



REPORT ON THE INDUCTION OF UNASO BOARD OF DIRECTORS

LAKE VICTORIA HOTEL

4th - 5th JANUARY 2019



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1.0 Introduction

In 2017/2018, UNASO appointed a new Board. The followed a period UNASO experienced reputational challenges caused by organizational governance and leadership weaknesses that led to loss of business, brand damage and loss of confidence in its members and stakeholders. In an effort to revitalize UNASO and as a good practice, the newly elected Board of Directors needed to gain a deeper understanding of the history of UNASO, be oriented about their roles and to appreciate the principles and practice of good corporate governance and its role in steering UNASO to greater heights. The current members on the board come from different backgrounds and have varied experiences as leaders, some of them with limited experience as members of the Board of Directors of a national organization like UNASO. The orientation in corporate governance therefore would foster a shared understanding of their roles and bonding among the members.

2.0 Induction of the new Board

Funded by UNAIDS, the management of UNASO organized a two-day induction workshop at Lake Victoria Hotel in Entebbe. The induction workshop aimed at orienting the new board into UNASO operations, gain a deeper understanding of their roles in providing policy and strategic oversight functions, and review UNASO's relevance and continued existence as a coordinating network of AIDS organizations in the face of dwindling HIV/AIDS funding amidst existing reputational challenges paused by organizational leadership weaknesses it experience in 2017.

Induction of new Board members was critical to UNASO's work, in bringing them to active service to perform their roles and responsibilities in accordance with the UNASO Governance Manual.

3.0 Induction Methodology

Facilitated by Success Africa's senior Consultants, Mr Moses Arineitwe and Mrs Ntambiko Amanda, the workshop employed participatory methodologies, complemented by a number of experiences and presentations. Comprehensive discussion on understanding of corporate governance principles for UNASO Board members:

- Helped define and clarify the roles of management, the board and member relations
- Facilitated discussion for better quality deliberations and decision-making processes in the board and board committee meetings
- Helped understand compliance issues with legal regulations.
- Built consensus on healthy communication mechanisms between the management, board members, UNASO members, government, the public and donors
- Increased the Board members' understanding of UNASOs mandate

Further, the board addressed two main issues at the workshop namely:

- a) Understanding governance, leadership and management issues in context of steps taken by UNASO to re-engineer its relevance, competitiveness and continued existence as a successful organization and,
- b) Delved deep into issues of governance and leadership that rocked the institution in 2017 and early 2018 in order to take strategic decisions to re-ignite the institution in light of its impending process of developing the next strategic plan.

4.0 UNASO establishment

UNASO was established as a membership organization in 1996 to: a) provide a platform for coordination, networking resource mobilization and information sharing among civil society AIDS service organizations (ASOs); b) improve on the effectiveness, efficiency and quality of their contribution to the national response to the HIV and AIDS epidemic; and c) Mobilize members to action - PHA groups, Local Non-Governmental Organizations (NGOs), Faith Based organizations (FBOs), Community Based Organizations (CBOs), Cultural Institutions and International NGOs. Currently membership stands at over 200 organizations with the CBOs and NGOs constituting 60% and 26% of the registered organizations respectively.

4.1 Vision and Mission.

Vision: "A Ugandan society free of HIV and AIDS and its impact."

Mission Statement: "To provide leadership to ASOs for collective response to HIV and AIDS through effective representation, coordination and enhanced capacities."

4.2 Governance and management

- **The Governance Board:** The major role of the Board is governance, oversight and performing other varying roles depending on need within the three arms of Governance as indicated in the UNASO Articles of Association, and as stipulated in the constitution and according national laws. The Roles and responsibilities of the Board are; a) Financial and Administrative Oversight, b) Human Resource Planning c) Board Governance and Board Operations
- **Secretariat:** management structure of UNASO based at the office of the secretariat.

4.3 Membership

Any AIDS service organization (INGO, NGO, CBO, FBO) can be a member of UNASO. CBOs and district NGOs subscribe to district networks where they exist. In case the district network does not exist, they can subscribe directly to UNASO Secretariat. Membership to UNASO is categorized as follows:

- **Ordinary members:** comprising of National NGOs, INGOs, Faith Based Organizations (FBO) and District Networks.
- **Associate members:** This will be open membership to other organizations and entities that have interest in UNASO vision and mission.
- **Honorary members:** (Good will ambassadors)

To become a member of the network, one completes the membership form from the Secretariat, a district network or focal organization, and returns it to the district network office, focal organization or UNASO Secretariat. Upon payment of the first annual membership and subscription fee, a UNASO membership certificate is offered. International NGOs, FBOs, national NGOs and district networks pay their annual subscription fees to UNASO Secretariat.

4.4 Stakeholder Roles and Responsibilities

- **UNASO Secretariat:** UNASO secretariat provides a supportive role to the ASOs as a facilitator, a conduit, and a referral for member organizations. UNASO concentrates effort to areas such

as resource mobilization, representation, linking ASO to opportunities for capacity building, and building systems for information management. UNASO implementation roles focus on building capacity for its secretariat staff, district networks and develop systems to facilitate effective implementation of its mandate. In working with development partners, district networks, ASOs and the partnership committee, UNASO aims for mutual recognition and respect for one another's capacity, and enhancing partnership synergy and mutual accountability. The Executive Director (ED) at UNASO Secretariat provide overall leadership and management at the Secretariat on a daily basis while the Board provides strategic guidance, policy and stewardship for the overall implementation of the UNASO Strategic plan. The Annual General Assembly approve the SP and annual work plans, budgets and reports.

- **District Networks:** The district networks are responsible for mobilization of their member ASOs and building their capacity with technical support from UNASO Secretariat. They are also be responsible for ensuring that district network meetings are held periodically, and ASO members provide their work plan and reports for consolidation and transmission to UNASO Secretariat.
- **HIV and AIDS CSOs:** The ASOs are responsible for mobilization of the population to access services and for actual service delivery to the communities. In this regard, they are expected to provide their work plan and reports to the district networks for consolidation and transmission to UNASO Secretariat.
- **Communities:** UNASO, district networks and ASOs mobilize the communities to access services, play an active participatory role in demanding for services and accountability from service providers and government, as well as monitoring the implementation of HIV and AIDS related programs and policies.

5.0 Reflections and Considerations

From the presentations and numerous exercises, the Board made key reflections and considerations on UNASO business. The Board took time to rethink UNASO's name and business in the context of dwindling resources to finance HIV and AIDS. In light of the discussions, the board announced itself on:

- a) **Current areas of focus:** The Board announced itself to focus on a) Networking and partnership; b) Research and advocacy; c) Strategic information management; and d) Coordination. These activities were agreed based on the consideration that UNASO upholds its mandate a coordinating body to AIDS Service organizations.
- b) **Other public health concerns in Uganda:** UNASO realized that there are areas of public health that needs urgent interventions. Based on her experiences, it appreciated its strength in dealing with Non-Communicable Diseases (NCDs), malaria, and not HIV/AIDS alone. These remain public health problems in Uganda and still need more stakeholder engagement. Noting that there are still critical gaps in Maternal and child health services as well as adolescent SHRHR, the Board saw an opportunity to diversify in these areas.
- c) **HIV and AIDS:** The current challenges of retention and suppression in the UNAIDS 90-90-90 goals too requires intensified stakeholders' engagement.

- d) **Resource Mobilization (FUND Me):** UNASO raises her funds from donors, members, corporate social responsibility, in kind, savings to facilitate her work. Three donors of UNASO in the last 2 years included UNAIDS, AVAC and Irish Aid. With the realization that the biggest funders of HIV – PEPFAR and Global Fund, no longer allocate funding to above site activities but rather direct service provision, UNASO needed to think more strategically and diversify to solicit fresh funding for organizational sustainability.
- e) **Member mobilization:** UNASO last AGM was held in December 2017. There is need to rethink this area and organize members to action.
- f) **UNASO work with Uganda AIDS Commission:** The Commission coordinates HIV response in the country using a multi-sectoral response. UNASO coordinated the CSO in the multi-sectoral response and this strategic role should be vigorously revived to fill the current space in the national response.

6.0 Focusing on UNASO Strategic Plan 2012/13 -2016/17

The board members reflected on UNASO 2012/13-2016/17 strategic plan, and interrogated activities that it would take forward with potential funders in the coming few months. In addition, it reviewed the UNASO structure and leadership processes.

Strategic Thrusts

There is a strong linkage between the NDP, NSP, HSSP-III, SDIP-II and USP in terms of vision, goal and objectives. This underscores the fact that indeed UNASO:

- Is compliant with the three one principle as advocated for nationally and internationally in the response to HIV and AIDS epidemic
- Is going to focus on aspects of the NSP that it has comparative advantage in coordinating and/or facilitating implementation by its constituent member ASOs
- Will be contributing to the national goals and aspirations as encapsulated in the overarching plans provided by Government.

6.1 Strategic Objectives

- Improve institutional capacity of UNASO and its membership to contribute to the national response.
- Enhance capacity of UNASO to coordinate, network and strengthen partnerships among AIDS Service Organization (ASOs) and other actors for effective HIV and AIDS response.
- Prompting an enabling and supportive environment for quality HIV and AIDS service delivery.
- Improve coordination and management of strategic information for HIV and AIDS response among CS ASOs.

6.2 Rationale for the current Strategic Plan

- To align UNASO Strategic Plan (USP) to National Strategic Plan (NSP) which was revised to be in tandem with national and international commitments including the national HIV and AIDS policy, National Development Plan, Global Response of three-zeros (zero infection, zero death and zero discrimination).

- To enable UNASO and AIDS Service Organization (ASOs) to reposition themselves to advocate for and monitor implementation of the numerous policies, strategies and guidelines for enhancing and directing the national response to the epidemic that have been put in place by government.
- To enable ASOs to take advantage of scientifically proven new interventions (such as medical male circumcision, microbicides, etc.) that are very valuable in enhancing the impact of the national response
- Government has come out with the public private partnership framework policy to enhance better allocation and utilization of funds in the provision of public service and infrastructures and also the public private partnership for health; both policies need to be implemented and monitored by UNASO in the context of HIV and AIDS.
- The number of ASOs registered at UNASO had increased from 1,660 (2006) to 2,108 (2010) but this membership drastically reduced due challenges highlighted earlier. The need for better coordination to enhance sharing information, planning and implementation of the NSP by ASOs using and exploiting the opportunities offered by the ever-improving technologies for HIV and AIDS related services, information and communication is eminent.
- There is an apparent reduction in the global resources allocated for HIV and AIDS because of the consequences of the economic crisis and other emerging priorities in the donor communities thus requiring better resource access and management, transparency and accountability as well as an aggressive mobilization of resources from local and international resources.

6.3 Core Programme Areas

Institutional Capacity Building

In order to implement its mandate and the additional responsibilities given to it by UAC and the Self Coordinating Entities (SCEs), UNASO develops both its own institutional capacity and the ones of its member ASOs and communities to enable them perform their functions and meet their set objectives effectively and efficiently.

Coordination, Networking and Partnerships:

In addition to being a membership organization with a Secretariat for coordinating all ASOs, UNASO also acts as the secretariat of the SCE-National NGOs and for Civil Society Inter-Coordination Committee which is the forum for the 8 civil society related SCEs.

UNASO coordinates the national NGOs and link them with government, development partners and private sector in order to ensure that appropriate policies, programmes, strategies and guidelines are in place and adequate resources are allocated, utilized and accounted for appropriately at both national and district levels.

Advocacy

This programme area focuses on advocating for enabling and supportive environment for quality HIV and AIDS service delivery. UNASO builds the capacity of its district networks and ASOs so that they can collaboratively hold the duty bearers accountable for respecting, protecting and fulfilling the rights of the population especially in relation to HIV and AIDS by ensuring that government adopts and implements appropriate legal policies, national laws, institutions and processes.

Strategic Information Management

UNASO takes leadership of CSOs in gathering and sharing information from domestic and international research efforts so that ASOs are able to access strategic information that is particularly relevant for HIV and AIDS response and benefit from such new knowledge so that they remain relevant to the response and UNASO to remain relevant to the members.

6.0 UNASO Leadership and Program Recall

Table 1: What UNASO Leadership recall

| | |
|---|--|
| <p>What do we know?</p> <ul style="list-style-type: none"> • UNASO has new leadership • The leadership has UNASO at heart • New committed leadership • We are not yet a strong cohesive team • A board with members with a rich multi-professional background • We lack the skills mix on the board – legal, audit, HR expertise missing | <p>What do we know that we know?</p> <ul style="list-style-type: none"> • UNASO still has a relevant role in providing leadership to the HIV AIDS response • UNASO can rebrand to take up other health and social issues beyond HIV and AIDS • Many stakeholders are not aware of the new leadership (Board and ED) change • We have a thin staff to manage the change process • Majority of the donors and members have a negative perspective of UNASO • We should maintain gender balance • We need youth representative (a lawyer) |
| <p>What don't we know that we don't know?</p> <ul style="list-style-type: none"> • How other networks in other countries are doing e.g. KANCO • What makes UWASNET strong (receive direct funding from government – bench marking) • How networks in similar situations like UNASO have been revived • How women rights networks have survived • Locus of HIV in the SDGs | <p>What don't we know?</p> <ul style="list-style-type: none"> • Where are the funders who can give us resources in this situation? • Funding opportunities in the private sector • How to strengthen the district networks to attract funding • Donor priorities and dynamics • How to make our own money to do UNASO business • Who would cry if UNASO closed? |

Table 2: What UNASO Leadership recall about Programs

| | |
|---|---|
| <p>What do we know?</p> <ul style="list-style-type: none"> • HIV is still of concern but of less priority • Funding is for women, girls, KP • To work with KPs, we have to have them in the leadership and to management • The corporate world is forgotten population in HIV response • AIDS is reducing • Approx. 20,000 death due to AIDS annually • Big number of people are dying of cancer • Govt budget for HIV is very low | <p>What do we know that we know?</p> <ul style="list-style-type: none"> • HIV is no longer a priority • Donor shift to RH • MCH has the biggest funding |
|---|---|

| | |
|--|--|
| What don't we know that we don't know? <ul style="list-style-type: none"> • How to get to Asian donors (look at their country programs) • The end point of the global priorities • Aware of the paradigm shift of donors and the competition • How to tap into oil business • No organisation has tapped into HIV and MCHRH, | What don't we know? <ul style="list-style-type: none"> • Our niche in the SDGs • How do we include new funding mechanisms? • Who are the new funding giants? • Can we get funding from govt, GFF • Local philanthropy, foundations and charities that can support UNASO work |
|--|--|

7.0 Key Issues for Action by the Board

7.1: Implementing programs focusing on KPs, adolescents, men, migrant communities and insecurity challenged communities.

Situation: There is an increasing trend of HIV incidence among adolescents who are being targeted under the misguided notion that they are free of HIV. The KPs are on the increase in Uganda and are hard to reach for HIV testing and care and treatment services. There is an increasing trend in the number of new HIV infections among KPs, adolescents, men, migrant communities and insecurity challenged communities. This is compounded by the escalating poor MCH indicators in these communities. There is no clear mechanism for service provision given the significant stigma, discrimination and harassment meted on them by society as well as law enforcers. The legal framework castigates activities of KPs thus keeping them away from the mainstream service delivery system. The move to industrialization, advances to infrastructural development and extractive industry as well as the refugee situation and host communities in the country has combined to impact on the national and local response to HIV/AIDS.

Table 3: SWOT Analysis on implementation of programmes focusing on KPs, Adolescents, Men, Migrant Communities and Insecurity Challenged Communities

| INTERNAL | EXTERNAL |
|---|--|
| Strength | Opportunities |
| Experienced knowledgeable and committed board Well-known for implementing HIV programs/coordination Experienced ED and 1 Staff secretariat Over 25 years' experience in coordination and advocacy Historical capacity of successful program implementation Registered UNASO members and partners | Funding available for the target beneficiaries Existence of favourable policy framework A lot of migrant opportunities/virgin area Oil and other investment opportunities Political will |
| Weakness | Threats |
| Limited experience in the target communities Limited experience in programs implementation Tinted image Skeleton Secretariat human resources | Lost trust from members, stakeholders and donors Inadequate funds Shift in funding mechanisms/priorities |

| | |
|--|---|
| Limited capacity Skill gaps within the Governance Body Lack of own home Expired Strategic Plan Lack of funds | Competition Political and legal frameworks against some target communities New (unfavourable) legal framework |
|--|---|

7.2 Resource mobilization

Situation: UNASO experienced leadership and management challenges in 2017. These challenges resulted into the termination of its funding by Irish Aid and other donors. In addition, they led to a slowdown in advocacy work considering that UNASO was a leader of ASOs. Other critical areas that suffered included its resource mobilization capacity and base diminished to a point of programmatic inaction and a skeletal secretariat staff. The Board is planning to strengthen UNASO systems, strategy and structures with the view of improving its capacity to generate more resources to implement its mandate

Table 4: SWOT Analysis on Resource Mobilization

| STRENGTHS | OPPORTUNITIES |
|---|--|
| <ul style="list-style-type: none"> UNASO is still considered relevant in the HIV/AIDS response by UAC, UNAIDS, Health Gap and other development partners | <ul style="list-style-type: none"> HIV/AIDS is still a development challenges interesting PEPFAR and GF |
| <ul style="list-style-type: none"> The new leadership has put in place measures to revamp UNASO as a viable organization | <ul style="list-style-type: none"> there are no strategies to support CBOs to tap into the new granting mechanisms |
| <ul style="list-style-type: none"> UNASO has presence in some districts of Uganda | <ul style="list-style-type: none"> the consortium model where the national and INGOs work together towards the response |
| <ul style="list-style-type: none"> there is a strong and concerned governance system and structures (Board and management) | <ul style="list-style-type: none"> there is room for changing programmatic priorities to tap into the new and trending funding patterns (China, Korea, Arabs world) |
| <ul style="list-style-type: none"> Ability to comply to donor demands e.g. Irish Aids demands, AVAC, Health Gap etc. | <ul style="list-style-type: none"> there are opportunities of regaining donor confidence and trust |
| <ul style="list-style-type: none"> UNASO is still a member of EANNASO | <ul style="list-style-type: none"> The NGO Act provides compliance with mother affiliations |
| <ul style="list-style-type: none"> The membership contributions provide revenue | <ul style="list-style-type: none"> |
| WEAKNESSES | THREATS |
| <ul style="list-style-type: none"> The resource mobilization capacity and base diminished to a point of programmatic inaction | <ul style="list-style-type: none"> The lack of trust given the tainted history of UNASO leadership |
| <ul style="list-style-type: none"> The secretariat still has a skeletal secretariat staff | <ul style="list-style-type: none"> The concept of coordination has been outlived by direct funding to implementing agencies |
| <ul style="list-style-type: none"> UNASO is still weak in the districts and the lower level local governments | <ul style="list-style-type: none"> Some IPs are stronger than UNASO thus affecting its relevance and allegiance |

7.3 Image building and having a UNASO brand

Situation: Since its inception, UNASO growth curve has been progressively characterized with waves of underperformance, fraud and poor management. In the recent past, UNASO had serious and massive fraud that led to donor withdrawal and near to closure of the organization. As a result, UNASO lost its credibility and image among members and other stakeholders including funding

agencies. The current governing Board is seeking to rebrand and attract allies to sustainably revamp the image of UNASO as a viable organization that can contribute and respond to the current HIV/AIDS and health care challenges.

Table 5: SWOT Analysis on Building and having a UNASO Brand

| | |
|---|---|
| <p>Strength:</p> <ul style="list-style-type: none"> • A network of organizations subscribing to UNASO brand • UNASOs role in the response is very well defined • Because of our membership, we have a nation-wide footprint • We belong to regional networks like EANASO • Our logo is recognizable by all health sector players • The oldest Network ASOs in the country with 26 years of existence – long track record • Led by a Board with diverse experience and expertise | <p>Weaknesses:</p> <ul style="list-style-type: none"> • A heavily tainted organization/brand • Understaffed secretariat • Weak secretariat- lacking the critical skills • No home of our own after 26years • Repeated non- compliance and fraud • Poor management in previous years has tainted the organization |
| <p>Opportunities:</p> <ul style="list-style-type: none"> • Eligible to join global and regional platforms • Use out history to attract resources and partnerships • Potential membership to harness and market our Brand • Use our current visibility and presence to grow UNASO image | <p>Threats:</p> <ul style="list-style-type: none"> • Our reputation is very poor • Our organizational structure not attractive • Funding environment has changed- HIV money low • Our members have outgrown us – more powerful • The field is crowded |

Table 6: UNASO Board of Directors Action Plan after the Induction Retreat

| UNASO BOARD OF DIRECTORS' ACTION PLAN AFTER INDUCTION | | | | | |
|---|---|--|---|--|--------------------------------------|
| This action plan contains the resolutions of the Board of Directors of UNASO after the BOD induction conducted at Lake Victoria Hotel Entebbe from the 4 th to the 6 th day of January 2019. The action plan contain three key actions; the immediate, the short term and the long term, all aimed at being accomplished before the end of 2019. The responsible persons for these action plans are the Board of Directors (especially designated committees) and the Secretariat (headed by the Executive Director). | | | | | |
| S/NO | Aim/ Objective | Action Description | Performance Measure | Resources and support needed | Target Timeline |
| 1 | To thank UNAIDS for the support to induct UNASO Board Members | <p>The Leadership of UNASO (Board and management) are very grateful to UNAIDS to support the induction exercise of the new Board of directors. This was very timely to equip us to ably manage our assigned roles, obligations duties and responsibilities. As a team, we appreciate the fact that UNAIDS was able to continue identifying with the challenges faced by UNASO in the hope of meliorating the state of affairs. The induction process triggered the need for the board members to commit themselves to the better service of the organization. We thus affirm that; The consultants were professional and able to aid the induction process adequately and the induction venue (Lake Victoria Hotel -Entebbe) was appropriate to allow the Board members concentrate on the induction throughout</p> <p>In that respect; “We the BOD of UNASO without reservation request UNAIDS to Please accept our sincere thanks for the excellent support for our recent Induction exercise. This inspired excellent learning avenue that provided us with open, sincere, and productive interaction for the good of UNASO. You contributed substantially to the quality of the meeting and the effectiveness of the interchange of professional exchange of ideas among members. We believe this meeting was one of the most productive we have had at the level of organizational revamp. We are optimistic that substantial progress has been made in demonstrating our preparedness to work for the organization. Thank you for your gracious hospitality, concern, generosity and professionalism”.</p> | <ol style="list-style-type: none"> 1. Good attendance by the Board members; 80% (10/13) of Board members attended the induction. All the regional representatives attended despite the travel challenges and expenses. 2. The Three critical issues resolved <ol style="list-style-type: none"> a. Institutional development b. Resource Mobilization c. Programmatic strategic shift 3. A written induction report to UNAIDS. 4. Submission of the Board of directors’ Action plans to UNAIDS as an outcome of the induction exercise. | <ul style="list-style-type: none"> • Support provided by UNAIDS for Hotel and consultants (US\$8,900) | 11 th day of January 2019 |

| | | | | | |
|---|--|--|---|---|-------------------------------|
| 2 | To value the willingness of Uganda AIDS Commission (UAC) Support to UNASO activities | During the induction, the team recognized the willingness of Uganda AIDS Commission to support programme activities of UNASO. The gap that was left was the administrative fee and salaries for the staff. The team appreciated this optimistic stand and got charged to find resources to support the salaries of staff and other management fees through any available means. | <ol style="list-style-type: none"> 1. Follow up meetings and signing of agreement with UAC 2. Lobby meetings and Resources mobilized for administration of the programmes supported by UAC | <ul style="list-style-type: none"> • Funds (Estimates of gap needed) | First week of February 2019 |
| 3 | To address the staff capacity gap at UNASO secretariat | The inducted team recognized that the secretariat was understaff to fulfill the organizational requirements. The BOD had gone ahead to recruit volunteers in the hope of resource mobilization for the urgent activities of the organizations. It was resolved that team should work to attract projects and funding to improve the staff capacity status. | <ol style="list-style-type: none"> 1. Sufficient staff recruited and remunerated adequately for UNASO 2. Projects implemented by UNASO 3. Resources mobilized by UNASO | <ul style="list-style-type: none"> • Human resource • Funds (Estimates needed) • Strategic Plan to guide recruitment | By the last week of June 2019 |
| 4 | To be able to manage the issues of UNASO Liabilities | There were three key issues deliberated by the members: <ol style="list-style-type: none"> a) The issue to settle the mandatory statutory obligations (PAYE and NSSF). The Board Directors' Chairperson and the management team to continue talks with the relevant institutions to see how to settle these obligations amicably and professionally. b) The issue to functionalize the assets available. Some vehicles had been parked for long and did not have funds to have them in a running condition. The team was charged with the need to collectively find solutions to have assets functional and resourceful. c) The need to provide appropriate accountabilities to all the donors and service providers indebted to UNASO. The team within a short time had already settled key accountability issues with Irish Aid. There was also a proactive step to recover misappropriated significant funds within available means. The team recognized the | <ol style="list-style-type: none"> 1. Meetings conducted with the relevant statutory institutions 2. Meetings with the president of the republic of Uganda 3. Assets functionalized 4. Service providers settled amicably | <ul style="list-style-type: none"> • Human resource • Transport • Funds (need to estimate) | Last Week of March 2019 |

| | | | | | |
|---|--|---|---|--|---------|
| | | fact that each time an issue was settled other service providers appeared and so was determined to have most of these issues amicably settled within their means. | | | |
| 5 | To plan adequately for the future of UNASO's development | <p>The team thought is wise to plan adequately for the future plans of UNASO. The following were the urgent future plans within mandate the BOD in the tenure of office before the end of 2019. It was discussed and other issues may be done with time after completing such.</p> <p>a) The team recognized that there has been a recent global shift in priorities of institutions supporting UNASO, UAC etc. on matters related to HIV/AIDS in that the attention had shifted to maternal, adolescent and sexual reproductive health issues.</p> <p>b) The Board members were able to understand their key roles and prioritized the need to urgently stabilize UNASO to the current development organizational trends that can attracts funding and be accountable to execute UNASO relevant vision and mission.</p> | <ol style="list-style-type: none"> 1. Team work among the Board members with collective and meaningful deliberations 2. Revitalization of UNASO systems by sorting out urgent issues and setting the organization to operate normally. 3. Review and amendment of some clauses in the Constitution of UNASO that may not be applicable now. | <ul style="list-style-type: none"> • Human Resource • Funds • Projects | By 2019 |
| 6 | To recognize the positive change of UNASO management | <p>a) It was realized that a concerned and active Board of Directors had been put into place. The BOD Willingness to support the secretariat by performing executive board functions was a good commitment.</p> <p>b) It was also recognized that the Secretariat had been staffed with professional staff. Currently there are two staff (the Executive Director, the policy and Advocacy officer and two other volunteers supporting finance and administration functions.</p> <p>c) There was an in-depth concern of Re-focusing the organizational development to three key strategic directions by: addressing the challenges at hand proactively, boosting up resource mobilization strategies and reprogramming to suit the current trending health related issues with a view to direct implementation other than coordination and advocacy only.</p> | <ol style="list-style-type: none"> 1. Good will of Board members to volunteers some of their resources and time for the good of the UNASO 2. Strategic plan development 3. Business Plan development 4. Resource mobilization strategy development and execution to support UNASO activities (highlight the number of proposals so far written in the shortest time possible) | <ul style="list-style-type: none"> • Human resource professional skills • Funds (need to cost) | By 2019 |

Table 7: Lessons from the various brainstorming storming sessions

| General Lessons | Is UNASO still relevant? | UNASO Now |
|--|--|--|
| <ul style="list-style-type: none"> National public coordinating – the government coordinating entity under the president’s office we need to prepare for the obvious and read more and be updated more in order to understand what seems more obvious about UNASO – In any good governance system, we need an informational pack, have the obvious documented, more strategically needed information in the packet, the simple, the obvious | <ul style="list-style-type: none"> The world is changing – young people know more about how technology is working, the younger people have figured out how the systems work The funding has changed from grants to co-funding – reposition ourselves to know who we want to work with, speak their language, donor positioning Coordination is rarely funded Coordinating RAKAI – members are able to benefit from a program – civil society fund members were able to get UGX 10b in resources, members and donors don’t realize the benefits of the UNASO coordinating During the packaging of the grant – the costs of UNASO will not receive any money The members are direct deliverable – we have to show that without us the coordination of the members is important Donors today can coordinate programming themselves, they can do research themselves | <ul style="list-style-type: none"> We need to keep the history and read about it , changing is not easy, it is not going to be easy , it is better to do something. How can UNASO take advantage of the weak points and links in the development game Programming we have set up a timeline for different events , each of the processes and actions feed into each other UNFPA is having a hard time finding where to put money , challenges with leaders Using district networks but in the end, we are limited by not doing service provision, UNASO exists to support district networks The baggage we carrying around the misappropriation of funds Historically we have the reach that we can harness |
| <p>Strategic planning</p> | <p>Business at hand is re- engineering</p> | <p>HIV vs Funding Priorities</p> |
| <p>UNASO strategic plan expired in 2017. We could go against this plan and do a strategic plan – it is time</p> | <ul style="list-style-type: none"> We need to change strategy Importance of changing our strategy, | <ul style="list-style-type: none"> Trends of HIV have changed, how do we make sure that we are still relevant, in |

| <p>to plan on how to clean UNASO , an experiment to use</p> | <p>consistent evolution, donors look at the most suitable, working with key populations, we need to look at who the epidemic is looking at</p> <ul style="list-style-type: none"> • We need to more advocacy, information, research , competing for funding with our members • There is so much we have to know about what is happening in HIV response in order to be more marketable • UNASO needs to rebrand, we are considered as a small entity competing with our members, how to make ourselves more reputable – enlist confidence • We need to rebrand UNASO – it used to mobilize fund for district networks – but now donors go directly with the CBOs– they go directly to the women and girls • Visibility and advocacy to build confidence • How do we repackage – media and PR • How do we rebuild the image of UNASO , focus of donor – strategize our selves to advance our cause to SRH and Donor focus. | <p>order to survive and be significant</p> <ul style="list-style-type: none"> • The HIV epidemic has changed UNASO has not changed , programmatically structurally • Need to develop our HIV research NICHE • How are NGOs sharing the donor cake , to ensure UNASO to start consortium , black listing because of mismanagement of funds • HIV is still a problem and people are still being impacted • 1.5m Ugandans living with HIV, children with HIV are going to grow with it most of them get it through MCH. Reproductive Health, HIV is a gender, social issue, human rights, drug use. |
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| Districts | Advocacy | Accountability |
| <ul style="list-style-type: none"> • NU - it was in Rakai and Masaka , response has now gone to northern Uganda. • UNASO’s district networks are a resource that need to be harnessed- supported to formalize their operations so that they too can attract funders | <ul style="list-style-type: none"> • We must go public, build our image – ADVOCACY • The lack of the right advocates, advocates in CSO have disappeared, advocacy, the advocates • Resources are allocated by politicians we need to package things they can buy • We need people that can talk and be heard by both parties led by the civil society • CSO holds the government accountable – how | <ul style="list-style-type: none"> • People applied for these jobs - on the board, we need to share a communique to show that the corporate governance of UNASO has been strengthened and we want to actualize this through strategic planning. • What do we want to show the donors at the end of this, what have we done – to be renewed, • Individual perspectives, what is our integrity history, |

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| | <p>have we been able to influence govt to understand our role , government has a law for self funding , the aids trust fund started by UNASO, how can we hold govt and private sector to contribute to this fund , the people , churches – once a month today we are carrying the government</p> | <ul style="list-style-type: none"> • How do we better utilize the little we get, how can we be accountable which networks do we want to form a consortium from the grassroots to govt level. |
| Partnerships | Corporate Governance | Donors |
| <ul style="list-style-type: none"> • Partnership and coalition Donors prefer to work with people that are providing full service – TB, HIV, key population for Global Fund – • UNASO should be the people that people ask to work with • Challenges with partnerships – if you partner with orgs that are stronger than you, you find yourself depending on the stronger partners – what are the terms and conditions in the partnerships we make. | <ul style="list-style-type: none"> • Saving the image how can we as cooperate governors – how do we as board members create the synergies – coordinate amongst ourselves. | <ul style="list-style-type: none"> • Donors still have a fear and what to see what is happening , they want to see the value of the board , • Donors want to work with the district , how can we flaunt our districts ,in the • Donors prefunding, Fund co creation, research , Cost share approach put money on the table and have it matched by the donors. • The donor goes directly to districts or most affected cutting out UNASO, ICW adolescents. |
| Chairpersons Observations | Discussion | UNASO PLUS |
| <ul style="list-style-type: none"> • What modeling can we offer – organizations will say UNASO has developed this model and we are bringing it to the market we have tested and prove • How can contribute to the board of knowledge how can we manage a mature epidemic, programming is evidence based, impact and evaluation , people centered approach • Information sharing in the era of technology is loosing relevance. what have we innovated that the world should be excited about • What are we offering the donor, what brand | <ul style="list-style-type: none"> • The members have outgrown us • We need to consider the disadvantages of rebranding in order to not lose what made us relevant how do we carry it into a new shape • IS reshaping enough? • Oil – how do we conceptualize HIV into a world of OIL and environmental conservation or resilience • Strong work already being done in the reproductive health what would our move on this look like. • HIV is a subset of reproductive health – | <ul style="list-style-type: none"> • Let us study conditions that will allow the new brands to have a miracle • As ambitious as we have, we must consider our means, time • What is trending for SDGs, climate change, oil, • Our shape is a result of our think engine – what is that within our means that make us look attractive. • How do we break the ice? |

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| <p>can we leverage?</p> <ul style="list-style-type: none"> • How can we attract donors, can we cost share with donors can we co create with donors? • Reconstitute you still leave the core change to break all the systems and structures discard old obsolete pieces and bring on the new pieces <p>Re Engineer using the new engineering and the new structures but also Building on the good will and structures of UNASO we need to RE ORGANISE the structures to create a new system that can be REPOSITIONED and REBRANDED</p> | <p>Uganda HIV and RH information Bureau – NAFAPANO</p> <ul style="list-style-type: none"> • A lot of duplication which is confusing there are many coordinating entity. • Why don't we look at maternal health and SRH AS THEMATIC AREAS. • UNASO and UAC – from the donors – we want to work with the people affected by the issues and doing the work. • Importance of clean slate , this is what we stand for, what is the aim , • We cannot think about rebranding in the terms of what donors want to do , we must think about what we don't know and what we don't know what that we don't know. • Translate the new district networks into implementing organizing that pay allegiance to UNASO. To translate the new district structures and UNASO to service implementation. | |
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Board Members at the Induction Workshop





The training program



UNASO BOARD INDUCTION AGENDA

| DAY1 | Friday 4th January 2019 | Responsibility Center | Comment |
|-------------|---|-----------------------------|--|
| 14:00-15:00 | Arrival and registration | Individual/ Group | |
| 15:00-18:30 | Registration and Sign in | UNASO | |
| | Getting to know you (Bingo- Success Africa game) | Consultant | |
| | Climate setting - Expectations | Consultant | |
| | STUDIO TIME: <ul style="list-style-type: none"> Part1- Rolex Counter Part 2 -Group Reflection on UNASO Part 3- Panel (STUDIO interview) | Consultant | Who knows UNASO (Group activity- Rolex Counter a chance for groups to challenge) What are you bringing to the Board? Buisness Unusal (The Studio television interview of key UNASO leadership as part of the orientation scene setter) |
| | Official opening ceremonies | UNASO Executive Director/HR | Official opening and further networking |

UNASO BOARD INDUCTION AGENDA

| DAY 2 | Saturday 5th January 2019 | Responsibility Center | Comment |
|-------------|---|--------------------------|---|
| 8:30-9:00 | Recap of Day 1 | Consultant | |
| 9:00-10:50 | Understanding UNASO: Mandate, vision, mission, strategic objectives, systems and structures | Consultant | |
| 10:50-11:10 | Health Break | UNASO | |
| 11:10-13:00 | SWOT Analysis | Consultant | (Having understood the contextual background to the organization & functioning of UNASO what do you to be strength, weaknesses, opportunities and Threats?) |
| 13:00-14:00 | Lunch Break | | |
| 14:00-15:30 | The Strategic Leadership and Management Roles and Responsibilities | Consultant | Link Results of Situation Analysis, Institutional mandates, structures and functions to the Strategic Leadership Roles and Responsibilities |
| 15:30-16:30 | Reflections Action planning, and wrap up | Consultant | Identify Current Board Leadership and Strategic Thrusts based on which the Boards Strategic Plan will be developed. |
| 16:30-16:45 | Forward March- Inspiration and close | UNASO Board Chair | Articulate where we are per action planning, UNASO position and future opportunities |

List of Board Members

- 1. DR STEPHEN WATITI**
- 2. SOLOME ATIM**
- 3. BAKANDA CELESTIN**
- 4. LENA GODFREY LOKWANG**
- 5. AMANYA KAKWINDI**
- 6. EMILY KATARIKAWE(CHAIR)**
- 7. DR. HIZAAMU RAMADHAN**
- 8. MULUMBA MATHIAS SSUUNA**
- 9. DANKAINE A. AMUZA**
- 10. KUZIRIMPA JULIUS**
- 11. JOHNSON MASIKO**

Attendance list

UGANDA NETWORK OF AIDS SERVICES ORGANISATIONS (UNASO)



ATTENDANCE LIST

ACTIVITY: Board Induction

Place: L. Victoria Hotel

Date: 4 Jan 2019

| No | Name | Sex | Organisation/Title | Phone Contact | Email | Sign |
|----|------------------------|-----|---------------------------|---------------|----------------------------|-------------|
| 1 | SALOME ATIM | F | UNASO TREASURER | 0782339839 | salomeatim@gmail.com | [Signature] |
| 2 | EMILI KATARIKAVE | F | UNASO CHAIR | 0759244700 | Emilie@yahoo.co.uk | [Signature] |
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| 5 | DR. STEPHEN WATITI | M | UNASO - BOARD MEMBER | 0772632466 | stephen.watiti@gmail.com | [Signature] |
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| 7 | Sylvia Nakasi | F | unaso staff | 0702402030 | nakasi.sylvia@gmail.com | [Signature] |
| 8 | Mulumba Mathias Ssuuna | M | Chairperson of Comm unaso | 0705537222 | mulumbamathias@gmail.com | [Signature] |
| 9 | Tara Agaba | F | Representative | 0772139929 | tara.agaba@gmail.com | [Signature] |
| 10 | Amende Nkurunzira | F | Chairperson | 074445674 | amendepete@gmail.com | [Signature] |
| 11 | Amelanya Vabwinda L | M | Representative | 077221636 | julianngore122@gmail.com | [Signature] |
| 12 | DANKINE-A. AMUZA | M | UNASO BOARD MEMBER | 0703119004 | dankine1@gmail.com | [Signature] |
| 13 | BAKASODA CELESTIN | M | UNASO BOARD MEMBER | 0758222100 | bakasoda@gmail.com | [Signature] |

UGANDA NETWORK OF AIDS SERVICES ORGANISATIONS (UNASO)

ATTENDANCE LIST

ACTIVITY: UNASO Board Induction

Place: L. Victoria

Date: 5 Jan 2019



| No | Name | Sex | Organisation/Title | Phone Contact | Email | Signature |
|----|-----------------------|-----|-------------------------|-----------------------|------------------------------|--------------------|
| 1 | Dr. STEPHEN WATZI | M | NATOPHARMU 30000 Genz | 0772632466 | stephen.watzi@natopharmu.com | <i>[Signature]</i> |
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| 9 | Tom Ayan | F | Representative | | | <i>[Signature]</i> |
| 10 | Bethsamu Ramachan | M | UNASO Board V/Chair | 072403816 | bethsamu.ramachan@unaso.org | <i>[Signature]</i> |
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| 15 | Grace Kusana | M | " | 5100863026 | grace.kusana@unaso.org | <i>[Signature]</i> |
| 16 | Sonyia Christine | F | UNASO - Accountant | 0726165002 | sonyia.christine@unaso.org | <i>[Signature]</i> |