integrity
* Respect
* Innovation
* Diversity
* Voluntarism
* Diligence
* Teamwork

**The Strategic Plan 2018 – 2021 has been prepared in the line with the KEL-KAMARAMI PLWAS COMMUNITY BASED ORGANIZATION.**

**1.0 INTRODUCTION**

This is the first Edition of **KEL-KAMARAMI PLWAS COMMUNITY BASED ORGANIZATION strategic plans** that defines the strategic directions that the organization wants to take in the period 2018 – 2021. The document has been developed based on an extensive assessment of the organizations current operational environment and history that were useful in identifying key strategic issues to focus on for the next three years. The document describes the objectives and the strategies to address them and the implementation structures and resources to achieve success. It further defines a monitoring and evaluation framework to get the implementation process succeeds.

It is a product of a comprehensive consultative, reflection and planning processes by leadership of K-KCP (Board, Management and Staff) as well as representatives of all critical stakeholders (target beneficiaries, and line ministries). The process was facilitated by external facilitators from **Camel Associates (CA) lead Consultant. Francis AlugaMagugualugafrancis@gmail.com .**

* 1. **Rationale for the plan**

The purpose of the plan is to chart out a path for the noble child project on the communities in the pilot three counties of Siaya, Kisumu and Homabay that shall be mobilized and integrated into the project. We believe that the process of this strategic planning has helped us to align the unique strengths in the Board, Staff and the target beneficiaries. Community goodwill and the resources at our disposal shall contribute to improvement of quality of the livelihoods of the infected and affected children in the project areas.

The strategic plan shall serve as a road map into the future by articulating our vision, mission, core values as well as the priority programming areas that will help us deliver our mandate for three years of its implementation (2018 – 2021). It will also provide clear objectives and activities to be implemented over the plan period.

The strategic plan identifies the desired long-term outcome(s) and the sequence of actions to achieve them. In this, it looks at environmental and demographic changes that K-KCP should take into account in order to be relevant, effective and efficient for purposes of service delivery to the target beneficiaries. It is based on a careful analysis of our operating environment and benefits from extensive inputs and discussions by all stakeholders. Specifically, the strategic plan defines;

* The current operational environment of K-KCP.
* The key strategic issues that K-KCP need to address and strategic objectives to address them.
* The strategic activities to deliver the objectives.
* The implementation, monitoring and evaluation frameworks to effectively and efficiently manage stress.

Being the first strategic plan that K-KCP has developed, the organization hopes that with this plan it will continue to gain strength in its success and add value to the communities it serves. We anticipate that for the next three years, this strategic plan: will; and with this plan we hope to achieve the following.

* Reflect the values of the organization and help perpetuate them in all our undertakings.
* Clearly define what is most important for achieving success and focus all efforts and resources at them.
* Assist with daily decision making and also provide benchmarks for performance and accountability.
* Initiate and strengthen a culture of strategic thinking and management at K-KCP.

**Strategic Planning Process**

As an organization, we are guided by principles of reflection and learning to spearhead growth, the leadership of K-KCP adopted a participatory approach in developing this strategic plan.

**Planning and Analysis**

The strategic planning process started with the decision by K-KCP management to develop a strategic plan. This was a consultative process that involved all stakeholders. **Camel Associates** were engaged as external facilitators to help with moderating the planning process and consolidating the strategic plan document.

The preparatory and initial planning phase involved the induction of members on the strategic planning process and holding consultative meetings, with the organization leadership, key staff and all important stakeholders. The objective was to develop a shared in-depth understanding of the context in which K-KCP operates, capture the internal and external stakeholder perspectives, identify any emerging issues and actors, map key stakeholders and infrastructural issues and identify key strategic issues. The members also reflected on their current and previous performance and operational environment. The main outputs from this phase were

a contextual scan of the internal and external environment and a list of key strategic issues to focus on in the next three years.

The second phase entailed a consultative and planning meeting. All K-KCP staff as well as representative from the target community a four day planning meeting. Key issues included reviewing the strategic issues and agreeing on strategic objectives as well specific objectives and key activities for the next three years, reflections on the organization’s vision, mission and core values and the implementation frameworks. The meeting also conducted a detailed analysis of key stakeholders, discussed and agreed on key performance targets and measures and developed a broad work plan. The main output from this phase was a draft strategy document consolidated by the facilitator to be shared with management and select members of the committee for review and input.

In phase three the draft strategic plan document was shared with the management of K-KCP for inputs and implementation budgeting. A validation meeting was also held before finalization of this document.

**2.0 BACKGROUND OF K-KCP**

**History of K-KCP**

**KEL-KAMARAMI PLWAS COMMUNITY BASED ORGANIZATION (K-KCP**) started as a project for the vulnerable and orphaned child. K-KCP is a community based organization whose aim is to mitigate the impact of HIV/AIDS on the vulnerable and orphaned children. It achieves this by empowering vulnerable and orphaned children through the identification, mobilization and provision of basic needs including but not limited to Food, shelter, clothing, health and education.

In this pursuit of K=KCP’s motivation is based on a strong and practical will to provide empathy to the needy child. We strongly believe on the value of voluntarism and focus on the most vulnerable children as members of society.

**K-KCP Working Areas and Targets**

The current K-KCP’s working area of operation is Siaya County, in Kenya’s Western region. Though the organization has earmarked three counties including Kisumu and Homabay for future operations. Within this area K-KCPs activities ‘take place “Focus-Areas; where the vulnerable child remains present in Siaya. In addition K-KCP responds to requests for assistance outside of its focus areas. K-KCP anticipates continuing its focus in its current geographical area of work even in this strategic plan period.

**K-KCP Approaches and main Program Areas**

Based on the needs expressed by its participants, **KEL-KAMARAMI** has developed comprehensive and practical community mobilization methods aimed at achieving and maintaining real results and action competence. K-KCP approaches of participatory educational, counseling and child empowerment integrates the Behaviors Process Method, Community-Based Health (CBHC), Participatory Learning and Action (PLA).

**K-KCP Organizational Capacity**

Currently, K-KCP has a staff capacity of 64 fulltime staffs mostly working as volunteers initially. All field facilitators are stationed in their local geographical sub Counties initially to minimize travel expenses. Others have qualifications in human resource, finance and project management. The organization is governed by 15 members Board of Directors (BOD) and 3 Board of Trustees [BOT].The members are all highly experienced professions in fields relevant to K-KCP. The management is headed by Executive Director. Besides the legal identity as a community based organization, it also registered as a health and counseling community outfit. The organization works closely with relevant line ministries and institutions in Siaya County. The organization also partners with other NGOs working in the area as well as Faith Based Organization. K-KCP is fighting very hard to obtain sufficient resources to continue its operations in the future.

**K-KCP Expected Impact**

Over the coming years KEL-KAMARAMI activities shall have touched children of all ages deeply in order to drive efforts towards mitigation of negative results created by HIV/AIDS on the child. Notable changes that KEL-KAMARAMI intends to bring about include: reduction of malnutrition among orphaned children and provision of holistic care. Reports targeting the aforementioned areas shall require improved communication with partners and other actors in this pursuit.

**2.1 STRATEGIC SITUATION AND CONTEXT ANALYSIS**

As part of the strategic planning process K-KCP carried out a detailed analysis of its operational context and strategic situation. This included a reflection on its past (performance, strengths, weaknesses and external environment).

**Analysis of internal Environment:**

**SWOT-strengths and weaknesses**

The organization’s strategic planning team reflected on its internal environment in order to identify its competitive attributes as well as areas that are weak and need improvement. The members analyzed the organization’s strengths (what it can do well) and its weaknesses (what it cannot do effectively). These are summarized in the table below.

Summary of K-KCP organization strengths and weaknesses as generated

during the SWOT analysis.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Strengths** |  | **Weaknesses** |
| 1 | Very strong community support and good will. | 1 | Lack of permanent premises to house the organization.  |
| 2 | Recognition by stakeholders at county level. | 2 | Inadequate appropriate operational structures i.e organizational infrastructure. |
| 3 | Strong Diversity among the K-KCP staff. | 3 | Inadequate appropriate management systems and practice e.g appraisal system. |
| 4 | A highly participatory approach in working with the community. | 4 | Weak financial Resource base. |
| 5 | Highly qualified, experienced and committed staff. | 5 | Inadequate documentation of field reports. |
| 6 | Proven good community mobilization strategies.  | 6 | Slow progress of staff capacity building / upgrading of staff. |
| 7 | Content and methodologies that are relevant to the target beneficiaries.  | 7 | Overdependence on volunteers. |
| 8 | Registration and Certification by relevant authorities.  | 8 | Lack of a vehicle.  |

**SWOT – Existing opportunities and Threats:**

A part from the strengths and weaknesses that are largely within the control of the organization, the members also reflected on those extraneous factors that it has little or no control over but are likely to affect it. These included opportunities which it tapped into and lead to better achievement of its goals or threats which if not guarded against may hinder success. The table below is a summary of the opportunities and threats that were noted.

**Table 2: Summary of K-KCP organization opportunities and threats as generated during SWOT analysis:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Opportunities** |  | **Threats** |
| 1 | Support from INTERNATIONAL DONORS AGENCIES | 1 | Increased competitiveness and decline in donor funds and grants. |
| 2 | Closer relevant devolved functions i.e. opportunity for networking with the County government as well as private organizations. | 2 | Diminishing voluntary spirit e.g. we have noted demand for payments. |
| 3 | Use of Technology to access various aspects of K-KCP work e.g communications M & E.  | 3 | HIV fatigue. There seems to be an apparent apathy towards HIV/AIDS related issues at a time when the scourge to be on the rise among some population. |
| 4 | Existence of a large catchment area of operations. | 4 | Competition from many players. |
|  |  | 5 | Unpredictable economic environment.  |

**Analysis of the External Environment:**

In addition to the analysis of the internal environmental factors (SWOT), the planning team also reflected on the external contextual factors which may affect them. The factors are also likely to affect the performance of this strategic plan and considerations need to be made in this planning.The factors that were assessed included the political, Economic, Social, Technological, Environmental and Legal (PESTEL) contexts. The key findings are summarized below.

**Political and Legal Contexts:**

K-KCP operates within a political and legal framework. Long-term strategic planning must take into consideration these frame of conditions.

 An assessment of the political and context was undertaken to understand those political and legal factors that would facilitate the plans and those that could hinder the plans and would need to be closely monitored and mitigated if need be.

An important political factor noted is political stability. A successful implementation of any plan depends on a stable and supportive political environment. While Kenya is generally politically stable and supportive of organizations like K-KCP, the cyclic political tensions that build up during elections are likely to stoke political agitation in politically volatile areas.

Some key supportive political and legal factors noted on which the plan will ride on include:

* The fact that K-KCP chooses to be politically neutral is important in this plan as K-KCP work with community members of all political party affiliations.
* The current constitution is very supportive of the institution and its activities.
* There is political will and structures by the organization.
* A strong recognition of the role of the role of the organization and opportunity for the organization to actively engage and participate in government forums at all levels.

Also some negative or hindering political and legal factors were noted. These include:

* Incidences of ethnic intolerance and ethnic mobilizations related to politicized ethnicity during the 2017 electioneering period.
* Increased incidences of corruption and abuse of office of public officials as well as some private sector actors.

During this plan these political issues will need to be closely monitored to ensure effectiveness.

**Economic Context:**

K-KCP activities and operations also affected by the local economic context and even the global economic environment. Whereas Kenya has registered a steady economic growth at the macroeconomic levels, these have not translated to an equivalent economic growth at the level of the poorer citizens. In fact, some economic indicators like youth unemployment seem to be worsening. Other economic contextual factors of concern also noted include;

* The rising cost of life as noted in rising inflation rates. This is particularly affecting the poorer members of the populations that constitute a majority of K-KCP targets. Also in these hard economic environments the volunteers have to fend for themselves making for less time to provide purely voluntary services.
* Depreciation of the shillings. The value of the shilling has been quite unstable making it hard to plan and budget effectively.
* Increasing unemployment especially among the youths, thus exposing them to trauma and dependency making them vulnerable.

**Socio-Cultural Situation:**

K-KCP has a clientele base and targets that come from a varied and diverse socio-cultural context.

Any planning must therefore take note of the different social norms and cultural nuances. Socio-cultural context and factors are therefore to take note of. Some important socio-cultural contextual factors noted include:

* Increasing incidences of family breakdown and dysfunctional family structures of HIV/AIDS affected individual ineffective as a social protection unit.
* Increasing cases of social ill such as promiscuity teenage pregnancies and early marriages as well as illegal abortions.
* Rampant availability and abuse of drugs especially illicit alcohol and bang.
* Some negative cultural practices like female genital mutilation (FGM) among some communities.

**Technology Situation:**

Every facet of modern life is being impacted by technology. ICT in particular is permeating all aspects of life. In this environment, K-KCP must also leverage on technology in its mandate. Key technological context noted included:

* Increasing use of ICT especially the social media by everybody. While this can be used positively, some negative impacts have been noted such as perpetuation of hate speech, organizations like K-KCP must continue to develop their ICT and deploy it in their everyday work. In this plan, K-KCP will continue to integrate ICT capacity and explore a more strengthened utilization of it in pursuit of its mission.
* Increasing use of ICT based services e.g. financial services, e-government etc which can also be exploited to advantage but also the increased vulnerability to cyber security issues e.g. hacking, identity, theft and other cyber crimes.
* A large number of users have come to rely on ICT based information sources including on health matters yet the veracity of such information is hard to determine and there are cases of intentional manipulation such as the use of ICT in radicalization.
* The uncontrolled access to the internet coupled with insufficient guidance on its correct use especially amongst young people in eroding the co-socialization adults played in the negative social development and have promoted value deterioration.
* Because technology s rapidly changing it is expensive to keep and in its plan the organization must prioritize longer term use technologies

**Environmental Situation**

 As noted early, K-KCP has recognized that it must play a role in environmental management as the deteriorating environmental context affects all its programmes. While reflecting on the environmental factors likely to affect the implementation of the plan. Some issues noted include:-

* Increased competition for limited natural resources like water, forest resources and pasture that often lead famine.
* Unpredictable weather patterns such as rainfall, draughts which impact on the livelihoods of the targets but also could hinder some K-KCP activities.
* Scarcity of some resources such as wood fuel that has seen poor families resorting to some environmentally and health wise dangerous alternatives like burning practices to cook.
* Difficulty in accessing some areas due to bad weather and poor road networks.
* Increasing incidences of lifestyle and environmental diseases noted even amongst the young people.

**Key Strategic Issues**

Based on the analysis of the internal and external operational environment and taking into consideration the mandate the organization has, the planning process reflected on the most critical strategic issues K-KCP would focus on in the 2018 – 2021 Strategic Plan.

**Key strategic issues identified and prioritized by K-KCP**

|  |  |
| --- | --- |
| **Programme Areas** | **Strategic Issues** |
| **K-KCPs Institutional Development** | * Adequate resources, resource bases and financial sustainability.
* Adequate leverage of technology especially the use of ICT in its operation e.g. an efficient and reliable Management Information System (MIS).
* Adequate capacity and required capacity building mechanisms to effectively undertake its mandate (human and material capacity).
* Sufficient and appropriate structures and infrastructure.
* Strong and operational governance and management systems / policies / structures.
* Role, clarity and separation based on core functions and competencies.
* Effective networking, collaborations and strategic partnerships.
* Growth in relevant programme areas and response capacity to relevant emergent issues.
* Ownership of K-KCP programmes by all-everyone should be versed with what K-KCP does.
 |
| **HIV PREVENTION:****Biomedical Intervention:**  | * To support in scaling up high yield HIV testing services (HTS).
* To support in rolling out early infants circumcision as per the county and national guidelines.
* To provide support in blood safety.
 |
| **ACCELERATED CARE AND TREATMENT** | * Diagnose and link 90% all PLWHIV.
* Start and retain 90% of those diagnosed on ART.
 |
| **BEHAVIOURAL INTERVENTIONS** | * To support in behavior formation targeting adolescents and the youth.
* To support in social and changed communication methods.
* To support in condom use and distribution within the local communities.
* To support in the service delivery by mentor mothers within the local communities.
* To support for 100% use of policy enactment targeting key population.
* Adherence and counseling.
* Promote self-disclosure.
* Establish and support psychosocial support groups.
* Scale up public education and treatment literacy.
* Partner tracing notification.
 |
| **STRUCTURAL INTERVENTIONS**: | * To support in addressing gender norms and socio-cultural barriers that increase risk of HIV infections.
* To support in the employment of cash transfer programmes to keep boys and girls in school.
* To support in the enhanced food security for PLHIV.
* Implement stigma reduction campaigns.
 |
| **SYSTEMS STRENGTHENING COORDINATION AND MANAGEMENT** | * Enabling policy and legal environment.
* Human Rights Protections and Stigma reduction for the key population and PLHIV.
* Integration of HIV with SRH maternal and child health services.
* Coordination and management of the community response.
* Mainstreaming / integration of HIV/AIDS.
* Health and community systems strengthening.
* Health and community systems strengthening.
* Research and strategic information management.
* Sustainable financing and resource mobilization.
 |
| **STRUCTURAL INTERVENTIONS** | * To support in addressing gender norms and socio-cultural barriers that increase the risk of HIV infections.
* To support in the implementation of cash transfer programmes to keep girls and boys in school.
* To support in the Enhanced food security fore PLHIV.
* Implement stigma reduction campaigns.
 |

NB: The issues are based on the undesirable situations and problems noted from the context analysis and feedback from the stakeholders. They constituted the core areas that K-KCP will focus its energy and resources in this strategic plan in order to pursue the organization vision. The issues inform the strategic objectives, specific objectives and specific outcomes to pursue key strategies to deliver the outcomes in the plan. Besides the issues, K-KCP identified a few mandatory things that K-KCP will need to ensure it carries out within its plan:

**These are**:-

* Increase the number of community Resource Persons (CRP) it is working with and equip them with required knowledge and skills on how to pass on the message.
* Continuously enhance its staff capacity with more skills and increase staff capacity outlay (manpower) and strengthen networking (NGOs, community leaders).
* Continuous evaluate and review approaches adopting current best practices and evidence based practice.
* Adopt technology in the sourcing of funds, program planning, execution and reporting as well as administrative processes.
* Plan for strong exit strategies when initiating new projects and running them.
* Increase / intensify the follow up and referrals of identified cases of HIVC/AIDS.

**3.0 IDENTITY AND STRATEGIC DIRECTION**

**3.1 Identity Statement**

K-KCP identity is defined in its vision, mission and core values. During the strategic planning process, the planning team reflected on and reaffirmed the vision, mission and core values.

**Vision:**

**K-KCP Vision** is a statement its desired result should accomplish when it delivers value to its members. K-KCPs picture of future success. It depicts the future ideals that K-KCP aspires to describe what K-KCP stands out for. The Vision therefore defines the key compelling criteria that will signify success and thus focus commitment and attention at all times.

**K-KCPs Vision is:** Creating a Community of Social Progress for All!!!

**Mission Statement**

**K-KCPs Mission** defines the organization purpose i.e. the purpose for which K-KCP was founded and why K-KCP exists. The mission statement defines what the organization intends to accomplish and the needs it is endeavoring to serve. It serves as a guide for K-KCPs day-to-day operations and a foundation for future decision making.

**K-KCPs Mission is:** Bringing Hopes to A hopeless Child!!!

**Core-Values:**

Values are enduring, passionate and distinctive core beliefs. They are guiding principles that never change. Values are why we do what we do and what we stand for. They are beliefs that guide the conduct, activities and goals of the organization. Values are deeply held convictions, priorities, and underlying assumptions that influence our attitudes and behaviors’. They have intrinsic value and importance to those inside the organization. The core values are part of our strategic foundation.

An organization’s values can dominate the kinds of strategic direction it considers or rejects. When values and beliefs are deeply ingrained and widely shared by leaders and members, they become a way of life within the organization and they mold organization strategy.

In order to pursue its mission and achieve its vision, KEL-KAMARAMI reaffirmed the core values below to guide it. These and must model the behavior of all members.

* **Voluntarism:**

The spirit of voluntarism is critical to our approach. We emphasize giving back freely and enthusiastically.

* **Innovative:**

KEL-KAMARAMI promotes being innovative and embraces continuous improvement in all its services and delivery engagements.

* **Diligence:**

In KEL-KAMARAMI you are expected to be diligent in all your engagements and discharge duties with genuine passion and dedication.

* **Respect:**

 KEL-KAMARAMI values and seeks always treat all people with utmost respect.

* **Integrity:**

KEL-KAMARAMI strives to undertake all engagements with the highest level of professionalism and integrity.

* **Diversity:**

 At K-KCP we always embrace people irrespective of their culture, tribe, gender, status and religion.

* **Team Work:**

 Uphold teamwork and collaboration in order to realize the synergies of working together.

**4.0 STRATEGIC GOAL AND OBJECTIVES**

This chapter consolidates K-KCPs planned strategic responses to the strategic issues that have been prioritize to be addressed in the next three years. The responses are planned to consolidate the organization’s strengths and exploit the opportunities that it has in its environment as it strives to deliver its mandate and pursue its vision.

 **OUTCOMES**

To contribute to its strategic goal, KEL-KAMARAMI will focus on four strategic objectives based on its result areas (sub-programmes) and cross cutting sub programmes over the next three years. A fifth strategic objective on institutional development of KEL-KAMARAMI is added to ensure a strong organizational foundation upon which the sub-programmes can be efficiently and effectively implemented. KEL-KAMARAMI also prioritizes strong performance management through a comprehensive monitoring and evaluation system and practice.

**The sub program areas are**:-

* HIV/AIDS behavior interventions.
* Adolescent and the Pead (young children).
* Men and pregnant women living with GIV/AIDS.
* PLHIV and discordant couples.
* People in prisons and remand settings.
* OVC, PWD widows and widowers.
* Culture.

In all the sub programmes, KEL-KAMARAMI will continue to base its interventions on the three pronged approach of training of community resource persons, provision of counseling and psycho-education.

For each sub programme KEL-KAMARAMI identified strategic objective, expected outcome, expected output(s) and key strategies (activities) to deliver them. The strategic objectives, expected outcomes, outputs and key activities are summarized below:

**STRATEGIC OBJECTIVE, EXPECTED OUTCOMES, EXPECTED OUTPUTS AND ACTIVITIES**

|  |
| --- |
| **STRATEGIC OBJECTIVE ONE:-****REDUCE NEW HIV INFECTIONS IN THE COMMUNITY BY 75%** |
| **Expected Outcome(s)** | **Expected Outputs** | **Key Strategies (Activities)** |
| 1. Reduction in further spread of HIV and related infections, especially amongst the most vulnerable and young people.
 | * Availability of community owned education services by community Resource persons representing all levels of society trained on HIV/AIDS.
* Behaviors Interventions whilst using a variety of participatory educational community-building approaches.
* Increased access to a variety of professional counseling.
* Availability of Health Promotion on HIV/AIDS.
 | * Training and Follow-up for new and previously trained HIV/AIDS community Resource Persons.
* Provision of Professional Counseling services.
* Advanced Training of Community Resource Persons.
* Review and redesigning of the training context, structure and teaching materials.
* Conduct training and counseling on HIV/AIDS.
 |
| **STRATEGIC OBJECTIVE TWO:-****REDUCE AIDS RELATED DEATHS AND MORTALITY BY 25%** |
| **Expected Outcome(s)** | **Expected Output(s)** | **Key Strategies (Activities)** |
| Improved support in scaling up high yield HIV testing services HTS. | * Increased support in early infant circumcision.
* Diagnose and link 90% of HIV/Infection pregnant mothers with care givers.
 | * Training by community Resource Persons on early identification of the infected and
* Provision of HIV/AIDS testing at designated.
 |

 **STRATEGIC OBJECTIVE THREE:-**

**REDUCE HIV RELATED STIGMA AND DISCRIMINATION BY 50%.**

|  |  |  |
| --- | --- | --- |
| **Expected Outcome(s)** | **Expected Output(s)** | **Key Strategies (Activities)** |
| Improved Nutrition of those living with HIV/AIDS through Economic Empowerment. | * Availability of food supplements.
* Availability of transport for infected persons to access care.
* Availability necessary upkeep including clothing, food and shelter and medicine.
 | * Training on the importance of food supplements by community Resource Persons.
* Training on income Generating Activities for managing basic livelihoods.
* Provision of seed capital for IGAs.
 |
| **STRATEGIC OBJECTIVE FOUR:-****A SOCIETY WHERE PEOPLE HAVE A HARMONIOUS AND HEALTHY RELATIONSHIP WITH THEIR CULTURE:** |
| **Expected Outcome(s)** | **Expected Output(s)** | **Key Strategies (Activities)** |
| 1. Improved awareness action willingness and competence to address basic cultural challenges in own lives.
 | * Integrated Education on culture for community Resource Persons (CRPs).
* Integrated Education on culture during all K-KCP professional counseling and psycho-education services.
* Availability of health promotion courses and counseling particularly on managing culture in the face of societal Break down and its Results.
 | * Training of all community Resource Persons (CRPs) on cultural issues that affect our work.
* Provision of Health promotion courses and counseling.
 |
| **STRATEGIC OBJECTIVE:- FIVE****K-KCPS INSTITUTIONAL DEVELOPMENT - THROUGH QUALITY, EFFICIENT SUSTAINABLE ORGANIZATIONAL STRUCTURE, SYSTEMS, PROCESSES AND CAPACITY**.  |
| **Expected Outcome(s)** | **Expected Output(s)** | **Key Strategies (Activities)** |
| 1. Improved services by KEL-KAMARAMI staff and TOTs.
2. Improved governance and management of KEL-KAMARAMI
3. Strengthened sustainability.
 | * Increased knowledge and skills in select capacity areas for K-KCP and TOTs.
* Improved Institutional and staffs’ capacity for structured implementation of K-KCPs aim/ objective and Goals.
 | * Continuous Education of staffs/TOTs.
* Development of competent qualified and motivated Human Resources following K-KCPs new organogram.
* Continuous capacity building of K-KCP staffs.
* Review K-KCP management structure to ensure it is well functioning, competent and relevant.
* Carryout required consultancies e.g Annual Financial Audit succession planning and sustainability strategies.
* Establish mechanisms for well qualified and competent counseling supervision.
* Ensure relevant legal arrangements are in place especially regarding individual, organizational, professional, business, financial and Human Resource requirements.
* Avail adequate office and building requirements, such as Accommodation and Equipment, and Vehicles, Public Transport and other logistical arrangements.
* Partnerships and Networking with other relevant organization(s) and committees within and outside Kenya in which mutual capacity is strengthened and responsibilities well defined.
* Identification of at least one partner with strong organizational base and professional Educational capacity interested in educational research and organizational capacity-building.
* Continuous review of K-KCP’s networking and partnerships and their documentation with PLHIV and orphans as well as people with Disability Education and treatment.
* Well-designed programme documentation, such as brochures, website(s), photographs, documentaries and other for promotive purposes.
* Establishing a caring and conducive working environment in which the health and welfare of all workers receive adequate attention.
 |

**STAKEHOLDER ANALYSIS**

To achieve its vision and mission, KEL-KAMARAMI will work with a number of partners and collaborators. Such like-minded stakeholders offer opportunities for compliance, synergy and capacity development both financial and technical. The organization has expectations from its stakeholders, but equally has a responsibility to satisfy the stakeholder expectations through a clearly defined networking and collaboration strategies and memoranda of understanding. Key stakeholders include:

|  |  |  |  |
| --- | --- | --- | --- |
| **STAKEHOLDER** | **RESPONSIBILITY / WHAT THE DO** | **POSSIBLE AREAS OF COLLABORATN** | **KEL-KAMARAMI EXPECTATION OF THE STAKEHOLDERS.** |
| **KEL-KAMARAMI BOARD DIRECTORS** | Policy formulation provides direction and leadership, solicit and administer the funds. |  | Provide funds to the organizations.  |
| **KEL-KAMARAMI SECRETARIAT** | Plan, implement program activities within Siaya. |  | Loyalty, hard work. |
| **VOLUNTEERS** | Link KEL-KAMARAMI to the community | Referral  | Role models, volunteerism.  |
| **COMMUNITY** | Actively participate in trainings.  | Offer community Resource Persons. | Support K-KCP socially and financially. |
| **MINISTRY OF HEALTH AT COUNTY AND NATIONAL LEVEL** | Treatment, provision of data, health alerts.  | Capacity building, Resource Provision (technical).  | Continuously working together. |
| **SCHOOLS, COLLEGES AND UNIVERSITIES.**  | Provide target population. | Training workshops and provision of counseling services.  | Continuously support K-KCP in research capacity building.  |
| **DONOR** | Provide financial and technical assistance.  | Support new programmes. | Help in building capacity of staff at KEL-KAMARAMI. |
| **ADMINISTRATION AT COUNTY AND NATIONAL LEVEL.** | Link KEL-KAMARAMI to the community. | Community mobilization. | Provide security and coordinate meetings in their areas. |
| **RELIGIOUS ORGANIZATIONS.** | Link KEL-KAMARAMI to the community.  | Provide venues for training.  | Continuous support. |

**MONITORING AND EVALUATION:**

The objective of monitoring and Evaluation (M&E) is to measure progress of implementation of strategies in the strategic plan period. The system will provide answers to questions of relevance, efficiency, effectiveness and correct problems while identifying from the external environment, best practices for replication. Effective implementation of programmes depends upon the clarity of measures and proper alignment of resources, designation of responsibilities and coordination; hence the need for an effective and efficient M & E system.

**5.1 Overview of K-KCP Monitoring and Evaluation:**

Monitoring and Evaluation is a management tool that is necessary for effective implementation of projects and programmers’ leading to achievement of stated organizational goals and objectives. The system provides a systematic feedback mechanism. A routine mechanism will identify as early as possible any shortcomings with regard to disbursement of funds, delivery of other inputs, execution of activities or production of outputs to meet the expected outcomes, in order that corrective and timely measures can be undertaken.

Monitoring will be undertaken on a continuous basis while evaluation will be carried out twice during a mid-term review and End of project evaluation. K-KCP, through the evaluation process of the strategic plan, will critically re-examine the strategic objectives, outcomes, outputs and activities to ensure delivery of expected results. The process will help compare the actual attainment of targets set and identify the reasons for shortfalls or achievements made for the documentation of “Best Practices”.

In order to achieve effective performance-based monitoring and Evaluation of the implementation of the strategic plan. KEL-KAMARAMI will focus on utilization of programme resources; adherence to implementation plans; achievement of planned targets and problems encountered will help track progress and demonstrate impact of a given project, programme or policy and thus assist K-KCP to focus on outcomes and impacts. These will be addressed in line with the performance contracts and Annual work plans. The Monitoring and Evaluation of the strategic plan will be all-inclusive and involve:-

* Definition of the main objectives and targets so that all actors have a common understanding of them.
* Selection of indicators for measuring the efficiency and effectiveness of activities, the quality and effectiveness of outputs, results, outcomes and impacts;
* Emphasis on self-monitoring at all levels and stages;
* Identification of ways and means for feedback, lessons learnt and replication of best practices; and
* Identification of stakeholders involved in monitoring, Learning and Evaluation at all levels of programme /implementation.

An overall monitoring plan based on the strategic plan log frame is annexed to guide the development of annual monitoring and evaluation plans.

**INSTITUTIONALIZATION OF M & E AT KEL-KAMARAMI:**

KEL-KAMARAMI will establish an effective, performance based M & E system. A liaison person will take responsibility for M & E. The officer will provide information on whether existing or new approaches that have been developed and adopted are working effectively and report on the progress, problems encountered and offer solutions. The technique of Monitoring and Evaluation that will be used by K-KCP are ratio analysis, budgetary controls and progress reports.

* **Ratio Analysis:**

This technique captures issues related to efficiency of the goals. K-KCP will calculate the ratios, quarterly, semi annually and annually and the actual results compared with the targets that were established. The differences between the targets and actual levels will be identified and further analysis carried out to identify causes of the differences. Thus analysis will revoke appropriate remedial action by the K-KCP management.

* **Progress Reports**

These will be prepared by the heads of programmes and will be undertaken regularly or coincide with budgetary cycles. Reports will describe actions taken by programmes, department specific outcomes, departments and sections / units towards achieving specific outcomes and strategies of the plan and may include costs, benefits, performance measures and progress to date. Highlights of major achievements will be communicated to stakeholders as appropriate.

* **Annual Report Card:**

At the end of each year, a report will be produced and released to stakeholders. It will evaluate the years activities related to the plan and indicate how K-KCP has implemented the plan. This will be in line with the provision of the performance contracting framework set in place by the government to govern operations of public corporations and institutions.

* **Linking M & E to performance Contracting and staff Appraisal**

For the implementation of the plan to be effective, the M & ED will be an integral post of KEL-KAMARAMI performance management system and will be linked to staff appraisal and reward staff that meet or exceed, their planned targets will be given commendation and rewarded accordingly. During the plan period, KEL-KAMARAMI will seek further improvements in order to make the M & E system effective evaluation. The office of the program coordinator will coordinate both internal and external periodic evaluations. These evaluations will focus on: efficiency, effectiveness, impact, sustainability, and relevance of interventions. The programme coordinator will plan to have two (2) external evaluations: midterm review and final evaluation. A mid-term review of the strategic plan will be done at the end of the first phase in the second year to access the progress with a view to check whether the implementation is still on tract based on the agreed plans. The final evaluation will be conducted at the end of strategic plan period.

* **Evaluation Tools**

A variety of tools will be used based on advanced and best practices in the corporate sector. Some of the tools / mechanisms that will be used during evaluations are: questionnaires, stakeholder meetings; focus group discussion guides; logical framework matrix; observation guides; and document / literature review.

**6.0 Appendix 1 – Logical Framework Matrix**

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| --- | --- | --- | --- | --- |
| **Narrative Summary** | **Expected Outcomes** | **Indicators** | **Means of Verification** | **Critical Assumptions** |
| **Objectives and Activities** |
| **Strategic Objective** | 1. **Reduce new HIV infections in this community by 75% by 2021**
 |
|  | * Reduction in further spread of HIV and Related infections especially among vulnerable children.
 | * Percentage of children/young people (15-24) or at risk who correctly identify ways of preventing sexual transmission of HIV.
* Number of persons trained / sensitized by client area / program area.
* Number of cases receiving redress.
* Percentage of women and children with advanced HIV infections on treatment
 | * Monthly treatment site reports.
* Reports sent to M & E unit.
* Training Reports.
* Referral forms filled.
 | * Effective community participation.
* Stable social political environment.
* Availability of funds.
 |
| **Strategic Objective :2. Reduce AIDS related mortality by 25%.** |
| * Diagnose and link 90% of PLHIV.
* Start and retain 90% of those diagnosed on ART.
 | * Improved drug (ART) uptake.
* Improve sexual behavior.
* Increased awareness on the HIV/AIDS issues.
 | * Number of people i.e PLHIV increased.
* Guaranteed Survival.
 | * List of number of people (PLHIV) tested.
* List of number of PLHIV retained on ART.
 | * Community Resource Persons undertake proper Health promotions.
* Cooperation by Line Ministry of Health.
* Community mobilization done successfully.
 |

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| **Narrative Summary**  | **Expected Outcomes** | **Indicators** | **Means of Verification** | **Critical Assumptions** |
| **Objective and Activities** |
| **Strategic Objective: 3. Reduce HIV related stigma and discrimination by 50%** |
| * Increased peer and professional counseling by community Resource Person.
* Improved awareness and willingness and competence to address HIV/AIDS issue.
* Improved services by K-KCP staff and community Resource Persons.
 | * Reduced prevalence of Abuse and discrimination of PLHIV.
 | * Number of PLHIV accessing a variety of professional.
* Number of people (PLHIV) accessing psychological education.
 | * List of Number of people registered for counseling.
* List of Number of centers opened for health promotion.
* List of Number of people (PLHIV) accessed by community Resource Persons.
 | * Economic and social stability in the project area.
* Cooperation by partners.
* Willingness by the community to accepting intervention.
 |

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| **Narrative Summary**  | **Expected Outcomes** | **Indicators** | **Means of Verification** | **Critical Assumptions** |
| **Objective and Activities** |
| **Strategic Objective: 4. Increased domestic financing by 50%** |
| * Sensitization of the affected to start income generating projects.
* Promotion of Home Based Care.
* Provision of seed capital.
 | * Availability of peer and community microenterprises.
* Increased Nutritional levels within the affected community.
 | * Improved sustainability both economically and socially of people in the project area.
 | * Decreased number of PLHIV seeking economic assistance.
* Existence of a revolving fund for the affected community.
 | * Economic stability.
* Social stability.
* Cooperation by the affected people.
* Availability of initial funding from Donor.
 |

**7.0 Detailed Implementation Plan (YEAR 1) – (2018 – 2019)**

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| Strategic Goal, Strategic Objectives and Activities |
| Strategic Goal : CHLD SUPPORT @ 1,000 CHILDREN  |
| Strategic Objective Activities: FEEDING PROGRAMM (2018 – 2019) (2019 – 2020) (2020 – 2021) FY-ALL YEARS |
| * Break Fast, Lunch, Supper
 | **Cost per child per day.** | **Cost per child per Month** | **Yearly Total** |
| Breakdown  | (1,000 @ Shs. 200) | (200 x 30 x 1,000) | (200 x 30 x 1,000) x 12 months = Kshs. 72 Million |
| Strategic Goal : CHILD SUPPORT @ 1,000 CHILDRENStrategic Objective : SHELTERActivities (2018 – 2019) (2019 – 2020) (2020 – 2021)  |
| * Breakfast , Lunch, Supper Cost per child per day Cost per child per month
 | Yearly Total |
| Breakdown  | 1,000 @ Kshs. 5,000= Kshs. 5 Million |
| Strategic Goal : CHILD SUPPORTStrategic Objective: EDUCATIONActivities (2018 – 2019) (2019 – 2020) (2020 – 2021) | Yearly Total |
| School Fees @ 1,000 x 1,000Uniform @ 3,000 x 1,000Books @ 500 x 1,000  | = 1,000,000.00= 3,000,000.00= 500,000.00 |
| **Total 4.5 Million** |

**8.0 Detailed Implementation Plan (2018 – 2019) FY – YEAR – 1**

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| --- |
| **Strategic Goal, Strategic Objective and Activities** |
| **Strategic Goal : COMMUNITY MOBILIZATION AND AWARENESS** |
| **Strategic Objective: SENSITIZING OPINION LEADERS** |
| **Activities** | **Transport @ Kshs.** | **Lunch****@ Kshs.** | **Allowance****@ Kshs.** | **Total Cost** |
| * Meetings with School Administrators (Primary and Secondary)
 | 500 x 210 | 600 x 210 | 1,500 x 210 x 3 | 2,074,000.00 |
| * Meetings with Health Officials (Hospital and Clinics)
 | 500 x 20 | 600 x 20 | 1,500 x 20 x 3 | 1,012,000.00 |
| * Meetings with County / Sub-County Officials
 | 500 x 5 | 600 x 5 | 1,500 x 5 x 4 | 30,000.00 |
| * Conducting Awareness Campaigns (brochures, T-Shirts and Caps) @ 3,000.00
 | 10,000 x 5 | 5,000 x 5 | 1,000 x 5 x 10 | 125,000.00 |
| * Organization of Trainings / Workshops (TOTs of Community Resource Persons)
 | 1,000 x 500 x 3 | 6,000 x 3 | 2,000 x 3 | 1,740,000.00 |
| * Follow-Ups (MONITORING AND EVALUATION)
 | 10,000 x 2 | 5,000 x 5 | 1,000 x 5 x 3 | 70,000.00 |

**9.0 Detailed Implementation Plan – YEAR 1**

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| **Strategic Goal, Strategic Objective and Activities** |
| **Strategic Goal : SENSITIZATION OF THE INFECTED AND AFFECTED** |
| **Activities** |
| * Identification and Recruitment.
* Status Identification
* Percentage / Guardianship Affirmation.
* Level and Need (Nutrition Food, Shelter, Clothing, School)
* Counseling by Community Resource Persons
* Support by K-KCP Staff.
* Regular Follow-up.
* Collaboration with Line Ministries.
 |

**10.0 Implementation Plan YEAR 2 (2019 – 2020)**

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| **Strategic Goal, Strategic Objective and Activities** |
| **Strategic Goal :** CHILD SUPPORT – As in Year 1 |
| **Strategic Goal :** COMMUNITY MOBILIZATION – As in Year 1 |
| **Strategic Goal :** MONITORING AND EVALUATION - As in Year 1 |
| **Strategic Goal :** MID-TERM EVALUATION |
| **Strategic Objective:** Comprehensive Assessment of the effectiveness of the Intervention in Siaya County @ Consultancy Cost of approximately Kshs. 3 Million  |
| **Strategic Goal :** BUILDING OF PROJECT OFFICE, KINDERGATEN AND DISPENSARY.**Strategic Objective:** Identification of Land, Purchase and Construction.  |

**11.0 Implementation Plan YEAR 3 (2020 – 2021)**

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| **Strategic Goal, Strategic Objective and Activities** |
| **Strategic Goal :** CHILD SUPPORT – As in Year 1 |
| **Strategic Goal :** COMMUNITY MOBILIZATION – As in Year 1 |
| **Strategic Goal :** REVIEW OF THE STATUS OF THE PROPOSED ORPHANAGE CENTRE WITH DONOR |
| **Strategic Goal :** MONITORING AND EVALUATION - As in Year 1 |
| **Strategic Goal :** INITIATE SUSTAINABILITY MECHANISMSStrategic Objective : START INCOME GENERATING ACTIVITIES FOR THE PROJECT |
| **Strategic Goal :** END OF PROJECT EVALUATION**Strategic Objective:** A comprehensive Outcome Assessment of the Project by a Consultant @ approximate cost of Kshs. 3 Million.  |