

HPP Botswana Organizational Capacity & Experience

About Humana People to People (HPP) Botswana

HPP Botswana is a national NGO registered in 2001 Reg Number TUHGB-000216-18. The organization's projects utilize capacity building and grassroots approaches to empower people with the tools, knowledge, and skills necessary to foster sustainable, long-term development. Since its inception, HPP has contributed extensively to the mobilization, counselling, and education of rural and urban populations in Botswana. HPP's headquarters, based in Gaborone, houses the administration, financial management, and program support units. HPP has an efficient financial management and accounting system that complies with international accounting standards and the statutory requirements of Botswana. An internal audit is conducted once every quarter followed by an annual external audit, with the external audit firm chosen by open tender. Financial reports are compiled monthly and submitted to funding partners based on specific donor requirements. The administrative unit of HPP is responsible for salary payments and labor law compliance. It implements comprehensive control systems and conducts staff training to ensure maximum compliance and effective management of resources. HPP upholds policies, guidelines and procedures for human resource development, financial management, procurement, and governance, and implements strict systems for full donor compliance, a practice that has been maintained since 2001. HPP ensures accountability to its partners by producing monthly, quarterly, and annual narrative reports on program activities. HPP has fulfilled its mandate by attracting and retaining a professional staff of 278 officers and 275 volunteers. The organization currently manages an annual budget of US\$ 2,506,960.

Geographical Reach & Sectors

The organization is currently implementing a wide range of development programs in sectors including (a) **Health** focusing on HIV/AIDS, TB, OV/DREAMS, (b) **Community Development**: Women Empowerment and preschool education (c) **Agriculture and food security** and Climate Change, and (d) **Child Care**: child rights and welfare including elimination of Child Labour. HPP projects directly impact the lives of more than 250,000 disadvantaged people each year. In collaboration with the Government of Botswana and local and international partners, HPP is currently implementing projects in 11 districts of Botswana. Since its formation, HPP has built a strong network of community support among local authorities, health agencies, business leaders, local entities, and the central government. HPP has built a strong collaborative network and receives ongoing support from local and traditional authorities, local and district health departments, international organizations as well as the central government.

HPP's 5 Achievements

HPP has been providing community-based HIV and treatment support for 18 years consistently meeting or exceeding targets. HPP started implementing projects in the health sector at the peak. In 2001, HPP initiated the (a) **Total Control of the Epidemic (TCE) strategy, known as Total Community Mobilization (TCM) in Botswana**. HPP implemented the TCM program from 2001 to 2005 under the motto "Only the People have the power to liberate themselves from the AIDS epidemic." The project was implemented in high HIV prevalence areas such as Northeast, Ngamiland, Chobe, Central, Southern, and South East. During those initial five years, HPP met and exceeded its testing goals, obtaining an average positivity rate of 12%, while employing and supervising 450 Field Officers in 12 districts and systematically educating and mobilizing 686,259 individuals, including key populations (KPs) through a door-to-door campaign that encouraged lifestyle changes and preventive behaviors.

HPP implemented the (b) **Advancing Partners and Communities (APC) project from 2015 to 2018 in three PEPFAR priority districts**, reaching people with targeted home-based HIV testing, including a focus on index testing as well as door-to-door household testing. HPP's index testing efforts achieved a positivity

rate of approximately 25 percent, according to HF data. All HIV- positive individuals were linked to treatment and supported to join community adherence systems and eventually achieved viral suppression. HPP built on the original APC Project experience to continue implementing the (c) **Accelerating Progress in Communities – APC 2.0 project, a 5-year project funded by USAID** that aimed to contribute to the achievement of the 95- 95-95 targets by providing high impact HIV and TB services and a capacity building component. APC 2.0 was implemented in 7 PEPFAR priority districts including Francistown, Masunga and Tutume. HPP also supported (d) **OVCs and young women since 2006 with funding from PEPFAR on PCI’s Building Bridges Project (2008 to 2010) and PCI’s Orphans and Vulnerable Children Project and Gender Project (2011 to 2019)** in three districts: Mabutsane, Ghanzi/Charles Hill and Phikwe. HPP field staff conduct door-to-door campaigns to assess family and individual vulnerabilities and needs using the Comprehensive Family Care (CFC) model, encouraging families to formulate individual and family development plans. Based on the collaborative foundation of the CFC model, HPP provided capacity building and strengthened networking relations with other local service providers and stakeholders, including government health facilities, the Department of Social and Community Development, the Department of Gender Affairs, schools, NGOs, police, private sector, and other government departments. Positive achievements in the PCI projects have helped secure continued OVC funding since 2018 as well as the addition of a DREAMS component in the Gaborone and Kweneng East districts. The current initiative targets Adolescent Girls and Young Women (AGYW) aged 9-24, empowering and mentoring them to live healthy lives and offering life skills education as well as HIV and violence prevention. To date, 278 Safe Spaces have been created for girls enrolled in the DREAMS program and 5,764 girls are engaged in Safe Spaces. In addition to these projects, HPP has in the past 10 years implemented several other HIV programs with funding from PEPFAR, either directly or as sub-grantee to PACT International, PSI, Pathfinder, African Comprehensive HIV/AIDS Partnership (ACHAP), FHI360, and others. All HPP interventions listed above have been guided by the Botswana National Health Policy (2011), the Botswana National Strategic Framework for HIV (2014-2019 and 2019-2023), and the President’s Emergency Fund for Aids Relief Country Operational Plan (PEPFAR COP) guidelines specifically on community monitoring of service delivery, treatment literacy and Continuous Quality Improvement (CQI) across the programmatic spectrum.

(e) HPP is currently implementing a US\$7, 541,503 **Expansion of Community Interventions for HIV/AIDS in Botswana (ExCAB) Project in Francistown, Tutume, Northeast, Kweneng East, Gaborone, Goodhope, Palapye, Bobirwa and Selibe Phikwe.** The project works targets OVC; C/ALHIV; HEI; AGYW; High risk adult males; Children of key populations, especially female sex workers (FSW) and men who have sex with men (MSM). The project uses the Total Control of the Epidemic (TCE) approach. Its overall goal is to support the maintenance and uninterrupted delivery of quality HIV/AIDS services within communities and strengthens local communities and health systems through various initiatives, including: Implementing case finding modalities such as index testing and self-testing to reach populations with greatest unmet need for testing; rapid treatment initiation and linkage to care for all newly identified PLHIV; improving adherence until achievement of viral load suppression; tracing of ART patients experiencing treatment interruption and re-linking them to care and treatment; HIV prevention focusing on populations most at risk of contracting HIV, including OVC, AGYW and children of KP.

HPP’s Core Expertise

HPP is leading the implementation of the **Communities Acting Together to Control HIV Program (CATCH, 2015-Present)**, which is designed with a bottom-up capacity development approach. In that Model, Community members analyze issues related to health, identify solutions, create a vision of the community they want to live in, and devise plans and take actions to turn the vision to reality. The project has been funded by UNAIDS and NACA. To date, the project facilitators, together with the traditional leaders, have visited 32,462 households, with 46,393 people involved in conversations and 2,365 people tested for HIV, yielding a 19% positivity rate.