**HOPE FOR FUTURE GENERATIONS**

**STRATEGIC PLAN (2018 -2023)**

***‘informed communities improved lifestyle’***

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List of Acronyms

**AIDS** Acquired Immune Deficiency Syndrome

**ASRH** Adolescent Reproductive Health and Rights

**AU** African Union

**BCC** Behaviour Change Communication

**BOD** Board of Directors

**CSOs** Civil Society Organizations

**DHMT** District Health management Teams

**ECOSOCC** Economic, Social and Cultural Council of the African Union

**GAVI** Global Alliance for Vaccines and Immunisation

**GDHS** Ghana Demographic and Health Survey

**GHCCP** Global Health Corporate Champion Programme

**GHS** Ghana Health Service

**GOG** Government of Ghana

**HFFG** Hope for Future Generations

**HIV** HumanImmunodeficiency Virus

**HR** HumanResources

**JSI** John Snow Inc.

**MDGs** Millennium Development Goals

**NSP** National HIV and AIDS Strategic Plan

**OCA** Organizational Capacity Assessment

**PMTCT** Prevention of Mother to Child Transmission

**SBCC** Social and Behaviour Change Communication

**SDGs**  Sustainable Development Goals

**SWAA** Society of Women and AIDS in Africa

**SWOT** Strengths, Weaknesses, Opportunities and Threats

**UNAIDS** Joint United Nations Programme in HIV and AIDS

**UNFPA** United Nations Population Fund

**UNICEF** United Nations Children Fund

**USAID** United States Agency for International Development

**WASH** Water, Sanitation and Hygiene

**WHO** World Health Organization

Acknowledgements

Executive Summary

This strategic plan provides the operational framework for HFFG’s institutional and programme direction for the next five years (2018-2022). It has been developed through an all-inclusive and participatory approach involving Board members, beneficiaries, staff and key stakeholder/partners.

The plan is anchored on the overall goal of Ghana becoming free of inequalities where all women, children, youth and the less privileged (including persons with disability) are empowered and resourced through its interventions to make informed decisions that will transform their lives.

Aligned to key global and regional frameworks, the plan outlines three (3) thematic Focus areas namely Primary Health Care, Community capacity strengthening and Economic Empowerment and Sustainable Livelihoods. These thematic program areas of focus will be supported by a platform of four (4) enabling strategies. The strategic enablers will be focused on creating the organizational capability, excellence, partnerships, resources and visibility that are critical for impactful program interventions.

Overall, the plan seeks to ensure that program interventions are evidence-based and results oriented; gaps in the organisation’s structure and systems are addressed; staff capacity to effectively coordinate, manage and implement projects are increased; funding base to ensure institutional and programme sustainability is diversified; robust data management system to harmonize data from all M&E activities is developed; knowledge management and culture of sharing and learning within HFFG and its stakeholders is strengthened; and transparency and accountability in the programmatic and financial management of programmes is improved.

Annual operational plans and budgeting will be a key systematic feature in helping to implement the strategic plan. HFFG staff and management will develop these by indicating the scale and extent of work to be undertaken each year.

HFFG management will also lead in monitoring and evaluating the strategic plan. The monitoring system, which would include a detailed M&E plan with process and output indicators, will track progress of outputs from interventions carried out and activities undertaken to assure attainment of expected results. While monitoring will check on the timely implementation of planned activities, evaluation would be carried out at expiration of the plan and would assess the extent to which the expected outcomes have been met. A mid-term review would be undertaken in 2020 to determine the extent to which earmarked activities have been implemented and progress made towards the achievement of intervention activities.

Through the annual operational plans and budgeting, mid- term review, monitoring and evaluation approach, it is expected that a concentrated attention will be maintained on the Plan, ensuring that it continues to meet its purpose and remains appropriate to ongoing changes in the external environment.

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| **HFFG** |
| **OUR VISION** |
| A nation free of discrimination where women, children and young people have equal opportunities to develop their full potential. |
| **OUR MISSION** |
| To facilitate and improve the health, education and socio-economic status of women, children and young people through empowerment, rights based approaches, innovative and acceptable participatory strategies. |

THE CONTEXT OF HFFG’s WORK

## 1.0 The Global and National Contexts

The vision and mission of HFFG is a commitment in line with key global, regional and national laws, policies, agendas, goals and guidelines targeting the health and wellbeing of women, children and young people.

### The Global Context

Globally, the world has challenges in managing the economic, social and health dimensions of sustainable development. More than one (1) billion people are still living in extreme poverty and income inequality within and among many countries have been rising[[1]](#footnote-1). Far too many women, children and adolescents worldwide still have little or no access to essential, quality health services and education, clean air and water, adequate sanitation and good nutrition. They face violence and discrimination, are unable to participate fully in society, and encounter other barriers to realizing their human rights.[[2]](#footnote-2)’[[3]](#footnote-3) Many more people suffer illnesses and disability and fail to reach their full potential, resulting in enormous loss and costs for countries both today and for future generations[[4]](#footnote-4). The case of HIV continues to demand attention. There were approximately 36.7 million People Living with HIV/AIDS (PLHIV) at the end of 2015 (UNAIDS, 2016). Consistently, the vast majority of people living with HIV are in low-to-middle-income counties, particularly in sub-Saharan Africa. Even though overall rate of new HIV infections appears to be in decline, epidemics among key populations continue to grow[[5]](#footnote-5).

Global level laws and guidelines have been developed to deal with these sustainable development challenges. HFFG subscribes to such guidelines especially those targeting the health and wellbeing of women, children and young people to inform its program development and interventions. The guidelines informing HFFG’s operations include: the Sustainable Development Goals for 2030, the UNAIDS 90:90:90 Targets for HIV and AIDS, Global Strategy for Women’s, Children’s and Adolescents’ Health (2016-2030), AU Agenda 2063 and AU catalytic framework, the Maputo Protocol (the Protocol to the African Charter on Human and People’s Rights on the Rights of Women in Africa) as well as the Global Accelerated Action for the Health of Adolescents.

### 1.2 The National Context

The 2010 population census puts Ghana’s population at 24,658,823 with a population growth rate of 2.5% per year. Males constitute 12,024,845 and females 12,633,978. Ghana’s population is undergoing lifestyle changes affecting its health and development agenda.

According to GDHS 2014, providing adequate reproductive health services remains a challenge with huge unmet needs , in spite of the strategic importance placed on family planning in national policies, strategies, and plans. Malaria is a major public health concern and a leading cause of poverty and low productivity: 32.5 % of outpatient treatments and 48.8 % of under-5 admissions in the country are linked to malaria (Ghana MDG Report 2015, NMCP Annual Report, 2009). Even though Ghana is experiencing a decrease in HIV prevalence in the general population, prevalence among key population sub groups such as female sex workers (FSWs) and men who have sex with men (MSM) has been noted to be high. There are still gaps in the overall social protection system along the life-long cycle and challenges in ensuring that all in need can access economic, educational, social and health services. (Ghana common country assessment, UN, 2016).

The country has a number of policies and strategies to guide its responds to identified health, education, economic and social protection challenges. Policies and strategies such as the National Gender Policy, the Child and Family Welfare Policy, the Ghana National Youth Policy, The National Health Promotion Policy, the Ghana’s Education Strategic Plan (2010-2020), the Ghana Disability Act, the Ghana Shared Growth and Development Agenda, the National Social Protection Strategy, the Adolescent Health Service Policy and Strategy, the Sexual and Reproductive Health Policy for Young People in Ghana, the National PMTCT Policy as well as the National HIV and AIDS Strategic Plan 2016-2020 are key to HFFG’s Operations.

# 2.0 The Organization HFFG

**2.1 Introduction**

HFFG was established in 2001 as a local, community based, non-governmental, not-for-profit organization to facilitate and improve the health, education and socio-economic status of women, children and young people through empowerment, rights based approaches, innovative and acceptable participatory strategies. Past and current funding sources for HFFG’s operations include Ghana AIDS Commission, IPAS Ghana, World Vision Ghana, Plan Ghana, UKaid, SIMAVI of the Netherlands, Palladium Group, Netherlands Forign Ministry, Global Fund, USAID, UNFPA, ILO, Gavi Alliance and UNICEF, among others.

Since its inception, HFFG has positively affected thousands of lives in over 3,800 communities (from all the ten regions of Ghana) through project interventions in areas such as maternal, neonatal and child health ; youth empowerment; HIV prevention, care and support; Tuberculosis case finding and referral, livelihood and water, sanitation and hygiene (WASH); food and nutrition; Malaria and as well as Ebola and Cholera prevention and girls education promotion.

HFFG’s work also aims at influencing decisions within political, economic, and social systems and institutions to ensure enabling environment for the implementation of programmes that target the vulnerable (women, children and young people as well as persons with disability).

HFFG currently has seven (7) regional and four (4) field offices including a head office in the Greater Accra Region. These offices are strategically positioned to coordinate interventions in all the 10 regions and districts of Ghana

3.0 THE STRATEGIC PLAN

## 3.1. Purpose

The strategic plan provides the operational framework for HFFG’s institutional and programme direction for the next five years (2018-2022). It identifies three (3) strategic programme areas and four (4) enabling strategies that needs to be pursued, monitored and achieved.

Overall, the plan seeks to ensure that program interventions are evidence-based and results oriented; gaps in the organisation’s structure and systems are addressed; staff capacity to effectively coordinate, manage and implement projects are increased; funding base to ensure institutional sustainability is diversified; robust online data management system to harmonize data for evidence based advocacy from all M&E activities is developed; knowledge management and culture of sharing and learning within HFFG and its stakeholders is strengthened; transparency and accountability in programme implementation and financial management is improved.

## 3.2. Approach

An all-inclusive and participatory approach as described below was employed to develop this strategic plan. It brought on board the inputs of HFFG Board members, beneficiaries, staff and key partners and stakeholders.

This approach included the review of relevant global and national documents such as the Sustainable Development Goals for 2030, the UNAIDS 90:90:90 Targets for HIV and AIDS, the Ghana Shared Growth and Development Policy, the Gender Policy, the Child health and Family Welfare Policy, the Adolescent Reproductive Health Policy, the National HIV and AIDS Strategic Plan 2016-2020, the National PMTCT Policy, Malaria, TB Policies, and the Disability Act.

In addition, HFFG’s annual and other program reports, as well as various reports that had come out of organisational assessments conducted by organisations such as JSI and PYXERA were considered.

These reviews were followed by an internal exercise where HFFG Board, Staff were taken through a retreat to critically examine the strengths and weaknesses of the organisation, focusing on where there have been the most results, strategies that have worked to deliver these results, what has not worked and what opportunities exist for the future.

Out of the aforementioned process, the following was agreed on;

4.0 OUR STRATEGIC DIRECTION FOR THE NEXT FIVE YEARS

On the basis of the analysis of the global and national situational context of the economic, social and health dimensions of sustainable development, the organizational achievements of HFFG, SWOT, and key findings of the IT and OCA assessments, three (3)thematic areas of focus and four (4) enabling/supporting strategies were established as being of highest priority to HFFG operations. These areas validated by staff and stakeholders, constitute HFFG’s strategic direction for the next five years. The enabling strategies will be focused on creating the organizational capability, excellence, partnerships, resources and visibility that are critical for impactful program interventions.

**4.1 Thematic Areas of Focus and Enabling Strategies**

The three thematic areas of focus are:

Primary Health Care

Governance and Institutional Effectiveness

Economic Empowerment and Sustainable Livelihoods

The four enabling/supporting strategies are:

Advocacy, social accountability and partnership support

Organisational Capacity Strengthening

Strategic Information Generation, Learning and Knowledge management

Resource Mobilisation and Institutional Sustainability

**4.2 Strategic Objectives for Focus areas and Enabling strategies**

Strategic objectives will address each focus thematic and enabling strategy area. HFFG will meet these strategic objectives by implementing appropriate programmes and projects. HFFG will align all its interventions to the Sustainable Development Goals and national policies. Gender responsiveness, youth development and all-inclusiveness will be cross-cutting priority areas for all the thematic areas. The following sessions list the strategic objectives under the various thematic focus and enabling strategy areas.

***ThematicFocus Areas:***

**4.2.1 Thematic *Focus Area 1: Primary Health Care***

For the next 5 years, HFFG will focus on providing Primary Health Care services at all levels and health promotion using community mobilization and innovative, participatory, Social and Behaviour Change strategies that are acceptable to communities and other beneficiaries. HFFG will continue to work in all Primary Health Care intervention areas especially safe motherhood and family planning, neonatal and Child Health, including promotion of immunization and nutrition for children under five and women in their fertility age group. Other areas of work will include HIV & Tuberculosis, Malaria, Adolescent Sexual & Reproductive Health, Water, sanitation and hygiene (WASH) promotion and education. HFFG will also focus on gender mainstreaming at all levels. In order to prevent duplication and ensure sustainability of programmes, HFFG will work closely in partnership with Ghana Health Service, District Assemblies, other government agencies and Non State Actors at all levels as well as with existing community structures.

The strategic objectives under this focus area are:

1. Provide strategic interventions in selected areas of health including HIV, SRHR, adolescent reproductive health and family planning
2. Contribute towards efforts to ensure access to quality and affordable public health services
3. Child Survival
4. Health Promotion and Primary health interventions using Health systems for positive health outcomes .

**4.2.3 *Thematic Focus Area 2: Community capacity strengthening:***

HFFG is committed to working with all communities and stakeholders to help build healthy, progressive and prosperous communities during the next five years. The organization will work with residents, community groups and other government agencies to improve the social wellbeing of the community within a social justice, equity and responsiveness framework making it a more inclusive place to live. HFFG is committed to strengthening  community structures and linkages and addressing the need for them to build resilience and cohesion, collectively building resources, stimulating sustainability and generating social capital within the community for building their future together. HFFG will therefore work with community leaders by building the capacity of the community members where they will feel safe, proud and equipped with adequate and accessible resources to demand accountability from duty bearers.

The strategic objectives under this focus area are:

1. Contribute to strengthening health systems and community linkages to achieve Universal Health Coverage
2. Enhance community capacity structures in SBCC strategies
3. Strengthen formal education at the basic level
4. Develop the capacity of community based organisations and identified community change agents
5. Strengthen linkages with public and private health systems

**4.2.4 *Thematic Focus Area 3: Economic Empowerment and Sustainable Livelihoods***

Women and young girls face unprecedented challenges to their livelihoods and identities. A key way for them to escape and stay out of poverty is to establish sustainable livelihoods for them. HFFG will continue to work to enhance economic opportunities for women and girls through development of knowledge and skills, as well as linking them to business development support services. These will include efforts towards improved confidence and self-esteem. HFFG will focus on working with women groups in their reproductive age, women and boys with disability, and women working in male dominated areas such as mining areas to provide opportunities for alternative livelihoods.

The strategic objectives under this focus area are:

1. Training and provision of micro-finance for women using the VSLA model
2. Improving access to land for women and young girls
3. Income generation skills training and start-up support for women and girls
4. Provision of business leadership and financial management trainings

***Enabling Strategy Areas:***

***4.2.5 Enabling strategy area 1: Advocacy, Social Accountability, monitoring and Partnership support***

There is opportunity for tracking the various regional and global development goals and targets as well as developing programme interventions in these areas within HFFG operational communities. Specifically, the Global level 2030 Agenda, the SDGs (goals 1, 3, 5 and 6), and Agenda 2063 of the Africa Union, ICPD, Maputo Plan of Action, Financing for Development etc. HFFG would engage on these issues at two levels – firstly, at the national/community level where HFFG would build capacity of community structures in social accountability and monitoring; advocate for the capacity of partners and constituents in-country to be built on the implications of these Agreements on everyday programming and activities as well as advocate for the development of appropriate programmes that respond to meet the required targets. Secondly, at the regional and international levels, HFFG would lead the advocacy efforts to ensure that African governments continue to provide the necessary favorable environments, regional and global policy frameworks from which CSO’s can draw programme responses. All these opportunities will be harnessed by HFFG to ensure effective programme implementation and to develop new programme interventions.

The strategic objectives under this enabling strategy area are:

1. Support the development and implementation of a national advocacy framework/agenda that seeks to promote key regional and global development (SDG) goals and targets.
2. Establish effective partnership mechanisms with government institutions to lobby and advocate for policy change, enforcements and budgetary allocations
3. Develop partnership with CSOs and community structures in the effective implementation of programmes
4. Strengthen Partnership and Collaboration with government agencies, research institutions, Academia, CSOs and the communities to respond adequately to Child Health, HIV, TB, Malaria, Ebola, Zika and other public health issues

***4.2.6 Enabling strategy area 2: Governance and Organizational capacity strengthening***

HFFG Board of Directors will be trained to support resource mobilization, advocacy and implementation of this strategic plan. The Board of Directors will also operationalize board level committees system to support specific operational areas of HFFG. In addition, HFFG’s Policies and guidelines will also be periodically reviewed based on the strategic information generated every 2 years. HFFG will strengthen its coordinating framework to ensure that programme interventions are timely, effective and efficient. Staff shall have clear targets for which they are accountable.

New technologies will be harnessed to create more efficient and effective work processes e.g. focusing on social and digital media as a useful tool for communication, social accountability monitoring and advocacy. A system for monitoring and assessing performance shall also be put in place to ensure compliance to policy directives.

The strategic objectives under this enabling strategy area are:

1. Strengthen the governance system – Board and management
2. Strengthen the capacity of staff at all levels especially staff who are coordinating, managing and implementing projects
3. Strengthen internal structures and work processes including management system and Human Resources Management
4. Establish a Business Continuity and Succession Planning

***4.2.7 Enabling strategy area 3: Resource mobilization for institutional and program sustainability.***

HFFG currently gets support from external donors and a few local donors, however there is over- reliance on donor funding (especially external). In view of the threats of global economic downturn; competition of current world financial resources, wars and unstable governments; dwindling global support for social work and, changing global policies; as well as possible competitions from other local NGOs, HFFG needs to start looking for alternative sources of funding. HFFG ought to move to a point where it will be able to generate funds internally to start projects. These will include formalizing resource mobilization and fund raising activities, establishing a health training institution to train health assistants, provide technical and capacity building support services to CSO’s and increasing the visibility of the organization.

The strategic objectives under this enabling strategy area are:

1. Engage in active Resource Mobilization and fund raising
2. Establish HFFG Health educational institution to train health care givers and pre- nursing trainings
3. Establish HFFG training and capacity building department to provide training and Technical Support services to other CSOs and institutions
4. Increase the organization’s visibility through communication, branding and marketing

***4.2.7 Enabling strategy area 4: Strategic Information (SI), Learning and Knowledge Management (KM)***

Strategic information will be collected through the research, monitoring and evaluation (R, M&E) system and structures at all the levels. These structures that provide information for making informed decisions will be strengthened. HFFG intends to use platforms like annual strategy meeting with partners and donors, monthly management meetings and quarterly technical meetings with all programme staff to provide strategic information, guidance and direction to programme planning and implementation.

The strategic objectives under this enabling strategy area are:

1. Strengthen staff capacity in Social Accountability, Research, Monitoring & Evaluation and Knowledge Sharing
2. Enhance Learning, knowledge management and best practice documentation of HFFG interventions
3. Generate strategic information for evidence based decision making
4. Implement the recommendations by the team from the Global Health Corporate Champion Programme (GHCCP) on the structure and processes pertaining to the data management system within HFFG
5. Strengthen stakeholder and beneficiaries engagement and media relations

# **5.0. EXPECTED RESULTS**

The expected outcomes to be achieved following the implementation of this strategic plan will include:

* Improved health care delivery of essential public health services in communities
* Increased proportion of women and girls empowered on issues relating to their health
* Increased government resources allocation to Health
* Increased proportion of women and girls empowered on issues relating to land rights
* Increased proportion of women and girls with improved health seeking behaviours
* Improved economic empowerment of women and girls in communities
* Improved capacity of community leaders to advocate on key issues relating to their communities
* Improved organizational capacity for project implementation, social accountability, monitoring and evaluation
* Improved financial resources of HFFG
* Increase number of strategic alliances established with research institutions and Academia to undertake research to inform policy and advocacy.

6.0 STRATEGY IMPLEMENTATION, MONITORING AND EVALUATION

**Annual Operational/Implementation Plans**

Annual Operational/Implementation Plans will be developed by HFFG staff and management indicating the scale and extent of work to be undertaken each year. These plans will be guided by the strategic objectives and the activities listed under each of the objectives. Lessons learned during the first year of implementation will be used to enhance the plan for the subsequent year. This will be in addition to best practices and current emerging issues at the global, regional and national levels for the years in question. As much as possible the operational/implementation plans will specify:

1. Thematic Areas
2. Strategic objective for each thematic area
3. Activities to be implemented
4. Expected Outputs to be produced
5. Responsible people/partner/unit etc. to implement activities
6. Timeline for each of the activities
7. Cost of each activity

**6.1 Social Accountability, Monitoring Evaluation and Learning**

A monitoring mechanism will be put in place by the management of HFFG to assess progress of implementation to ensure that projected results are attained. The monitoring system which would include a detailed M&E plan with process and output indicators will track progress of outputs from interventions carried out and activities undertaken to enable corrective actions and measures to be put in place where necessary, for the attainment of expected results. HFFG would also conduct regular field monitoring and support at all levels of programming on either monthly, bi-monthly and quarterly basis to track progress and improve availability and quality of programme data.

A mid-term review will be undertaken in 2020 to determine the extent to which earmarked activities have been implemented and progress made towards the achievement of intervention activities. HFFG would conduct periodic reviews of its programmes with partners, communities and individuals to capture progress, satisfaction, relevance and efficiency as well as effectiveness. HFFG would also document best practices and significant change stories as well as both intended and unintended results for learning and dissemination.

A final evaluation will be conducted at the end of the five-year period (2022) to assess the efficiency, effectiveness as well as the outcomes of implemented interventions. Lessons learned through the evaluations will provide input for fine-tuning activities and to guide the design of subsequent strategic plans.

1. World Economic and Social Survey 2013 [↑](#footnote-ref-1)
2. Countdown to 2015. Fulfilling the health agenda for women and children. The 2014 report. Geneva and New York: WHO and UNICEF, 2014. [↑](#footnote-ref-2)
3. Millennium Development Goals Report 2015. New York: United Nations, 2015. [↑](#footnote-ref-3)
4. Global Strategy for Women’s, Children’s and Adolescents’ Health (2016-2030) [↑](#footnote-ref-4)
5. Baral S et al. (2012). Burden of HIV among female sex workers in low-income and middle-income countries: a systematic review and meta-analysis [↑](#footnote-ref-5)