

Background to the Kick-off meeting:

In a joint meeting between Mainline and Nai Zindagi, in November 2011 a decision was taken to plan a project Kick-off meeting for Asian and Kenyan partners to establish a framework of future cooperation in order to implement the project for people using drugs in Indonesia, Kenya, Nepal and Pakistan. This project is part of the larger program 'Bridging the gaps: health and rights for key populations', funded by the Ministry of Foreign Affairs of the Netherlands.

Mombassa, Kenya was selected as the venue for this meeting in order to show commitment that Mainline and its Asian parters have towards the Kenyan organisations, who are new to this relationship and to provide an opportunity for the Asian partners to get acquainted with Kenya and the Kenya specific issues related to drug use.

Primary objectives of the meeting:

- Partners to have an improved understanding of each others background, experience, work environment and to know each other better through sharing of experiences;
- Partners to have a clear idea of the overall program Bridging the Gaps and in what way and manner the project for People Using Drugs (PUD) is part of that;
- Each partner to have a good understanding of what is expected of them as individual organisations and as part of the project;
- All partners understand their joint responsibility towards each other, the project PUD and program Bridging the Gaps;
- The structure of the program and the project, contracts, finances, reporting and other mechanisms of the project are clear to all;
- All partners understand the role of the Project Management Team (PMT) constituted by Mainline and Nai Zindagi for efficient project management;



Welcome and Introduction:

Ms. Karen Kraan welcomed the participants and gave a presentation of the overall agenda and program of the Kick-off meeting and responded to the questions from the participants.

'World Map' was an ice breaker - to give participants the opportunity to share personal, organisational and country level information and experience among themselves and to relate to common challenges. Participants were able to appreciate the wide experience among partners and how each could benefit and eventually improve the quality of life of PUDs. World Map also creates a visual display of the distance between people making a project of this size challenging, and at the same time creating a feeling of shared responsibility and togetherness.

History of Mainline in Asia, its partners and the program:

Ms. Janine Wildschut highlighted the long standing partnership Mainline has had with the Asian partners, Nai Zindagi, LARAS and Youth Vision since 2005 in two projects supported by the Ministry of Foreign Affairs of the Netherlands: MFSI 'From Margins to Mainstream' - 2005 and MFSII 'Extending the Continuum' which ended in 2010.

She emphasised that Mainline works alongside 'with' its partners to ensure needs based and effective programming to provide quality interventions and services to PUDs in varied environments and different circumstances. Partners that Mainline has worked with have faced numerous challenges in their work but have always managed to move ahead and continue to serve their client base. Today the three Asian organisations are key players in their own countries and the Asian region and Mainline has always stood with them in support and through crisis.

The fact that Mainline has decided to partner with Nai Zindagi in the Management of this program is a unique decision and is further evidence of its commitment to ensure partner representation at the decision making levels of the Program and Project.

She further elaborated that in the years to come a similar partnership would be established with Kenyan partners and among Kenyan and Asian partners to establish service based on a continuum of care for PUDs. She then distributed the latest publication by Mainline, titled "Exposure" among the participants.

Overview of the program 'Bridging the Gaps' and project 'PUDs':

It was explained that the program is funded by the Ministry of Foreign Affairs of the Netherlands for a period of 5 years and an amount of Euro 35 million has been allocated. An additional Euro 11.7 million will be contribution from the partners through partners and other sources.

Seven Dutch based partners have entered into an alliance and the alliance is led by Aids Fonds in 16 countries with 102 local parters in the respective countries. Mainline is represented on the Program Board and the Program Team and have a substantial share of the funding. The structure, principles, objectives and outcomes were explained in detail to the participants.

It was explained that Mainline will have the overall responsibility of representing partner interests in the alliance and that there is a possibility of having a Partner Forum which will represent interests of the partners at the program level to advise the Program Board.

Every local partner is free to collaborate with any other local partner in every country individually or through Mainline. If necessary, Mainline can bring questions and issues to the Program Board or the Program Team.

The kick off participants are invited to share their ideas about how to represent the project at the program level.



Group work:

Participants were divided into different groups to enlist a series of questions and clarifications they would further need related to the following:



Budget and finance related



Contract and project related



Structure at various levels within the Program and Project

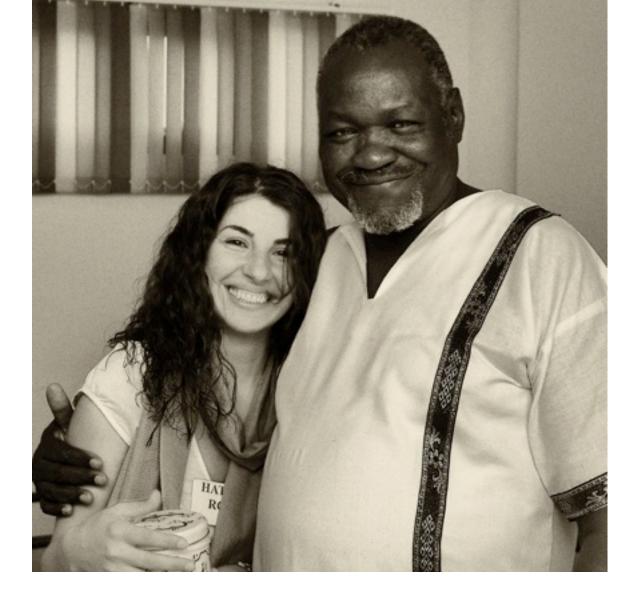


Project activities



Linkages and networking

The questions and responses are attached as Annex A to this report.



Presentations by the partners:

Each partner presented their organisation, area of expertise and service delivery, client base and environment and responded to questions raised by the participants. Key points from the presentations are mentioned below and the detailed presentations will be provided.

Reachout Centre Trust, Kenya: Its primary mandate is to provide preventive and treatment services to those affected by or vulnerable to drug abuse, HIV and AIDS in the Coastal area of Kenya. They cover 5 districts with HIV risk reduction services, VCCT, condom distribution, out patient drugs and alcohol addiction treatment and inpatient drug treatments services. They work in close collaboration and network with local communities and government.

Nai Zindagi, Pakistan: In an environment of increasing drug related HIV in Asia and diminishing resources, the greatest challenge is the sustainability of large scale harm reduction programs. Harm reduction organisations need to think outside the box and look towards innovative ways and mechanisms to ensure resource mobilisation for programs. Examples of self generating income and engaging the corporate sector in countries was emphasised. NZ is currently the principal recipient of a nationwide contract with the Global Fund to expand services to PWIDs, their spouses and children.

NOSET, Kenya: Presented an overview of the range of services they offer through outreach and drop in centres in Nairobi. The provide counselling, VCCT, shelter and nutrition to PUDs in addition to drug treatment services. Needle Exchange is not yet allowed by law in Kenya and is a gap that organisations are addressing in a dialogue with the Government. A need to carry out a baseline assessment was expressed.

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<u>Youth Vision, Nepal</u>: Established in 1988 and working wit PUDs in Kathmandu, central, eastern and western Nepal with partner organisations like Wisdom Foundation and Naya Goreto. The primary objective of YV is to achieve a stigma free society for PUDs and affected by HIV and AIDS by empowering them. YV provide a wide range of services from street based harm reductio services including OST and drug treatment, rehabilitation and AIDS care and support services.

MEWA Drug treatment centre, Kenya: Is dedicated to promoting individual, family and community wellness through a variety of substance abuse and behavioural health services to Kenyans in the rural setting as well as in Mombasa. They provide inpatient/out patient drug treatment, medical detoxification, residential 4 month rehabilitation, family therapy and aftercare. They have a comprehensive community based health out-reach for HIV prevention and treatment which includes VCCT, risk reduction counselling, access to TB treatment and STI screening and treatment services.

LARAS, East Kalimantan, Indonesia: Provides a range of services to affected key populations and works closely in partnership with a wide range of stake holders in East Kalimantan. LARAS will provide in addition to their existing services quality HIV prevention, drug treatment, economic integration and HIV and AIDS related services to PUDs with a particular focus to improve human rights of PUDs. They will integrate specific services for PUDs within the general health care system.

OMARI, Kenya: Founded as a community based organisation in 1995 to provide substance abuse treatment to drug users with a particular focus to prevent the spread of HIV. The project provides HIV risk reduction counselling and testing and advocacy to create awareness among stake holders. Omari works in Malindi, Magarini and Lamu districts in the Coast of Kenya.

All partners share initial thoughts and ideas about what the new partnership with Mainline could entail for their organization. There are many gaps to fill and the needs assessments will provide a basis on which to make choices for the implementation of activities.

A valuable overarching point that comes out of the discussion is the strategy with which organizations deal with Harm Reduction and how that evolves. The Asian partners share their experience in moving from a drug-free strategy to a strategy that is about Harm reduction; reducing the (health) risks that are involved for people who use drugs without necessarily focusing on abstinence. The African partners share their experiences with a drug-free focus, which can include Harm



Reduction elements. The African partners have a larger focus on detox and rehab, this also has got to do with the legal environment in Kenya. The conclusion from the discussion is that there is a lot to learn from each other and that this learning should be encouraged.

Contracting:

Ms. Karen Kraan highlighted and explained the contract and contractual obligations in depth in a detailed presentation.

She explained how the seven Dutch organisations had entered into an Alliance agreement and the responsibilities, channels of communication and cooperation within the Alliance set up was explained.

The role of Aids Fonds as a lead agency representing the Alliance partners and responsible for overall reporting to the Ministry of Foreign Affairs (MoFa) of the Netherlands was discussed. Ms. Kraan also clarified the terminology used in the MoFa documents related to contracting and reporting.

The role of Mainline within the Alliance and with its seven partners in Asia and Africa was discussed in respect with contracts, related to financial and technical reporting. Various aspects of the contract between Mainline and its partners were explained and clarifications sought by the participants. It was pointed out that the overall responsibility to the Alliance is with Mainline and not the partners.

Mr. Christian Gladel, Program Manager for the lead agency Aids Fonds introduced himself and his role. He informed the participants that he is the link between the program team (which he chairs) and the program board and is responsible for the overall coordination of the program. He is responsible for reporting to the MoFa on behalf of the Alliance and Aids Fonds.

He stressed upon the fact that Aids Fonds or the Alliance have no intentions of dictating, modifying or changing the ethos of their partner organisations, but in fact wish to work alongside the existing mandate and structures of the partners and assist in addressing gaps in order to improve performance and quality of services.

Summary of Day One:

On day one the following main points need to be highlighted:



There is a wide range of experience within the Mainline partners from Asia and Kenya. The partners cover the entire spectrum of the continuum of care from street based harm reduction services to skills training and employment for PUDs, including drug treatment, abstinence based rehabilitation programs and a wide spectrum of HIV and AIDS related services.



Different visions about Harm Reduction and drug treatment were raised and there is a need to elaborate more.



Feedback of partners about the project and the whole program is much appreciated. Partners are encouraged to give feedback.



Explanations and interpretation of terms: to reach a good and shared understanding of the terms (like Harm Reduction) needs to be an ongoing process.



Particularly for Kenyan partners there is a need to further elaborate on the advantages of possibly moving fromand assist them in the transition from an abstinence based approach to an approach that can comfortably encompasses harm reduction strategies. The Asian partners particularly from Nepal and Pakistan have been through this transition a decade ago in their own countries and can provide first hand knowledge and experience.



As the Kenyan partners are new to this joint-venture with Mainline, there is a need to provide additional coaching to them to understand the mechanisms and processes of engagement.



Participants engaged freely and with enthusiasm during the discussions and sessions.

Financial Management and Reporting:

Ms. Hatun Eksen gave a detailed presentation of various aspects of financial management and reporting related to the MoFa program.

Ms. Eksen explained the following essential components in detail:



Overall budget and structure of the program 'Bridging the Gaps'



Overall budget and structure of the project 'PUD-Mainline'



Requirements of financial reporting and reporting deadlines as stipulated by the MoFa



The requirement by the MoFa to raise 25% co-funding in respect of the funds allocated by the MoFa to the program



Strict auditing standards related to crisp financial management of resources

The aspect of co-funding is new to the Kenyan partners and this was discussed in detail. It was decided that in the first year it is not compulsory for the Kenyan partners to raise this co-funding and agreed that Mainline and the Asian partners will contribute towards this co-funding requirement. Mainline will explore ways of how the Kenyan partners can initiate contributions in the second year of the Project. It was further concluded that possibilities will be explored of how to consider existing funding to partners by other donors to qualify as co-funding to the project PUDs. At the individual partner meetings that will be held between Mainline and partners during the course of the Kick-off meeting co-funding mechanisms will be further explored and discussed. It was stressed and agreed upon by all partners that separate Bank accounts will be opened, operated and maintained for the Mainline project PUD funding. This will be preferably a Euro current account and will solely be used for this project.

Partners were informed that an internationally accredited Chartered accountant firm needs to be hired by each partner to carry out an external independent yearly audit of each partner organisation. The proposed firm will be first approved by Mainline before they are hired. It was mentioned that the first year audit will be for a period of 16 months and not twelve covering (I, September 2011 to 31, December 2012). The audit firms of the Asian partners have already been approved by Mainline in the previous programs and for the Kenyan partners, Mainline pledged to allocate a budget and hire an audit firm for the Kenyan partners in due course. The first audit is due in 2013.

The Kenyan partners are further encouraged to start finding an auditor sooner rather than later as this is something that should not be done last minute. Also, partners are encouraged to discuss the contract and its financial requirements with the auditor and ask for their advice on how to make sure that the partner's financial systems are equipped to produce what is required. Suggested auditors need to be approved by Mainline.



Partner Forum:

Mr. Christian Gladel explained the concept of the "Partner Forum" that is being considered and will be an advisory body to the Program Board. He highlighted the following key points:



Membership of the Forum: It is suggested to have 4 organisations from each Project (LGBT, SW and PUD) on the forum. In the case of PUD project three in country partners and a global partner, which in this case will be INPUD.



The selection criteria for the membership to the Partner Forum is not yet finalised and partners are requested to give suggestions and inputs.

As part of the discussions with the participants the following were suggested to Aids Fonds and the Board:



The Kenyan Harm Reduction Network (KHRN) and INPUD need to be connected.



It was stressed that Global networks often are not fully aware of in country ground realities of the groups they represent. The in country policies, processes and strategies are often complex and best understood by local partners and key players in countries on the ground. To inform the global networks of ground realities it is essential that local partners have a fairly strong and meaningful voice on the Partner Forum.

Mr. Christian suggested that it should not be 'either - or' and both Global and Local partners can



compliment each other. The rotation of local partners on the Partner Forum was considered, but considering the fact that the Partner Forum will only meet three times during the life of the program it was suggested and agreed that in order to have consistency this should be a permanent position.

The channels of communication to raise and highlight issues in the Partner Forum were were discussed. It was suggested that the local partners will bring the issues to the selected member on the Partner Forum who will voice the issues with Mainline and later on take it to the Forum.

Suggestions were made to link issues to the Global networks and progress made in this respect to be reported to the Board. It was also agreed that the Program Board members could also contact partner organisations in country directly for information and if required invite them to participate in meetings/ discussions.

M & E Framework:

The participants were informed that MoFa would like to measure program results on an output and impact level. The primary objective of this approach is to measure directly the result of activities in correlation to impact on the direct beneficiaries of the program.

Additional impact indicators have been added to the already developed draft M&E Framework and were shared with the partners, this draft has not yet been approved by the Board. In group sessions partners were asked to further deliberate and provide input on impact indicators with specific focus on the 'purpose and goal' of the PUD project.



It was explained that the collection of information related to the impact indicators will be a joint effort by the partners which will consist of in country and Alliance partners. There is no hard and fast rule and no designated method of collection and recording te achievement of these impact indicators. Where available existing information on impact indicators will be used and where required a process to collect information will be jointly suggested and implemented.

Needs Assessment of Baseline Indicators:

It was emphasised that in order to measure the impact of activities, services and inputs each organisation in country needs to have a needs assessment carried out in order to establish baseline indicators before the start of the project. The overall impact of the project PUD will be measured against these baseline indicators, in the absence of which it would not be possible to measure the starting point or the impact achieved. Partners were informed about the urgency to initiate needs assessment. The Asian partners have already initiated this process and are at various levels of completing the needs assessment exercise. The Kenyan partners will plan the needs assessment as the first activity in their overall implementation plan. Based on this assessment they would be in a better position to plan project activities.

It was suggested to use various tools to collect information for the needs assessment and these could be: a survey with questionnaires, focus group discussions, desk review of existing information, workshops with key stake holders in country, etc.. Mainline agreed to be the focal point to provide assistance to the Kenyan partners in collaboration with the Asian partners who have a varied and extensive experience in conducting baselines. Mainline will also share the tools and methodologies developed by Asian partners and others in this area with the Kenyan partners. Partners discussed baseline collection methodologies and tools in smaller groups in order to assist the Kenyan partners in having a better understanding.

The program proposal mentions a baseline survey, but this is not easy to achieve as there is no zero-situation (a situation in which nothing has happened yet). Karen advises to make "Country Reports", collecting existing data according to the country context. Mainline can assist in this process or even make the country reports.

There will be no standard given on how to perform needs assessments, but partners should and can help each other and Mainline can be a focal point in offering assistance. Some partners have a lot of experience with needs assessments that they can share.

Karen also explains there is a 3rd component mentioned in the proposal: organizational capacity assessments. This assessment measures the strengths and weaknesses of the organization in terms of its structures and systems. This will be instigated by Mainline. Partners do not have to do this at this stage. The focus should be on the needs assessments measuring the needs of the beneficiaries.

There is a suggestion to combine base line country data and the needs assessments where possible. Nai Zindagi has done this before and it is not that hard to collect your country's data.

Project Management team (PMT):

The participants were informed about the PMT, its need and its objectives. The MoU signed between Mainline and Nai Zindagi was shared with the partners and the role of the PMT was explained.

It was outlined that the overall responsibility of the project PUD is with Mainline, and the primary role of Nai Zindagi in the PMT is to advise, suggest and inform Mainline of needs, issues and areas of concern related to the project PUD and bring to the table needs and issues expressed by the in country partners.

Summary of Day Two:

On day two the following main points need to be highlighted:



The partners sought clarity related to the financial management and reporting systems related to the project PUD and the need for co-funding, audit arrangements and financial controls.



The need and importance of the Partner Forum was highlighted and various mechanisms to benefit from this opportunity were discussed and clarified.



The M&E framework was explained and the importance of measuring impact alongside outputs was emphasised. Partners were explained the importance of baseline indicators and the requirement for a

needs assessment prior to the initiation of services.



Partners shared their feedback on the Kick -off meeting and expressed that they had clarity and had the opportunity of an improved understanding of each others work and environment. A stage for future cooperation and collaboration has been set.



Individual sessions of the PMT with partners:

The PMT (Ms. Karen Kraan and Mr Ghazanfar Imam Rizvi) held project related meeting individually with partners to further discuss, clarify and explain contract, budget and outcome related issues.

Site Visits:

MEWA:

A site visit was organised to the MEWA hospital where PUDs have access to VCCT, counselling, AIDS treatment services and referral services. It was appreciated that with limited resources and staff, quality services are being offered to clients.

Reach Out:

The Reach Out drop in centre was visited and detailed discussions held with outreach teams of the project. It was appreciated that the outreach teams have managed to retain a relationship of trust with the clients, in-spite of the fact that the services being offered are limited in nature, compared to client needs. Asian partners shared their experiences with the Reach-Out staff.

Contract signing:

Contracts were signed with all partners at the Tamarind restaurant before embarking on a well organised and delicious dinner on the dow.



Questions and Answers:

Q Budget Related:

How to get to the 25% co-funding?

The co-funding can come from a variety of sources, but it cannot directly or indirectly stem from MoFa. External accountant certifies origin and calculation of the co-funding.

Are variances in the budget lines possible?

Variances are allowed, but only according to the following rules:

<10% Mainline needs to be informed

>10% Mainline needs to approve

Does every local partner need to have 25 % co-funding or is sharing possible in the project?

25 % co-funding is an overall percentage. Some partners can contribute more co-funding then others, as long as we have 25% co-funding at the end of the project (31 December 2015). We strive to have more than 25% in the beginning in order to avoid problems at a later stage.

What is the share (%) of Mainline-budget in the 35 million grant from MoFa?

Mainline has 16 % of the MoFa grant, which is the largest share of the program budget.

Is the budget negotiable?

The budget is fixed and is not negotiable, except possibly for a very small percentage for contingencies. However, this small budget also needs to be used for other things (auditing, exchange visit for partners).

Are there criteria for budget division over partners?

Mainline has made considerations for budget divisions, although there were no formal criteria. These considerations are related to the already existing partnership with partners and the budgetspace that Mainline had.

Banks frequently charge rates to partners. The received advances are lower then the amount that Mainline transferred to the partners. How to handle this?

Bank charges are part of international transferring and cannot be avoided. If there is a surplus this should be used to cover project costs.

Q Contracting and related

Are local or national partners responsible for subcontracting?

Yes, in case of sub-contracting with another organization the Local partner that will sub-contract is responsible (Nepal: Youth Vision). In the future it could also be through Mainline if the local partner requires.

Who drew up the contract?

Aids Fonds used a law firm, and the Program Board made the final decision. It is a standard contract that is being used for all 102 local partners.

What is the starting date of the project?

There are two different starting dates:

Asian partners: 1st of September 2011.

Kenyan partners: 1st of January 2012.

This is due to the long standing working relationship with the Asian partners and to avoid a longer gap between the closure of the previous project and the start up of this one that the Asian partners have been contracted earlier.

Q Structure related

Will there be any support for capacity building?

Yes, this is a specific objective (objective 4) of the program. A capacity assessment will be the first step, this process will be led by Mainline and PMT.

Who are the regional partners?

At the moment we only have ANPUD in Asia. For Kenya this will be developed in collaboration with INPUD.

Does the Aids Fonds have the mandate to monitor local partners? No, this is the task of Mainline.

Q Project Activities related

Do's and don'ts for activities?

Activities should be in line with the objectives of the project and in line with Harm Reduction principles and based on needs assessment. Also cost-effectiveness of needs to be taken into consideration.

Are activities for life sustainability/livelihood/employment allowed?

Yes, these activities can be part of the project.

Can detox/rehabilitation be supported?

Yes, detox and rehabilitation can be in line with the project objectives, but it depends on the needs and cost-effectiveness.

It was expressed that focus on detox/rehab can have negative impact on people who use drugs due to a sense of compulsion from society to quit drugs. It was agreed that there should be no compulsion but detox/rehab should be offered only on voluntary basis to the clients and based on their expressed needs. Mainline does not have position against detox/rehab.

Sustainability of staff straining?

This relates to possibilities of longer training options that are more sustainable. It is possible, but within the budget available.

Variance program activities (let go / new over time) possible?

This is possible and probably even necessary as the project progresses. It also fits the program's strategy to assess and adjust implementation according to what is really needed.

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Service beneficiaries on a cross-over field, e.g. sex workers/work on other key populations?

This is encouraged. Contacts with other (Alliance) partners can be made through Mainline or directly.

Q Linkages related

Exchange visits of local partners in our project possible?

Would be very valuable, but there are budget constraints. Mainline will look into this.

Sharing reporting tools allowed?

This is allowed.

