

**YOUTH HEALTHS AWARENESS NETWORK
PROGRAMME ON HIV/AIDS AND MALARIA**

PROJECT PROPOSAL

Name of Organization: Youths Health Awareness Network Uganda

Type of Organization: An registered CBO

District: Kole

Contact Person: Mr. Munu Hakim - +256773401449.

Project Contact Office: , Lira Municipality
Lira Northern - Uganda.

Field office: Aboke Township, Kole District.

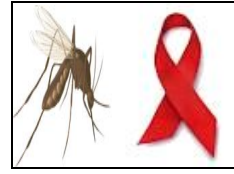
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Submission :



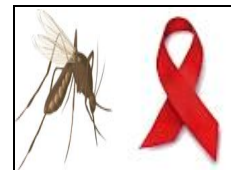
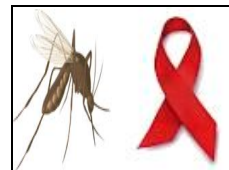


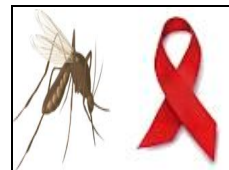
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LIST OF ABBREVIATIONS

ABC	-	Abstinence, Be Faithful and Condom
AIDS	-	Acquired Immunodeficiency Syndrome
ARV	-	Antiretroviral
CBO	-	Community Based Organization
CHCS	-	Community Home Care Services
CHWs	-	Community Health Workers
DDHS	-	District Director of Health Services
DHAC	-	District Health Aids Committee
FBO	-	Faith Based Organization
HIV	-	Human Immune Deficiency
IGAs	-	Income Generating Activities
MTCT	-	Mother – to – Child HIV Transmission
NAADS	-	National Agricultural Advisory Services
OVCs	-	Orphans and Vulnerable Children
PLWHA	-	People Living With Aids
STDs	-	Sexually Transmitted Diseases



EXECUTIVE SUMMARY

HIV/AIDS Support Activities proposal is to be based in Kileleshwa District. The Activities will concentrate on home based care of HIV/AIDS patients, promotion of ABC strategy and support to orphans of school going age as its core activities.

The activities for which this grant will be utilized shall be covering Kileleshwa District, The five (5) sub counties to be covered are: Aboke, Ayer, Akalo, Bala and Alito.

As AIDS epidemic spread and poverty rate increase it has become more difficult for the people living with HIV/AIDS to cope up with life in the community and the family to take care and support them, there is also too much abusive words and discrimination on the people living with HIV/AIDS causing stigmatisation in the community.

The aim of HIV/AIDS Support Activities is therefore to, provide support of PLWHA/OVCs and promote awareness for prevention in Kileleshwa district,. This will lead to:

- To reducing the spread of HIV
- Encouraging people to change their behaviour or using other means that reduce the harm cause to risk of contracting HIV
- Help those who are HIV positive to live positively, prolong their life and prepared them for challenges of this world and eternity.

Specific objectives include:

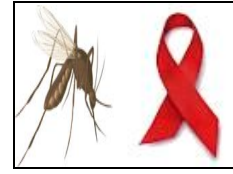
- a. Increase and strengthen community/home based care by 8 CHCs for quality services for HIV/AIDS patients and 100 mothers access MTCT services in Kileleshwa District by Dec 2015
- b. Increase awareness and prevention of HIV/AIDS in Kileleshwa District (see monitoring plan for targets)
- c. Reach out to Local communities to support 20 orphans and vulnerable children (OVCs) in school fees payment per sub county each year for 1 year and 140 girls get sanitary towels
- d. Increase and support 60 PLWHA in income generating activities (IGAs) for OVCs and PLWHA

A lot of information about STDs especially HIV/AIDS infection has been disseminated to Local communities but most of them are not sustained because of:

- Local communities change of behavior particularly due to migration to urban centers in order to conform to the “new found life”, thus endangering the lives of the population
- Lack of human resources (counselors) to reach the Local communities population and even when they do manage to go out and give sensitization talks, very few people are willing to attend
- Lack of support for the infected, affected (orphans and vulnerable children) and the foster parents who are normally old grandees taking care of their grand children

This project is selected because of a number of factors to be addressed including:

- Sensitization of the Local communities of the dangers posed to them by the HIV/AIDS epidemic. Local communities need to know what are best practices for HIV/AIDS prevention.
- Providing guided information to the people and encourages them to change and have new pattern of behaviors especially ABC strategy.



- Promoting demand for better services by supplying technical skills, which are tools in promoting quality care.
- Increasing the establishment and support of income generating activities for PLWHA and orphans.

The project will work in collaboration with a number of organizations and other stakeholders to ensure successful implementation of the project activities. Some of these organizations are:

- District HIV/AIDS committees (DHAC)
- Kole District Local Government through the District Focal Person
- World Vision a CBO which has been are implementing HIV/AIDS advocacy, care and empowerment in our project area in Uganda by complementing the little advocacy and care which was being done by a few NGOs, local groups, local authorities and the Government in Kole district.

The direct beneficiaries of this project are PLWHA, Foster Parent groups and orphans Vulnerable Children members. The proposal mainly lay emphasis in primary schools in Kole District as special class of community leaders and officials of CBOs dealing in HIV/AIDS activities. Of course Kole district will be the main direct beneficiary because of their mandatory role to provide Health Services in the district.

It is expected that:

- 14 schools in the Sub-County get support
- 60 people living with HIV/AIDS will benefit from the project initially
- 10 CHCs will be trained
- CBOs working on PLWHA and OVC will be identified for awareness training

This is a three year project

This particular proposal is for the period July, 2012 ending Dec.2015.

The total cost will be Uganda Shillings 349,343,720=per year

In three years it will cost 340,462,100 x 3years = 1,021,386,300 Uganda shillings



1.0: PROJECT DESCRIPTION

1.1: Project Title: Supporting HIV/AIDS Services in the Community.

1.1.2: Background and Context:

HIV/AIDS Support Activities proposal is to be based in Kole District. The Activities will concentrate on home based care of HIV/AIDS patients, promotion of ABC strategy and support to orphans of school going age as its core activities.

HIV/AIDS Support Activities for which this proposal is to be utilized shall cover Kole District. The district has 5 health facilities.

As AIDS epidemic spread and poverty rate increase it has become more difficult for the health care and support them, there is also too much abusive words and discrimination on the people living with HIV/AIDS causing stigmatisation in the community.

According to the survey done in the local churches where the project is allocated, on their death record books in small village of 43 house hold 21 people died in the year 2007.

There are also some projects contributing in the spread of HIV. Like construction of roads, big buildings which bring people from other parts of the community, mobile troops and business people. Through the blood test done on the project area allocation out of 100 house hold pick at a random 60% at least one or two people in the family are found to be positive, this was as a result of mobile troops whom have been coming on and off to guard the people in the I.D.P camps, total poverty, drunkenness, social gathering, Bars and lack of education leading into lack of job opportunity.

1.1.3: Our Aims:

The aim of HIV/AIDS Support Activities is therefore to, provide support of PLWHA/OCVs and promote awareness for prevention in District of Kole. This will lead to:

- To reducing the spread of HIV
- Encouraging people to change their behaviour or using other means that reduce the harm cause to risk of contracting HIV
- Help those who are HIV positive to live positively, prolong their life and prepared them for challenges of this world and eternity.

1.1.4: Mission Statement.

We recognised in every person the image of God and grant them the same respect, dignity and opportunity in this world and for eternity.

1.1.5: Our slogan.

Yesterday we were like you and tomorrow you will be like us, But Today let joined hands together and we fight AIDS.



1.2 HIV/HIDS National goals 2005/06

For over two decades Uganda's population has experienced an HIV/AIDS epidemic and government set up Uganda AIDS Commission to coordinate all the programmes that were being implemented in the fight against the epidemic in the country. Consequently, HIV prevalence declined consistently in the last decade. One of the government strategic goals was to:

- To reduce HIV by 25%
- To mitigate the effect of HIV/AIDS
 - To mitigate the health effects of HIV/AIDS and improve the quality of life PHAs
 - To mitigate the psychological and economic effects of HIV/AIDS
 - To mitigate the impact of HIV/AIDS on the development of Uganda
- TO strengthen the national capacity to coordinate and manage the multi-sectoral response to HIV/AIDS

(Source: The National Monitoring & Evaluation Framework for HIV/AIDS Activities in Uganda. 2003/04 – 2005/06)

1.3 Geographical coverage (sub-county, parish, villages where grant will be utilized)

The activities for which this grant will be utilized shall be covering in Kole District. The 5 sub county to be covered are: Aboke, Ayer, Bala, Alito and Akalu.

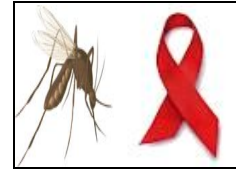
Table 1. The Population of Kole District.

No.	Administrative Unit	Number of Parishes	Population
1.	Aboke	5	41,800
2.	Ayer	7	39,000
3.	Bala	6	37,600
4.	Alito	5	62,700
5.	Akalu	4	24,800
6.	Total	27	205,900

SOURCE: 2001 Population and Housing Census.

The general administrative organisation in Uganda is a Unitary Republic with a highly decentralised system of local governments. The national government is at the top with two types of local governments at the bottom, being the urban authorities and the district administrators. There is a system of counties, sub counties and parishes, which are, sub divisions constituting the hierarchy of local administrations of which Kole District was in Apac Local Government and its units are part.

The administrative structures are made up of the civil service cadres of the local administrations and extension services. There are ideally responsible to the political structures of Local Councils (LCs) and their Executive Committees. Up to the District level, there are five hierarchies of the Local Councils. The lowest that operates at the grassroots is



the village council up to the highest, which operates at the district level, is called District Council. The district and sub county and urban councils are corporate bodies.

The identification and assigning of priority of projects in the sub county is the responsibility of the grass roots, but the financing or implementation of most of such projects are often beyond the means of the Local communities. Hence the central government or voluntary agencies are often involved in the implementation of locally initiated projects.

2.0 PROJECT PROFILE

2.1 Situation Analysis

2.1.1 Problem Statement

A lot of information about STDs especially HIV/AIDS infection has been disseminated to Local communities but most of them are not sustained because of:

- Local communities change of behavior particularly due to migration to urban centers in order to conform to the “new found life”, thus endangering the lives of the population
- Lack of human resources (counselors) to reach the Local communities population and even when they do manage to go out and give sensitization talks, very few people are willing to attend
- Lack of support for the infected, affected (orphans and vulnerable children) and the foster parents who are normally old grandees taking care of their grand children

As a result of the above situation affecting the Local communities, THE FBO is therefore presenting this proposal to Strengthen HIV/AIDS Services for funding in Kole district particularly Kole District aiming at:

- Increasing support and promotion of awareness by providing Home Base Care Programme for HIV/AIDS prevention in local communities and targeting primary Schools in Kole District promoting ABC strategy.
- Reaching Local communities to support orphans and vulnerable children through educational support and funeral services.
- Increasing the establishment and support of income generating activities for PLWHA and orphans.

2.1.2 Project Justification

This project is selected because of a number of factors to be addressed including:

- Sensitization of the Local communities of the dangers posed to them by the HIV/AIDS epidemic. Local communities need to know what are best practices for HIV/AIDS prevention.
- Providing guided information to the people and encourages them to change and have new pattern of behaviors especially ABC strategy.
- Promoting demand for better services by supplying technical skills, which are tools in promoting quality care.
- Increasing the establishment and support of income generating activities for PLWHA and orphans.

Home base care helps our volunteers, carers, medical personals to build good long term relationship with the family of our clients; this will help family members, relatives, friends,



and neighbours to acquired knowledge on basic patience care on food nutrition, preparing good diet, hygiene and sanitation.

This also prepared ground for counselling' team, which will always every Tuesday and Friday, to have opportunity to share good news of our Lord Jesus Christ and to offer prayer for our client and all the entire family.

Most PLWHA, both the community and project workers, summarize the attitude and feelings of HIV/AIDS patients as being desperate, frustrated and with a high irritability. This is because many PLWHA are psychologically traumatized and usually feel like isolating themselves from other community members, since they feel out of place. However, as a direct result of HAACEP, a significant proportion of PLWHA in kole district are becoming very optimistic about recovering and they now wish to be taken to hospitals which unfortunately are all very far away. There is also a category of PLWHA who feels that God is a key solution and most of them turn towards religious salvation.

(Source: **World Vision**

HIV/AIDS Advocacy, Care And Empowerment Programme (HAACEP)

Annual Report / Mid-Term Review

1st November 2003 – 31st October 2004).

2.1.3 The World in Need Northern Uganda Participation/Involvement

The direct beneficiaries of this project are the population of Kole District, who are orphans, girls at puberty in primary schools and foster parent members in the Local communities.

The main participants in the project will be

- The organization's project committee under the Administrator as the project contact persons
- Kole district health department
- The members identified as beneficiaries in the sub counties, parishes and villages in kole district
- Any persons identified for training and counseling aides
- Collaborating partner in Kole district.

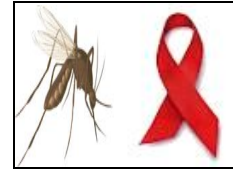
2.2: CORE ACTIVITIES TO BE CARRIED OUT TO MEET THE OBJECTIVE ONE. "HIV/AIDS AWARENESS"

We have targeting both youth at schools, out off schools and the community the main aim is to remove them from the risk environment, business and substitute with good environment, job opportunity and challenge the negative information, belief bad culture, attitudes and practise to limit them from contracting HIV/AIDS.

2.2.1: Youth in school.

We are focusing 6 schools both primary, secondary and institution in the sub-county where the project is allocated. We make awareness through Songs, Drama, poems, stories, roll play and in each school we form untie AIDS youth club whom we again train them on basic information on HIV/AIDS and life skills which will improve their self-esteem and power them to say no to risky behaviour and they continue to help their peer teenagers into positive behaviour change.

2.2.2: Youth out off school



While youth out off school we change their living condition and the risky environments to HIV like Bars attendance, alcohol and drugs, sex workers, streets kids, house girls, child exploitation we replaced these risky behaviour and environment by developing their vocational skills and giving income generating activities which will make them to be self reliance in the community.

2.2.3: At Home

We build good relationship and the gaps between the parents and their children to be free and open to discuss issues related to sexual intercourse and the risk of being infected with HIV/AIDS mostly base on biblical foundation and helping the parents to access family planning and to be a role model to their children.

2.2.4: Community HIV/AIDS awareness

We focus community leaders, churches, business people, civil savants and places of social gathering like markets, trading centres, barracks and prisons. We do the awareness through the same methods in schools; we enforced some by laws in the community that stop the risk to HIV/AIDS mode of transmissions. the awareness is to encourage them to have voluntary counselling and testing, this would help them to change their behaviour and avoid being infected or re-infected and those who are HIV positive to live positively and those who are ready should have ARV this would make live longer and help them to plan for their future, how they will live their Jobs, children and property.

The community awareness on HIV/AIDS this is also to make people come to our office to get the right information, belief and practise a bout HIV/AIDS and it is also the ways of getting our clients. This is also to draw Government attention to these dangers killers disease AIDS and make them to take action.

2.2.5: Home Base Care Programme for the people living with HIV/AIDS.

The main aim for H.B.C.P is to help our clients not to infect others or to be re-infected, treating opportunistic infection like tuberculosis, getting ARV, giving nursing care hygienic living, making them filled being comfortable and love, providing nutrition these make them prolong their life span and make them plan for their future.

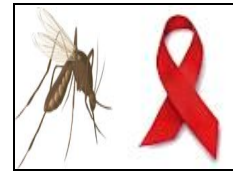
2.3: CORE ACTIVITIES WE CARRIED OUT UNDER OBJECTIVE TWO. “HOME BASE CARE”

2.3.1: Food:

The project provide them with seeds and insecticides, basic skill on kitchen farming how to plant, harvest, store and cook, where by mostly they plant vegetables like onions, cabbages, carrots, green paper, tomatoes, eggs plant and fruits this serves as a source of diet to support their main food. In the main food we supply them with 20kgs of beans, 30kgs of maize flow, 3kgs of sugar, 3kgs of milk powder, 2litters of cooking oil and a kilogram of salt once in every month. This make the body physically fit to develop more white blood cells to fight any others opportunistic infection.

2.3.2: Hygiene / sanitation.

Mainly we focus on seeing that our clients are always kept smart and clean both body, beds and environments by providing them with; soap, perfumes, tooth paste, bed sheets, blankets, dressing clothes , mosquitoes nets, cooking utensils once a year and we put hand together



with other family members in the contraction of pit latrine if it is in need. This help them not to be infected with any disease, have enough sleep and free movement and stay with the people and to help them build their self-esteem and reduced emotion inside them.

2.3.3: Free Legal project:

Through counselling and guidance we help our clients to develop a memory books which include important documents such as; photos and family background tree, properties, receipts and documents of purchase items, song, poems, parents beliefs, hope and future plan finally we help them to make and write a WILL where by a copy of the will is kept by the project, the church, the law enforcement office. This help to protect the properties for the Orphans.

2.3.4: Treatment

The project provide this services by providing referrals to clients to the hospital, the client may visit the office, come on the centre day which is once every month where by all those who needs to see the doctor are free and opportunistic infection are treated and those who are on ARV we see that they have it and they take it has instructed and some time volunteers carry first aids box during time of their home visit. Where they meet with the carers who will brief him/her on the condition of the client and treatment like medical, counselling and guidance are provided to the client, this is to help our clients not to be re-infected and to infect others family members.

2.3.5: Spiritual

Addressing this problem on the biblical perspective is the most important way because HIV/AIDS is mainly a behavioural disease not only need medical issues, we mainly make sure that human being understand the purpose and reason why God created humanity in His own Image and the value of human life

We have a prayer team whom are call good shepherd intercessors they always on every Tuesday and Friday have a joint prayer together with our clients, preparing them through bible exposition which will lead them to repentance, reconciliation and asking forgiveness from God and fellow human being, this prepared them for a happy life, filled comfortable, being love, reducing pain, all these is to prepared them for death and eternity.

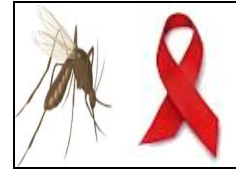
2.3.6: Income generating Activities

To our clients we give them start up capital and these funds are a revolving, to start a small project depending on the skills, strength and health condition of the client. For effectiveness of this project we have put them into small groups of 6-8 clients, with the leaders like the chairperson, secretary and treasurer under supervision of a technical person employed by the project and each member and the group have an account in a Micro Finance Institution in kole district as a way of sustainability of the project.

2.3.7: Orphans

These orphans are of two categories, those who are of school age and are at school we provide them with the school fees and scholastics materials some of them find hard to stay at their home as a result of trauma we offer them boarding school. Those who are out of school we develop their vocational skills, provide them with tools or a start up capital to help them to be self supportive and to support the family mostly these are child headed family. Some of them contract HIV either from mother –child during pregnant, child birth or breast feeding they become our client and we continue giving basic needs like food, clothes renovation of house if needed. We protect their right of orphans by helping them to access free legal assistance to protect their properties, child abuse and exploitation by directing them to right activist.

2.3.8: Centre day the last Saturday of every month.



The main activities of the centre day is counselling and guidance, this help members to share their experience and understanding the issues facing them from within and out side the community and prepare them to plan for their future, we also prepare them through testimony, drama and song for openness about living with HIH/AIDS to avoid stigma and discrimination in the community and prepare them for HIV/AIDS advocacy into the community.

2.3.9: Funeral services

In case lost of life of our client we contribute in the burial expenses by providing food and coffin.



2.4 Collaboration with other Organizations

The project will work in collaboration with a number of organizations and other stakeholders to ensure successful implementation of the project activities. Some of these organizations are:

- District HIV/AIDS committees (DHAC)
- Kole District Local Government through the District Focal Person
- World Vision a CBO which has been are implementing HIV/AIDS advocacy, care and empowerment in our project area in Uganda by complementing the little advocacy and care which was being done by a few NGOs, local groups, local authorities and the Government in Kole district.

2.4.1: Sustainability of the Programme Beyond Funding

The project will depend on the following sources of revenues to sustain its activities beyond any funding;

- Formation of Foster Parent groups and Peer clubs in schools especially girls at puberty
- Grants from other donors to support the activities of the grass root CBOs
- Fund raising to ensure funds in the grass root CBOs
- Increasing the establishment and support of income generating activities for PLWA and orphans.
- Consistent HIV/AIDS policy for Kole district

2.4.2: Beneficiaries (characters and numbers)

The direct beneficiaries of this project are PLWHA, Foster Parent groups and orphans Vulnerable Children members. The proposal mainly lay emphasis in primary schools in Kole District as special class of community leaders and officials of CBOs dealing in HIV/AIDS activities. Of course Kole district will be the main direct beneficiary because of their mandatory role to provide Health Services in the district.

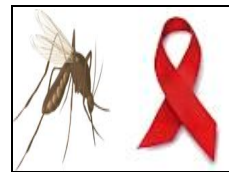
It is expected that:

- 6 schools in the Sub-County get support
- 60 people living with HIV/AIDS will benefit from the project initially
- 10 CHCs will be trained
- Villages health team (VHTS) working on PLWHA and OVC will be identified for awareness training

3.0: Project Description

3.1: Objectives of the project: Specific objectives include:

- e. Increase and strengthen community/home based care by 8 CHCs for quality services for HIV/AIDS patients and 100 mothers access MTCT services in Kole District by Dec 2015
- f. Increase awareness and prevention of HIV/AIDS in Kole District (see monitoring plan for targets)
- g. Reach out to Local communities to support 20 orphans and vulnerable children (OVCs) in school fees payment per sub county each year for 1 year and 140 girls get sanitary towels
- h. Increase and support 60 PLWHA in income generating activities (IGAs) for OVCs and PLWHA



3.2: Duration: This particular proposal is for the period July.2012ending Dec.2015.



4.0 ACTIVITIES AND EXPECTED OUTCOMES

	ACTIVITY	EXPECTED OUTCOMES
1	Objective 1: Increase community/home based care quality services for HIV/AIDS patients in Kole District	
	a. Identify and register the orphans b. Training of community Health workers c. Facilitate Community/home based care services d. Provide medical and material support to HIV/AIDS patients, other receive MTCT services.	<ul style="list-style-type: none"> • CBOs working on PLWHA and OVC identified • 10 CHCs trained • Referrals for 100 patients for MTCT services.
2	Objective 2: Increase support & promotion of awareness of HIV/AIDS prevention in Kole District	
	a. Orient community health workers to the project scope and objectives b. Conduct community sensitization on behavioral change c. Production of educational local drama plays d. Production of awareness materials & video films e. Purchase of computer and accessories to build a database for HIV/AIDS programme in the district. f. Purchase of one video camera	<ul style="list-style-type: none"> • 2 drama plays produced and organized • 2 video recordings of the drama plays organized • 10 workshops for community leaders organized i.e. One in each sub county • One computer procured and its accessories
3	Objective 3: Reach to Local communities to support orphans in schools in Kole District	
	a. Identify and train Health/counseling home based care workers b. Provide support to orphans at school with educational materials and fees c. Provide sanitary towels to girls at puberty d. Give opportunity for Games and Sports	<ul style="list-style-type: none"> • Training of 10 home based care workers to counsel and follow up on orphans in different schools • Identify and register the orphans • School support to 20 orphans at school with educational materials and fees • Provide sanitary towels to 140 girls at puberty
4	Objective 4: Increase the establishment and support of income generating activities for PLWHA & Orphans	
	a. Identify training needs b. Training PLWHA /Care givers in small business management skills e. Purchase and supply the followings for supporting selected IGAs i.e.: <ul style="list-style-type: none"> a. Tools after training b. Bicycle repair 	<ul style="list-style-type: none"> • Train at least 60 existing PLWHA in small business management skills • Provide micro-finance for supporting selected IGAs i.e.:



5.0 PROJECT IMPLEMENTATION

5.1 Work plan/Timetable

3.1 Work plan/ Timetable														
ACTIVITY	TASKS	TIME FRAME												WHO
		1	2	3	4	5	6	7	8	9	10	11	12	
1. Increase community/home based care for quality services for HIV/AIDS patients in Kole district	Identification and registration of beneficiary PLWHA in the project area and purchase of motorcycles.													Programme Office, and Kole HIV Focal person
	Training of community Health workers													
	Facilitate the provision of community/home based medical & social care services													
	Provision of medical and material support to HIV/AIDS patients, other receive MTCT services.													
2. Increase awareness and prevention of HIV/AIDS in Kole district	Orient community health workers to the project scope and objectives													Programme Adm
	Conduct community sensitization on behavioral change													
	Production of educational local drama plays													
	Production of awareness materials & video films													
	Purchase of one video camera													

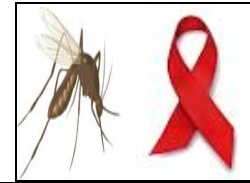


3. Reach out to Local communities to support orphans and vulnerable children	Identify and train Health/counseling home based care workers													Programme Officer
	Provide support to orphans at school and vocational institutions with educational materials and fees													
	Provide sanitary towels to girls at puberty													
	Identify training needs													Programme Adm. and technical vocational consultants
4. Increase the establishment and support income generating activities for orphans and vulnerable children (OVCs) and PLWHA	Training PLWA /Care givers in small business management skills													
	Procurement tool& distribution to the beneficiaries who pass through vocational skill													



Appendix A: BREAKDOWN OF BUDGET REQUESTED

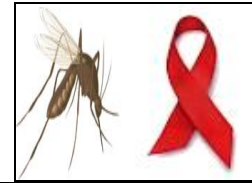
NO	ACTIVITY	Task	Item	Budget Notes	Amount (Shs)
1.	1. Increase community/home based care for quality services for HIV/AIDS patients in Kole district	Identification and registration of beneficiary PLWHA in the project area	<ul style="list-style-type: none"> - Radio announcements - Subsistence allowance for staff - Purchase of motorcycles 	10,000= x 2 times x 5 2 social workers x 5 meetings x 50,000= 4motorcycles x 18,000,000	100,000= 500,000= 72,000,000= ST 72, 600,000=
		Training of Community home care services	<ul style="list-style-type: none"> - Venue hire - Radio announcements - Subsistence allowance for facilitators 	50,000= x 2 days x 5 times 10,000= x 10 times 2 facilitators 2 days x 5 50,000=	500,000= 100,000= 1,000,000= ST 1,600,000=
		Facilitate the provision of community/home based medical & social care services	<ul style="list-style-type: none"> - Subsistence allowance for Community Health workers - Subsistence allowance for Community home care services 	2 CHWs x 36 months x 50,000= 2 CHCSs x 36 months x 70,000=	3,600,000= 5,040,000= ST 8,640,000=
2.	2. Increase awareness and prevention of HIV/AIDS in Kole district	Conduct community sensitization on behavioral change	<ul style="list-style-type: none"> - Venue hire - Radio announcements - Subsistence allowance for facilitators 	50,000= x 2 days x 5 times 10,000= x 2 times x 5 2 facilitators x 10 meetings x 50,000=	500,000= 100,000= 1,000,000= ST 1, 600,000=



		Production of educational local drama plays	<ul style="list-style-type: none"> - Play/drama writing - Rehearsals (weekly) - Costumes - Hire of PA System 	100,000= x 30 plays 20 actors x 10,000= x 4 wks 20 x 20,000= 250,000= x 30 times plays	3,000,000= 6,000,000= 400,000= 7,500,000 ST 16,900,000=
		Production of video films	- Video production	Allowances paid for production	200,000=
		Purchase of video camera	1 Video camera	1 x 1,500,000	1,500,000=
3.	Reach out to Local communities to	Provide sanitary towels to girls at puberty	- Sanitary towels	140 x 15,000= per year	2,100,000=



	support orphans and vulnerable children	Provide support to orphans at school and vocational institutions with educational materials and fees	-Uniform -Books and pens -School bags x -Math sets. -Blankets -Bed sheets x 5 sub counties -Mattress - Mosquitoes nets . - Tools support after training <ul style="list-style-type: none"> • Sewing machines • Tool box – Masons • Tool box for C&J • Tool box for Bicycle repairs 	-Uniform x 260 x 20,000= -Books and pens 260 x doz/year x 6,500 -School bags 260 x 25,000= Math sets 160 x 1,500= -Blanket 260 x 20,000= -Bed sheets 260 x 20,000= -Mattress 260 x 60,000= Mosquitoes Nets. 260 x 25,000= 300,000x 20 x5 50,000=x 20 x5 100,000 x20 x5 40,000 x20 x5	5,200,000= 1,690,000= 6,500,000= 390,000= 5,200,000= 5,200,000= 15,600,000= 6,500,000= 30,000,000= 5,000,000= 10,000,000= 4,000,000= ST 99,080,000
3.	Increase the establishment and support income generating activities for orphans and PLWA	Training PLWHA /Care givers in small business management skills	- Venue hire - Subsistence allowance for facilitators -	-50,000= x 10 times - 2 facilitators x 10 times x 40,000=	5,000,000= 800,000= ST 5,800,000=



		Other requirements	<ul style="list-style-type: none"> Auditing 	2,500, 000/= x 3 yrs	7,500,000=
				-	
TOTAL in Uganda Shillings					206,220,000=

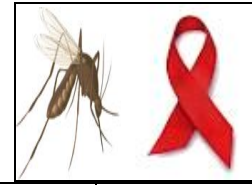


Appendix B – Administrative & Operation Costs

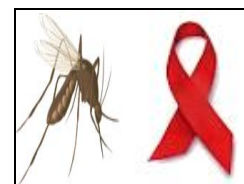
No	Items	No required	Unit cost	No Of period	Amount
1	Office Equipments.				
	Cupboard	1	600,000	once	600,000=
	Tables	4	250,000	once	1,000,000=
	Plastics Chairs	100	25,000	once	2,500,000=
	Wall Clock	2	15,000	once	30,000=
	Duplicating Papers	5	15,000	once	75,000=
	Files	20	5,000	once	100,000=
	Records books	10	15,000	once	150,000=
	Pens	1 box	5,000	once	5,000=
	White wash	5	1,500	once	7,500=
	Punching Machines	2	10,000	once	20,000=
	Stepping Wires	4	1,000	once	4,000=
	Glue	3	7,500	once	22,500=
	Computer	1	1,500,000	once	1,500,000=
	Printer	1	800,000	once	800,000=
	Photocopier	1	2,500,000	once	2,500,000=
	Funs	2	70,000	once	140,000=
	Rent, Electricity& water	1	500,000	12months	18,000,000
	Maintenances	1	200,000	once	200,000=
	Sub- Total				27,654,000=

Food

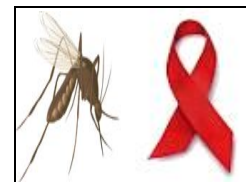
No	Items	No Required	Aims no's Per sub-ty	Units Cost	No of Periods	Amounts
2	Beans	50 Kgs	50 victims	2,000	12 months	5,000,000=
	Maize flow	50 Kgs	50 victims	2500	12 months	6,250,000=
	Rice	50 Kgs	50 victims	4,000	12 months	10,000,000=
	Sugar	5 Kgs	50 victims	3,000	12 months	750,000=
	Cooking Oil	5 litters	50 victims	5,000	12 months	1,250,000=
	Salt	2kgs	50 victims	1,000	12 months	100,000=
	Sub-total					23,350,000=
3	Hygiene					
	Tooth Paste	20	20	1,500	3 times	90,000=
	Basin	20	20	6,000	once	120,000=
	Body	20	20	2,000	3 times	120,000=



	lotions					
	Sub- total					330,000=



4	Administrative Cost				
	Programme Officer	1	450,000=	12 months	5,400,000=
	Programme Adm.	1	500,000=	12 months	6,000,000=
	Volunteers	5	200,000=	12 months	12,000,000=
	Attendance	1	150,000=	12 months	1,800,000=
	Board meeting	Once	900,000=	12months	2,700,000=
	Bank Charges	1	50,000=	12 months	600,000=
	Hiring van	12 times	250,000=	12months	3,000,000=
	Air time	1	1,000,000=	12months	1,000,000=
	Fuel	1	6,000,000=	12months	6,000,000=
	Sub- total	-	-	-	38,500,000=
			3% cost of proposal production (Kulakula Management Consultants)		8,881,620=
			Contingencies 15%		44,408,100=
TOTAL in Uganda Shillings					296,054,000=
GRAND TOTAL (A + B)					349,343,720=



6.0: MONITORING PLAN

Objective	Measure of Success	Data Sources
Increase community/home based care for quality services for HIV/AIDS patients in Kule District	1.1 100 people identified & registered as PLWHA in the project area 1.2 10 Community Home care services (CHCs) trained 1.3 20 people assisted to access and use TB services in the district clinics 1.4 60 clients assisted in accessing ARV treatment 1.5 100 clients assisted to access MTCT services	<ul style="list-style-type: none"> • Activity Reports • MIS Data • Field Visits • Program registers • Referral system
Increase awareness and prevention of HIV/AIDS in Kule District	2.1 10 Community and health workers consulted and involved in the project 2.2 2 Drama plays composed and produced 2.3 10 Community sensitisation workshops conducted 2.4 60 Community leaders sensitised and involved in the project 2.5 1 Computer and accessories procured 2.6 1 Video camera procured 2.7 1 office premise opened	<ul style="list-style-type: none"> • Activity Reports • Field visits • Project Inventory records
Reach out to Local communities to support orphans and vulnerable children	3.1 100 Orphans and vulnerable children registered under the project 3.2 20 OVC supported in schools and other vocational training institutions 3.3 140 Girls at puberty provided with sanitary towels 3.4 60 Community/home based IGAs established to support OVCs	<ul style="list-style-type: none"> • Activity Reports • Schools & Institutional records • Field Visits
Increase the establishment and support income generating activities for orphans and PLWA	4.1 60 PLWHA/Care givers trained in small-scale business management 4.2 Tools purchased	<ul style="list-style-type: none"> • Activity Reports • Field Visits • Inventory Records • Kule district Business records



ORGANOGRAM FOR THE FBO

