



### jumpstart

JumpStart is APCOM's flagship capacity strengthening programme for community organisations. We work to improve, and build on an organisation's existing management and advocacy, while encouraging leadership for a community-led HIV response. The project serves as well as a catalyst for regional, sub-regional and national networks to explore their core competencies that they can build on and, at the same time, explore skill development areas that they still need. JumpStart started as a partnership of the Australian Federation of AIDS Organisations (AFAO) and APCOM.

JumpStart developed two unique tools to assess the network or organisation: the Rapid Assessment Apparatus (Rap App), a scoring tool which assesses a community organisation in its operations and performance against programmatic and organisational criteria and the Dissemination Plan Template (D-Plate), a tool to assist community organisations to use the available strategic information in doing more systematic and planned advocacy.

### rapapp

The Rapid Assessment Apparatus is an assessment tool joint designed by APCOM and AFAO under this initiative to assess the core competencies of an organisation or network against eleven programmatic and organisational areas. The networks undertook a facilitated self-assessment process to identify their capacity and technical needs. the findings were the bases for technical support.

Summary Report of the Rapid Assessment of the Poz Home Center Foundation, Thailand (Based on data and information collected through the APCOM/AFAO Rapid Assessment Tool, July 2015)

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### The Poz Home Center Foundation

is the only community-based organisation providing HIV care and support services specifically for men who have sex with men (MSM) and transgender people living in Bangkok, Thailand. It provides a drop-in centre, home visits, case coordination between hospital and home, telephone support and advice, peer-based one-to-one support and case coordination, group workshops, social gatherings, cultural events and educational programmes.

The organisation has built strong relationships with private, specialist, and government clinics and hospitals so that PLHIV, and particularly MSM and transgender people affected by HIV, can access services without experiencing stigma and discrimination. Founded in 2005, it officially registered as a non-profit organisation in 2012.

The Poz Home Center was assessed in 17 key organisational and programmatic areas, using the **Jumpstart Rapid Assessment Apparatus (Rap App)**. The Rap App is one of the core tools of JumpStart, an MSM and transgender network capacity strengthening initiative implemented through a partnership with APCOM and the Australian Federation of AIDS Organisations (AFAO). The tool allows us to create a snapshot of the strengths and technical support needs of an organisation at a given time, based on 11 key organisational and programmatic criteria, and 6 criteria on engagement with key affected populations. The tool was completed by the Poz Home Center Foundation during a facilitated self-assessment process at a two-day meeting in July 2015.







# TOP THREE TECHNICAL SUPPORT PRIORITIES

Fulfilment of the following technical support needs would transform VNMSMTG into a more effective and efficient organisation.

### A Improving the organisation's capacity in resource mobilisation

The Poz Home Center Foundation needs support to secure funding which covers its core costs, including an expanding team of staff. It would also benefit from support from a business development expert to ensure its excellent ideas for diversifying its funding base come to fruition (for example through opening a coffee shop, and promoting itself as a source of technical support for other organisations including the private sector).

### Expanding its engagement with young people, sex workers and PWUD

The Poz Home Center Foundation's current focus is on supporting its MSM and transgender members, but to increase its impact it would benefit from support in how to reach and target individuals who identify with multiple KAP groups (for example young MSM who use drugs, or transgender sex workers). This support would involve learning visits and mentoring from organisations which focus on young people, sex workers and PWUD.

### Increasing its focus on advocacy

Advocacy is not currently a priority for the Poz Home Center Foundation, but an increased advocacy capacity would lead to improvements in its service delivery and programme work. Training for its staff on advocacy would enable the organisation to identify the links between advocacy and its other work, and would hopefully result in development of an advocacy plan linked to its overall workplan.



### **RESULTS**

The Poz Home Center achieved a total score of **154/216** in the Rap App. It was assessed in 11 key areas and 6 sub-areas, both organisational and programmatic, with each area having a maximum score of 12. A summary of the data and information from each key area is outlined below.

### A.

### **KEY ORGANISATIONAL CRITERIA**

#### i) Governance

The Poz Home Center achieved the maximum score in this section. It has worked hard to build its governance capacity including through establishing a Board, developing governance documents and registering as a foundation in Thailand.

The Board has five members (President, Vice-President, Treasurer, Secretary, and one ordinary member). Its Board members have significant experience in PLHIV treatment, care, and support for MSM and transgender people, and also of working with CBOs. The role of each Board position is documented, and the overall functions of the Board are to oversee, monitor, and evaluate the organisation's work. According to Thai law, the Board members of the Poz Home Center can be appointed for four years, but in practice there have not been any new Board members since 2011. Board members are appointed by invitation of the Executive Director.

The Poz Home Center has Board meetings twice a year. Minutes are taken and shared with all Board members. Outside the official Board meetings there is rarely contact between Board members. If decisions need to be made outside meetings this is done by email so that there is a written record, and is followed up with a phone call.

### | Recommendations for next steps

Although the Poz Home Center achieved a maximum score in this section, it needs to ensure it is abiding by its constitution with regard to the terms of Board members. The constitution in turn needs to reflect the laws of Thailand.

The organisation also needs to revisit its by-laws/constitution regarding selection of Board members to ensure this reflects good governance practices.

#### ii) Staffing

The Poz Home Center achieved the maximum score in this section. It has twelve full-time members of staff: the Executive Director, administration, human resources, finance, IT, monitoring and evaluation officers, two Programme Coordinators, three Activities Officers and one office keeper. All staff members have contracts, job descriptions and terms of reference. There are also seven part-time Activities Officers, plus volunteers who accompany PLHIV members to hospital, participate in hospital activities, provide counselling for PLHIV including a hotline phone service, home visits to PLHIV, and assistance with social welfare.

The organisation has all the necessary internal staffing policies, as well as a Standard Operating Procedures document.

### **Recommendations for next steps**

The Poz Home Center's staffing capacity is of a very high standard and we would recommend that it positions itself to mentor and support other organisations and networks in the region to build their staffing capacity.

#### iii) Finance

The Poz Home Center manages its own funds and has financial and accounting systems. It has a finance policy which includes all of the forms needed for compliance with the policy. All financial documents are kept for five years. The organisation undergoes internal (by staff and Board members) and external audits (by donors (quarterly) as well as an annual external audit commissioned by the Poz Home Center itself). Financial reports and audit results are shared with the Board and donors but are not otherwise made public. The organisation is still relatively small, but if it expands further it should consider producing its own annual report including a public financial report.

The organisation has detailed budgets for each activity area, which are monitored against expenditure by finance staff.

#### iv) Resource Mobilisation

The Poz Home Center currently has one external source of funding as a sub-recipient to FHI 360. It has funding for six staff members, but employs twelve. In the past it has developed collaborative funding proposals with partners (including funding applications to the Elton John Foundation, and the Local Capacity Initiative funded by the President's Emergency Plan for AIDS relief (PEPFAR), however these were not successful. The Poz Home Center does not have the capacity to write funding proposals in English, but plans to establish a fundraising team to improve its success in accessing funds. It has a draft resource mobilisation plan which needs to be finalised.

The Poz Home Center is doing well in its efforts to diversify its funding base, and is making good progress in terms of small grants/fundraising. For example, it plans to set up a coffee shop to raise funds for the organisation, and is hoping to confirm funding through Chevron until September 2016. It has donation boxes in entertainment venues, and a relationship with a bar which provides money from one-off fundraising events. The Poz Home Center also receives invitations to speak about HIV from private companies, and this generates some income through donations from the companies.

### Recommendations for next steps

The Poz Home Center would benefit from support from a consultant to finalise its resource mobilisation plan. It also needs to communicate with donors its need for core funding to employ staff who can provide expertise in resource mobilisation.



### v) Partnerships and Networking

The Poz Home Center is active in developing and maintaining partnerships with other local, national, and regional organisations. It works with a number of partners in Bangkok who are also funded by FHI 360, and provides assistance to other organisations that want to establish care and support services, for example for male and female sex workers who are living with HIV (with SWING). The Poz Home Center undertakes joint activities on prevention and testing, and next year it will work with other clinics such as those run by SWING and Rainbow Sky Association of Thailand to provide oral swab rapid HIV testing.

It also created MPoz, a platform for engagement between the Poz Home Center and other organisations which share similar aims. It currently has 14 member organisations.

### Recommendations for next steps

The Poz Home Center needs to ensure it actively communicates with its partners, rather than waiting for invitations. It needs to take a more active role in establishing and leading partnerships for project work rather than solely responding to partners' invitations to be involved.

### vi) Membership

The Poz Home Center sees its members as friends who need support. Its membership consists of individuals, originally only MSM and transgender people living with HIV, but now HIV-negative MSM and transgender people as well. It currently has 750 members. There is a database of all members which is regularly updated. Names are not used and service users are identified by unique codes. The database is secured with restricted access, based on the needs of staff to access the information it contains. Means of communication with members include LINE, Facebook, and group chat on

Means of communication with members include LINE, Facebook, and group chat on Facebook, telephone or speaking face-to-face with individual members. The Poz Home Center also organises 'Family Days' which provide the opportunity for communication between the organisation and its members, and between members themselves. At these days, members discuss different topics in HIV treatment, prevention, testing etc. in small groups.

The Poz Home Center does not have a formal procedure for consultation with its members.

### **Recommendations for next steps**

The Poz Home Center has good engagement with its members, but would benefit from support to identify funds to hold annual general meetings at which members could find out more about and influence the organisation's work. APCOM should consider sharing the Poz Home Center's experience of developing a secure member database with other networks/organisations in the region as an example of good practice, as many lack this.



### **B** KEY CRITERIA ON ENGAGEMENT WITH KEY AFFECTED POPULATIONS (KAP)

This section of the Rap App measures the engagement and scope of work of the network with KAP, with the aim of identifying opportunities to expand coverage.

The Poz Home Center's target groups are MSM and transgender people, and particularly those living with HIV. However some members will also identify as young people, sex workers or people who use drugs. The organisation needs to find ways to ensure it is including these individuals in its work, through specific targeting and project design. Its weakest engagement is with PWUD and it should prioritise building partnerships with support organisations whose main focus is on supporting PWUD.

### i) MSM engagement

The issues facing MSM are well-integrated into the organisation's work. The Poz Home Center records the issues/problems reported by its MSM and transgender members, and if possible these are dealt with by staff according to their expertise.

Some Board members are from the MSM population, and MSM are well represented in the membership. MSM and transgender women are employed by the organisation and its policy is not to discriminate for or against any particular group; individuals are employed for their expertise in the areas in which the Poz Home Center works.

The MSM community is not formally involved in programme design processes, but MSM members are encouraged to give feedback which informs the development of new projects and services.

The Poz Home Center has partnerships with MSM organisations such as APCOM, the Rainbow Sky Network, SWING, Bangkok Rainbow and the M-Poz network, as well as with commercial venues. The Poz Home Center's engagement with APCOM includes attendance at meetings, participation in TestBKK, and a grant for organisational strengthening.

The Poz Home Center's plans to extend its reach to engage with more MSM and transgender people is limited by the availability of funds. In the meantime, it should ensure it is including and specifically targeting MSM and transgender people with different vulnerabilities through the Center.

#### ii) Engagement with transgender people

The issues facing transgender women are well-integrated into the Poz Home Center's work. There are more MSM than transgender members but the transgender members are actively engaged with the organisation. There is one transgender woman on the Poz Home Center Board, but she does not officially represent the transgender community.

There are currently no full-time transgender staff members but there have been in the past. Two transgender women work for the organisation as volunteers.

### iii) Engagement with young people

The Poz Home Center does not have a specific focus on young people at present, although it may do in the future. It does of course have young MSM and transgender members. Young key affected populations have never been represented on the Board of the organisation, and young people living with HIV have little engagement with the Poz Home Center.



There is no discrimination at the Poz Home Center, and the priority when recruiting staff is that they are appropriately qualified.

The Poz Home Center feels its engagement with young people is limited by a lack of resources to provide targeted services.

### Recommendations for next steps

The Poz Home Center should ensure that one of its priorities is accessing funding to develop more youth-focused services. It should also seek out partnerships with youth-focused organisations to ensure it is meeting young people's needs.

### iv) Engagement with sex workers

The Poz Home Center does not have a specific focus on sex workers. Its work focuses on issues faced by MSM and transgender people living with HIV, so sex workers are only a focus to the extent that also identify with one of these other groups. The organisation does provide care and support services to MSM and transgender people who are sex workers, but the issues facing sex workers are only advocacy priorities when they fit with the Poz Home Center's core focus.

The organisation does not have a system for gathering/sharing information with sex workers, but the organisation engages with MSM and transgender people who are PLHIV, regardless of whether they have a history of sex work and/or drug use. Members who are/have been sex workers are given an equal opportunity to share their opinions with the organisation.

The Poz Home Center has developed partnerships with sex worker support organisations such as SWING and Sister (for transgender sex workers). It recently trained these organisations to provide care and support for HIV+ sex workers

#### v) Engagement with people who use drugs

The Poz Home Center does not have a focus on working with PWUD, although some of its MSM and transgender members do use drugs. The organisation rarely carries out advocacy work on the issues facing PWUD. There are currently no PWUD on the Board. It has no particular information-sharing arrangements with PWUD, and no partnerships with organisations working with PWUD.

The Poz Home Center expressed its interest in engaging with MSM and transgender people who use drugs, but due to resource constraints they do not have specific plans to expand in this area.

### Recommendations for next steps

Although working with PWUD is not a priority for the Poz Home Center, it needs to develop partnerships with organisations who work with PWUD to ensure it can provide the necessary specialist support to any MSM and transgender members who use drugs, for example in harm reduction.



### vi) PLHIV Engagement

The Poz Home Center achieved maximum points in this criteria. It has a strong engagement with PLHIV, especially MSM and transgender people. It provides PLHIV with a drop-in centre, home visits, telephone support and advice, peer-based one-to-one support and case coordination, group workshops, social gatherings, cultural events and educational programmes. It uses social media and its website to engage with members, as well as individual phone calls. One of the most popular services is its Three Hearts Programme, which provides case coordination between the hospital and the home, as well as peer-based programmes for MSM and transgender people. The organisation incorporates information from the Poz Home Center clients into project design.

There are two MSM PLHIV on the Board, and MSM and transgender PLHIV are very actively engaged with the organisation. It employs a number of PLHIV and has good relationships with other PLHIV organisations including AFAO and APCOM. These relationships provide good opportunities for liaison and information sharing, however the Poz Home Center currently has limited joint work with other organisations.



### **PROGRAMMATIC CRITERIA**

### i) Project design and management, including monitoring and evaluation

In addition to the services provided by the Poz Home Center described earlier in the document, it has a national hotline which provides information on health and HIV, prevention and treatment. It also has a shelter which provides accommodation for people coming to Bangkok for treatment, which is funded from general office/core costs. From next year the Poz Home Center will implement oral swab rapid HIV testing, support by a donor grant.

The Poz Home Center has a strategic plan which guides its project activities. It has also developed, and implements and monitors, an annual organisational work plan. Comprehensive work plans for individual projects are developed and monitored regularly. Monthly staff meetings are used to monitor progress on the workplan, and additional staff meetings are held as needed.

The organisation has a monitoring and evaluation plan. Financial data is reviewed and validated by the Finance Officer, and the organisation is in the process of implementing a quality assurance and quality improvement system. This has until now only been used with campaigns, but will eventually be used for all of the organisation's work. The Standard Operating Procedures manual is also used for quality assurance purposes.

### Recommendations for next steps

The Poz Home Center has impressive capacity in project design and management, and it should consider promoting itself as a provider for technical support in this area for other organisations.



### ii) Technical Capacity

The Poz Home Center achieved a maximum score in this criteria. The organisation is technically strong in HIV, human rights and KAP issues. The project team has strong knowledge in all areas referred to in the Rap App, as well as other skills needed for treatment and care.

The organisation knows how to identify and source technical support when needed. It accesses technical support through FHI 360, PSI, APCOM, AFAO, AIDS Healthcare Foundation, Red Cross Society, Pact Thailand, and the AIDS Project Management Group. It has received organisational capacity building in areas including the development of Standard Operating Procedures, human resources, finance systems, M&E including a database system, and strategic planning. The Poz Home Center staff receive technical information and support from nurses, doctors, and other clinical service providers, including on the clinical treatment of HIV and opportunistic infections. In return, clinical staff often invite Poz Home Center staff to information and education sessions about HIV and related issues.

The Poz Home Center regularly provides technical support to its members and other organisations. Information is also provided at Family Days.

As part of the Rap App, the Poz Home Center provided a list of its key technical competencies together with comments on its current capacity:

- Human rights: addresses this in its programme work and through advocacy
- HIV prevention: the organisation's core work
- HIV treatment: core work
- HIV care: core work
- Advocacy: ED is a member of the MOH advisory committee and raises MSM and TG issues.
- Gender: particularly issues facing MSM and transgender people
- SOGI: its core work is with and for MSM and transgender people
- Communication: focus on internal communications with members and service users
- Media: not a core area

In the future the Poz Home Center would like to prioritise engagement with MSM and transgender migrants and youth, especially PLHIV, and undocumented migrants.

#### iii) Advocacy

This is one of the Poz Home Center's weakest areas. It is a health service organisation rather than an advocacy organisation, and it does not initiate advocacy activities. It does participate in discussions on advocacy issues which take place at partner meetings, but its advocacy activities are not documented.

Some advocacy priorities have been identified, but there is no organisation-wide agreement on these. There is no written advocacy plan. The top three priorities identified by the organisation were: 1) treatment, care and support for MSM PLHIV; 2) treatment, care and support for transgender PLHIV; 3) positive prevention.



The small-scale advocacy work carried out by the organisation starts with identifying the problems faced by individual members and trying to solve these by speaking to doctors and nurses, meeting with Ministry of Health (MOH) officials and meeting with relevant networks. It is therefore focused on carrying out advocacy work to solve individual problems.

The organisation's main advocacy target audiences include the MOH, the Ministry of Social Development and Human Security, the Ministry of Labour and Social Welfare and health service providers. SWING, SISTER, Rainbow Sky Network, and Thai Red Cross are the Poz Home Center's main advocacy partners.

The organisation has limited engagement with global policy issues, but does have an awareness of regional and global policy discussions and debates.

### Recommendations for next steps

The Poz Home Center's primary focus is on service delivery, but in order to influence its work with clients it would benefit from improving its advocacy capacity. A training for staff on the basics of planning for and carrying out advocacy, based on a theory of change exercise, would be very helpful. This would help it to identify funding for advocacy activities. It would also ensure it is able to understand the links between advocacy and its service delivery work. Although the organisation is reluctant to work with the media, due to concerns about members' confidentiality, media contacts would be useful to promote the organisation's work and also to raise awareness of the issues facing MSM and transgender people.

#### iv) Communications

The organisation communicates with its members through telephone, face-to-face meetings and social media, and uses its website to disseminate general information about the organisation. Externally, the Poz Home Center communicates with partners through meetings, conferences and phone calls. There is very little interaction with the media. There has been some use of YouTube to provide information about the Poz Home Center.

Although the organisation has a closed Facebook page for members, many people are unwilling to use this due to concerns about disclosing their HIV status. The organisation does not have a communications plan or strategy. All staff have access to internet, computer and email.

The primary focus of communication across the network is information sharing on MSM and transgender issues. It communicates well with its members but would benefit from technical support to build its capacity.

### **Recommendations for next steps**

The Poz Home Center would benefit from technical support from a consultant to develop a communications strategy. This would include discussions about engaging with the media to achieve the organisation's goals, and could involve partner organisations/networks sharing their lessons on engaging with the media.



### v) Strategic Information

The Poz Home Center regularly sources strategic information through the internet, attending partner meetings and conferences, and consultations with members and stakeholders. It uses meetings with UN agencies, government agencies and NGOs to gather strategic information, and also accesses journals and websites. The strategic information is used in the design of projects and in all aspects of the organisation's work.

The organisation regularly distributes strategic information to its members, Board members and staff (this had previously been done by newsletter but there is no longer funding for this). It now mostly relies on social media for communication of strategic information. It also uses this method to survey members and gather information from them. It does produce its own strategic information based on this information from members, but would like to do more research relating to members' needs and appropriate service provision.

The Poz Home Center sees the Thai Red Cross AIDS Research Centre, UNAIDS, and the Ministry of Health as the key organisations producing relevant strategic information. APCOM is recognised as a reliable producer of information but it is mostly not available in Thai. The organisation does not currently have the staff capacity to translate international strategic information into Thai.

The Poz Home Center is relatively strong in strategic information, both in accessing it and developing it, but there are gaps in its capacity where it would benefit from additional support.

#### Recommendations for next steps

The Poz Home Center needs support to source strategic information about evidence-based implementation of programmes at the field level, including methods of working. This may be something APCOM can advise on. It would benefit from support to organise training for staff members in community research and on using this to develop useful research, advocacy or programming outputs. It also needs to ensure it includes collection and dissemination of strategic information in all future funding proposals. The organisation should promote itself as a potential partner to research agencies, as its excellent contacts with KAP will be of interest.



## TECHNICAL SUPPORT RECOMMENDATIONS

The Rap App provides the Poz Home Center with a snapshot look at its strengths and weaknesses, with recommendations for technical support. The findings indicate that the Poz Home Center is very strong in governance, staffing, project design and management, finance and technical capacity, and relatively strong in membership. It requires technical support in the areas of partnerships and networking, strategic information, communication, and advocacy. Capacity building in these areas would allow the organisation to develop further and to increase its impact. The next steps highlighted in this report in terms of the technical support needs of the organisation are summarised below, by short, medium and long-term.

#### **Short-term**

- Develop a strategic plan for 2016-2020 the organisation is hoping to receive support from FHI, AHF, APCOM and AFAO with this.
- Mobilise resources to establish a community clinic at the Poz Home Center office
- Seek advice from other organisations and networks regarding member engagement and understanding members' needs. This may include external support to develop a follow-up system for members.
- Access support from a consultant to develop and finalise a resource mobilisation
  plan, including donor mapping, developing business plans for non-traditional
  funding opportunities (for example the Poz Home Center coffee shop), and
  developing products and packaging for the Poz Home Center's businesses.
- Ensure core funding and adequate staffing costs are included in funding proposals.
- Advocate to partners for funding to cover the cost of annual general meetings for members.

#### Medium-term

- Ensure staff receive communications training (with a focus on communication
  with external partners), with a communications strategy as an output. This should
  include training in use of social media for member engagement and
  organisational promotion.
- Receive support from a consultant on media engagement and development of a
  media strategy that promotes the organisation's work whilst protecting the
  identities of its members. This could involve learning/sharing experiences with
  other organisations and networks in the region.
- Source funding from partners to strengthen the staff's capacity in English, with the longer-term goal of improving the organisation's resource mobilisation capacity.
- Network with relevant organisations to identify sources of research/evidence on project implementation.

#### Long-term

- Develop partnerships with organisations which support PWUD, and develop a two-way referral system with them.
- Work with organisations supporting different key populations to ensure its interventions are inclusive and target specific groups (including working with young people).
- Access technical support to improve the organisation's advocacy capacity.
  - Organise training for staff members in community research and on using this to develop useful research, advocacy or programming outputs. Part of the training should highlight the need to ensure the organisation includes collection and dissemination of strategic information in future funding proposals. It should also discuss how the organisation can better promote itself to be involved in research studies. The organisation is very interested in the use of technology/apps to track/manage members' health, and would benefit from support to promote itself as a research partner in this.





We are united in our courage to advocacy issues that affect the lives of men who have sex with men and transgender people, including HIV, rights, health and well being.



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