MATIBABU FOUNDATION is a home-grown community initiative in western Kenya that provides health and community support services to enable rural, hard-to-reach, and vulnerable communities to be responsible for their own health. Matibabu’s goal is to create a healthy, productive, and prosperous society.

Deeply rooted in the community, Matibabu operates two health facilities in Ukwala and Nzoia, in Nyanza Province, and also provides broad community outreach to the more than 180,000 inhabitants of the rural district. Matibabu recognizes that its client population has significant health concerns and therefore provides a comprehensive, integrated range of health services. Matibabu’s clinical program serves more than 15,000 patients a year and includes routine consultations and laboratory, nursing, and pharmacy services.

Matibabu Foundation was founded in 2003 with funding from a group of visiting doctors who have since become the Tiba Foundation. In 2006, Matibabu registered as a Kenyan nongovernmental organization but it wasn’t until they were awarded a President’s Emergency Plan for AIDS Relief (PEPFAR) New Partners Initiative (NPI) grant from the U.S. Centers for Disease Control and Prevention (CDC) that they had the resources to offer the integrated care that their community needed. In conjunction with the direct grant from the CDC, Matibabu was also a recipient of technical assistance to strengthen both its management and programmatic systems. Implemented by John Snow, Inc. and Initiatives Inc., the TA-NPI is designed to build the capacity of the CDC’s 12 NPI grantees, including Matibabu.

Matibabu programmes include preventive, curative, and palliative care for a range of health concerns, including HIV, TB, maternal and child health, breast and cervical cancer, malaria, cholera, worms, and jiggers. The organization has also launched a vocational training programme for families affected by AIDS; farming and local gardens to improve the food security of people living with HIV (PLHIV); Youth Friendly Centres (YFC) as a forum for messages on HIV and AIDS, and drug and alcohol abuse; and a Women’s Centre, where women can gather to discuss cultural practices that increase HIV transmission risk and other issues.

Announced on World AIDS Day 2005, the New Partners Initiative (NPI) is part of a broader effort within the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR) to work with established community- and faith-based organizations to become new partners to the national government and funding partners. This is done by enhancing their technical and organizational capacity and ensuring the quality and sustainability of HIV programs through community ownership.

In 2008, JSI and its partner, Initiatives Inc., were asked to form the Technical Assistance to the New Partners Initiative (TA-NPI) by the U.S. Centers for Disease Control and Prevention (CDC). TA-NPI’s goal is to build the quality of program implementation and strengthen the capacity of indigenous organizations to serve the needs of their communities today and into the future, through collaboration with government and partnerships with other organizations. This support is provided to 12 established local nongovernmental organizations in sub-Saharan Africa and Haiti.
WHAT THE TA-NPI SUPPORT MEANT FOR MATIBABU

Process

When Matibabu was awarded both the PEPFAR NPI grant and the technical assistance that came with it, the organization's systems were rudimentary. “Our finance systems were quite weak in terms of the controls in place for payments and procurement. The technical capacity of staff was also weak,” says Antony Okola, Matibabu Director of Finance and Administration.

JSI works closely with the individual grantees to determine the specific gaps in management and programmatic processes and systems before developing approaches to address those gaps. The Organizational Capacity Assessment (OCA) and Technical Capacity Assessment (TCA) processes engage staff in assessing their own capacity in critical management and programmatic areas.

The baseline OCA enabled staff to identify Matibabu's strengths and weaknesses in each of seven management areas (governance, administration, human resource management, financial management, organizational management, program management, and project performance management). From there, the JSI team worked with Matibabu to develop a targeted plan of actions to strengthen the systems and procedures toward better client services and sustainability.

Similarly, the technical assessment looked at Matibabu’s capacity across six domains related to delivering HIV services: Leadership, service delivery and management, supplies management, data collection and monitoring and evaluation, human resources capacity, and laboratory capacity.

Once the assessments were completed, JSI developed targeted trainings to strengthen areas in need. A second OCA in May 2010 shows dramatic improvements in Matibabu’s systems and processes.

With more than 30 years of experience working with local organizations to strengthen capacity, JSI assists partners using a unique, client-centered approach that focuses on both need and scale.

If a health system’s staff are not focused on the clients they’re serving, long-term efforts will fail. As a core component of its capacity building approach, TA-NPI worked with Matibabu to look in-depth at the client base they serve. Taking a comprehensive approach, JSI and Matibabu used problem tree analysis to determine underlying causes and factors driving as aspect of the epidemic, and the social ecology model to consider the personal, household, community, and legal or political situations confronting key populations. This guided a detail review of needs and the appropriate responses for Matibabu to be client-centered in its approach.

The TA-NPI will continue to work to strengthen the Matibabu team’s skills and streamline systems.

“Before NPI our procedures were not well organized and our facility had little equipment,” says Liza Abuje, Communications and Monitoring & Evaluation Manager at Matibabu. “Today, we have grown. We have more staff, our management systems are in place and working well, and we even support other facilities because we have the equipment and supplies to conduct lab tests.”

Results

TA-NPI calculates its results not solely on numbers of trainings held or people trained, but by monitoring changes in performance. Not only has the client load for HIV counseling and testing grown from 4,700 to 10,000 per year since the NPI grant, Matibabu has also increased the number of CD4 and full hemogram lab tests from 3,492 in year one to 6,622 in year two. Furthermore, Matibabu is now hosting 16 Ministry of Health sites which refer clients to Matibabu because its new equipment and systems are in place, with staff appropriately trained to use it. Staff and clients also attest to the changes in the organization.
I'm a trained doctor and my patients see me as highly skilled. But I recognized that as far as managing programs—things like making sure that our human resources are well coordinated, support supervision, managing drugs and reagents, or ensuring the right number of staff are available for various activities—I did not have those skills.

Now I not only feel like I can manage these aspects of a clinic, but, I also know that I can now be a change agent to build others’ skills, focus resources, coordinate and organize different groups of people, and to lead teams to achieve certain goals.

—Dr. Fred Okango, Matibabu Technical Director

The two capacity assessments have helped me to understand how to improve our governance—from strategic planning to succession planning. Who will talk with the government if I’m hit by a bus? Who will talk on behalf of Matibabu? We had no structure in case something happened to me or any of our other managers. Today, we have those plans in place.”

—Dan Ogola, Matibabu Foundation Founder & Executive Director

“The supportive supervision training has been so useful. It has given me a new way of looking at people I work with, particularly those I supervise.

Now I don’t judge people immediately. I look at other things that could affect their performance—sometimes an issue could be a problem with the system or that someone hasn’t been trained in the skill yet. Before I can say I was a bit judgmental. I believe I’ve changed—I’m happy about that and I think staff are, too!”

—Liza Abuje, Matibabu Communications & Monitoring & Evaluation Manager

“When I began working at Matibabu in 2008, the finance and administration systems were quite weak...We first went through an organizational capacity assessment (OCA). At the time we knew there were gaps; the OCA showed us exactly where and how big the gaps were—and they were significant! The support from TA-NPI has been very helpful. Today, I know that Matibabu is ready and able to meet any donors’ needs. We have transparent systems and strong financial oversight. We have met the CDC’s financial compliance and reporting requirements and can do so with any other donor.”

—Antony Okola, Matibabu Director of Finance & Administration
Servicing the Needs of our Client

“The quality improvement (QI) training has changed how I approach our work in the community. We used to just go out and inform people about HIV to increase awareness. Our goal was to change their behavior, but we don’t really know whether that happened or not. Since the QI training, I now think about what clients want and also need. I listen to them and then talk with them.”

—Chris, Community Outreach Organizer

“People used to be afraid to come to the Matibabu Clinic because they feared knowing their status. I have learned to get to know someone first, to talk about all her health concerns, before encouraging her to come for testing and counseling. The approach is now working well.”

—Concillata, Community Health Worker & Matibabu Women’s Group Member

“The training we received from Matibabu has been helpful to me as a community resource person. The training we received helped us better understand diseases and prevention, and now I can help people realize that prevention is better and cheaper than treatment.”

—Joseph, Community Health Worker, Nyangu Community

“Referrals and networking are critical components. Initially, we had a difficult time getting the community health workers to refer clients to a facility and to make sure that people actually went there. Now we work closely with community health workers and facility-based peer educators to follow-up to ensure people take advantage of the services offered. We have also done a complete survey of other health facilities and established Memoranda of Understandings with different health services where people can be referred.”

—Dr. Fred Okango, Matibabu Technical Director

Interview with Dr. Fred Okengo

“Two years ago we worked one day at a time running our clinic and delivering services to our community,” says Doctor Fred Okango, Matibabu Technical Director. “Today, we know who we are and we know where we are headed. We are aware of our entire purpose and have crystallized our mission. Today we are all together, working towards something we can see. It’s really our biggest achievement.”

Dr. Okango talks about where Matibabu stood when they received the PEPFAR NPI grant:

When we started we were not very organized in terms of systems and structures. We often felt overwhelmed because of the sheer magnitude of HIV cases. At the time we didn’t have nearly enough supplies or drugs, let alone ARVs to treat AIDS. The PEPFAR grant helped us buy commodities, pay staff, and get lab tests done. But just as important, JSI’s technical assistance has strengthened us and enabled us to prepare for the future.

TA-NPI support helps organizations identify their own issues and needs and then develop plans to address those needs:

We didn’t understand or have the skills to do quality improvement, supportive supervision, or effective monitoring and evaluation. Once the assessments showed us where our gaps were, JSI developed a training program that targeted our specific needs and helped build our skills.

One of the issues that emerged was how we gave HIV-prevention messages. We realized that raising awareness was not enough—in fact, 90% of people knew something about HIV, but they weren’t changing their behavior. We recognized that we needed standardized HIV-prevention messages that would work with our populations—and we needed a curriculum to ensure that everyone was conveying the same messages. We use the curriculum when we train trainers, who then go out and use it with in- and out-of-school youth and women in peer education groups. We believe this approach will help in sustaining the messages because the peers will continue even after the NPI program ends.

An added benefit of JSI’s TA is that it helped strengthen relationships: I can also say that this process of working through the OCA and TCA has brought about a great team spirit. In other organizations where I’ve worked there have always been islands of friends. The assessments and the strategic planning exercises have brought us all together as a team. We belong to Matibabu Foundation and want to work together. In addition, I know my own skills are strengthened—if another organization required my help in capacity building, I’d be able to do it!

For more information on TA-NPI please visit: http://tanpi.jsi.com