



Strategic Framework

2005-2009

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I. INTRODUCTION

CCNAPC is a non-profit, peer-based organisation committed to improving the quality of National AIDS Programmes and National AIDS Commissions/Committees through supporting member's efforts to reduce the spread and mitigate the impact of HIV/AIDS in the Caribbean region. CCNAPC's mission is to empower its membership to work toward a strong country and territory response to HIV/AIDS in the Caribbean region by reinforcing their leadership and programme management capacity primarily through peer collaboration. They were incorporated in 2003 under the 1995 Companies Act of Trinidad & Tobago.

CCNAPC's strategic framework is a five-year plan built upon four strategic priorities:

- **ADVOCACY AND POLICY**
- **TECHNICAL ASSISTANCE AND CAPACITY BUILDING**
- **NETWORKING AND ALLIANCE BUILDING**
- **ORGANISATIONAL DEVELOPMENT**

These strategic priorities will guide CCNAPC to respond to the HIV/AIDS epidemic in the Caribbean over the next five years. Through advocacy and policy work, technical assistance and capacity building activities, networking and alliance building and its own organisational development, CCNAPC will work toward its vision of a sustained and well coordinated, multi-sectoral HIV/AIDS response in all countries and territories of the Caribbean, ultimately contributing to the global mitigation of HIV/AIDS.

II. EXECUTIVE SUMMARY

CCNAPC is an organisation of National AIDS Coordinators which envisions a sustained, well-coordinated, multi-sectoral HIV/AIDS response in all countries and territories of the Caribbean, contributing to the global mitigation of HIV/AIDS. Its mission is to empower CCNAPC members to build strong national, territorial and regional responses to HIV/AIDS in the Caribbean by reinforcing member leadership and building programme management capacity primarily through peer collaboration.

CCNAPC's strategic framework is built around the strategic priorities of **ADVOCACY AND POLICY, TECHNICAL ASSISTANCE AND CAPACITY BUILDING, NETWORKING AND ALLIANCE BUILDING, AND ORGANISATIONAL DEVELOPMENT.**

The framework was developed through a formal strategic planning process which included internal and external stakeholder input through interview and planning meetings. The following must be in place for CCNAPC to successfully achieve the strategic framework outlined herein: CCNAPC will need to mobilise resources for the organisation, continue intentional organisational development, build strong coalitions with country level, regional and international organisations, develop and maintain strong

member communication and effectively market the work of CCNAPC. CCNAPC works in a region challenged by HIV-related stigma and discrimination, the magnitude and scale of the HIV epidemic; the lack of regional coordination and the limited access to treatment and services for PLWHA.

National AIDS Coordinators are challenged by the lack of political support to implement a multi-sectoral AIDS response, human and financial resources to manage change in the epidemic and response to the epidemic, as well as their own technical and resource management capacities. National AIDS Coordinators must include hard-to-reach populations in programme planning and policy decisions and these professionals work in regions where there are no generally accepted standards and qualifications for National AIDS Coordinators.

The framework will be reviewed on an annual basis when the organisation is developing their yearly budget and annual operating plan. This will guarantee that CCNAPC will adjust for their organisational success toward accomplishments of the framework and the relevance of targets appropriate given the changing environment. An annual review will also take into consideration emerging issues which impact CCNAPC's strategic priorities and allow CCNAPC to make adjustments to the framework and targets.

III. CCNAPC MEMBERSHIP

Membership is extended to the person designated by the country or territory as the individual who is actively engaged in directing their country or territory's HIV/AIDS response. Due to the differing governance structures of the region's HIV/AIDS responses, active members include national AIDS coordinators, managers and directors. These positions may be located in, *but not limited to*, the National AIDS Programme of the Ministry of Health or the National AIDS Commission/Committee in the Office of the Prime Minister/President. At the Strategic Planning Meeting in January 2005, it was decided to collectively call these individuals: **National AIDS Coordinators**.

CCNAPC has thirty-five member states and territories, spanning the English, Spanish, French, and Dutch Caribbean. The members of CCNAPC are from the following Caribbean countries and territories: Anguilla, Antigua & Barbuda, Aruba, the Bahamas, Barbados, Belize, Bermuda, the British Virgin Islands, Cayman Islands, Cuba, Dominica, the Dominican Republic, French Guiana, French St. Martin, Grenada, Guadeloupe, Guyana, Haiti, Jamaica, Martinique, Montserrat, Netherlands Antilles (Bonaire, Curaçao, Saba, St. Eustatius, and St. Maarten), Puerto Rico, St. Kitts & Nevis, St. Lucia, St. Vincent & the Grenadines, Suriname, Trinidad & Tobago, Turks & Caicos, and the U.S. Virgin Islands.

IV. ORGANISATIONAL DESCRIPTION

CCNAPC is a non-profit, peer-based organisation committed to improving the quality of National AIDS Programmes and National AIDS Commissions/Committees through

supporting member's efforts to reduce the spread and mitigate the impact of HIV/AIDS in the Caribbean region. CCNAPC seeks to empower National AIDS Coordinators by reinforcing leadership and programme management capacity through peer collaboration. CCNAPC was incorporated in 2003 under the 1995 Companies Act of Trinidad & Tobago. Since 2003, CCNAPC has provided technical training and information assistance to all of its member countries and territories and their corresponding national AIDS coordinators, managers, and directors.

CCNAPC is governed by an Executive Board, which is elected by the general membership for a 2-year term. It consists of two members-at-large and seven representatives; one from each of the following sub-regional groupings: Overseas Dutch Territories, French Speaking Countries and Territories, Spanish Speaking Countries and Territories, Central and South American Countries and Territories, Overseas English Speaking Territories, Eastern Caribbean Countries, and The Greater Antilles. The Executive Board leadership is provided by the Chairperson, Vice Chairperson, Secretary, and Treasurer.

Day-to-day operations are conducted by the Secretariat. The Secretariat office is located in Port of Spain, Trinidad and employs the Chief Operations Officer with supporting administrative and programme staff. The Executive Board and Secretariat management meet on a regular basis for the purpose of operational and financial decision making. Annual work plans are reviewed and approved by the Executive Board.

V. CRITICAL SUCCESS FACTORS

The following must be in place for CCNAPC to successfully implement the strategic framework outlined herein: CCNAPC will need to mobilise resources for the organisation, continue intentional organisational development, build strong coalitions with country level, regional and international organisations, develop and maintain strong member communication, participation, and effectively market the work of CCNAPC.

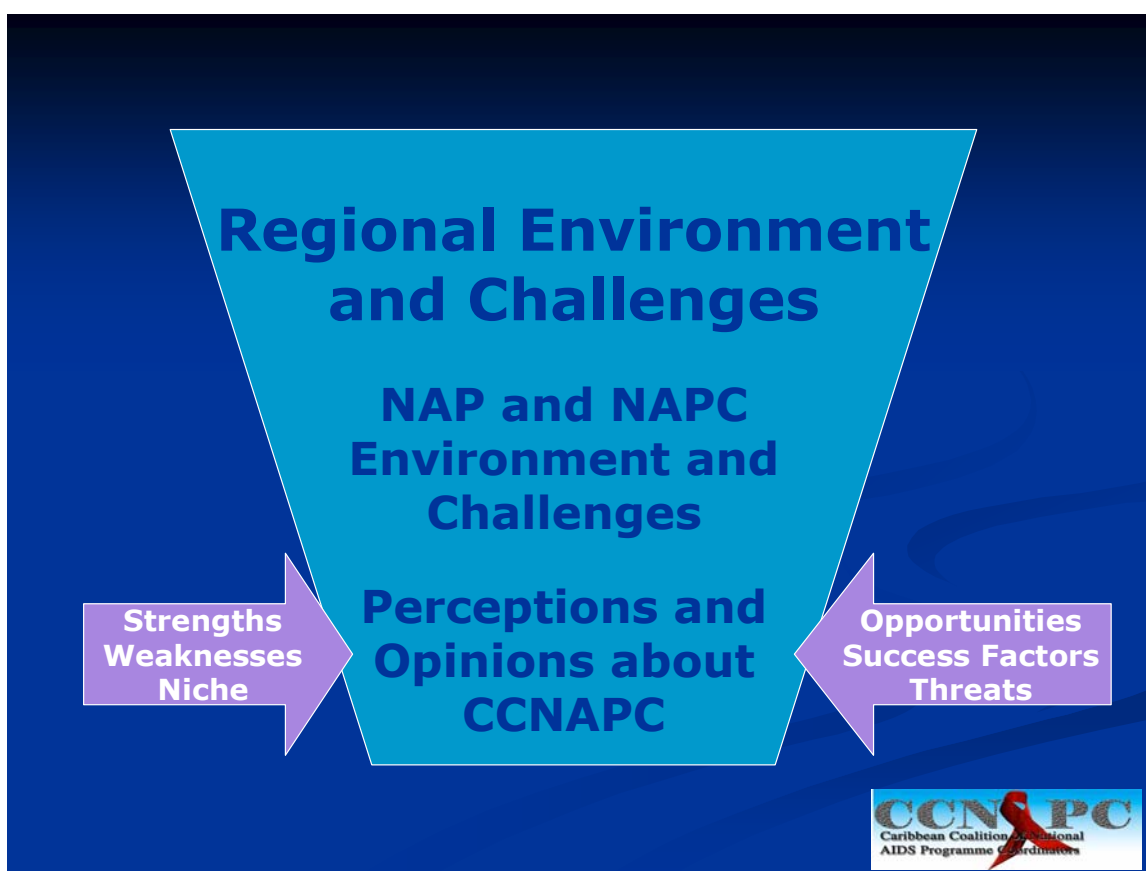
VI. ENVIRONMENTAL SCAN

Over the last three years, CCNAPC has been involved in several processes designed to review the environment in which it operates. During the most recent planning session, environmental scan data informed member discussions about CCNAPC's **Strengths and Weaknesses** as well as **Opportunities** for and **Threats** to the organisation (SWOT). The SWOT informed the development of the CCNAPC strategic priorities upon which the strategic plan framework is built.

The environmental scan for this formal strategic planning process included the following:

- Previous CCNAPC organisational input provided by national AIDS coordinators in CCNAPC member countries through needs assessments conducted in 2003 and 2004.¹
- Sub-regional member discussions on critical topics occurring during the Annual General Meetings in 2003 and 2004²;
- Interviews with CCNAPC members and external stakeholders in December 2004 and January 2005
- Two day strategic planning meeting with members in January 2005

Figure 1: Environmental Scan



The environmental scan yielded the following:

¹ National Alliance of State and Territorial AIDS Directors (2003). *United in Diversity for the Fight Against AIDS: Findings from the CCNAPC Assessment*. Report to CCNAPC, June. NASTAD: Washington, D.C.

² National Alliance of State and Territorial AIDS Directors (2003 and 2004). Reports from National AIDS Programme Coordinator Sub-regional Group Meetings from the Annual General Meetings of 2003 and 2004. Report to CCNAPC. NASTAD: Washington, D.C.

Regional Challenges Shared by CCNAPC and other Regional Organisations focused on HIV:

- Severe HIV-related stigma and discrimination throughout the region;
- The magnitude and scale of the epidemic;
- Inadequate regional coordination; and
- Access to treatment and services for PLWHA.

Challenges for National AIDS Coordinators

- Political support to implement a multi-sectoral AIDS response, and political support related to the authority of national AIDS programmes;
- Human and financial resources to manage change in the epidemic and response to the epidemic;
- Technical capacity of National AIDS Coordinators, resource management and leadership transition;
- Reaching out and including hard-to-reach populations; and
- Lack of regionally accepted standards and qualifications for National AIDS Coordinators.

Several major themes came out of the environmental scan specific to CCNAPC's Current Identity:

- CCNAPC is National AIDS Programme focussed;
- CCNAPC is known for their Annual General Meeting;
- CCNAPC is known as a capacity-building organisation;
- CCNAPC is known for conducting technical exchanges;
- CCNAPC provides support to the National AIDS Programmes and National AIDS Programme Coordinators;
- That CCNAPC is seen as an organisation that is inclusive of the entire Caribbean region;
- CCNAPC is country-focussed and provides support at country level;
- National AIDS Programme Coordinator coordinating role;
- CCNAPC is seen as a bridge between regional and national level interests; and,
- CCNAPC is seen as having an advocacy role in the region.

VII. PARTNERS

CCNAPC works in partnership with several stakeholders in the Caribbean to accomplish its mission and to achieve its wider vision of “a *sustained, well-coordinated, multi-*

sectoral HIV/AIDS response in all countries and territories of the Caribbean, contributing to the global mitigation of HIV/AIDS.”

CCNAPC’s internal partners include representatives from its thirty-five member states and territories; these members consist of national AIDS coordinators, managers, and directors who direct their country and/or territory’s response to HIV/AIDS.

Individuals and organisations throughout the Caribbean region that have an interest in National AIDS Programmes and National AIDS Commissions/Committees are CCNAPC’s external partners; for example, organisations or persons at country or the regional level involved in or responsible for a multi-sectoral response to HIV/AIDS.

Through strategic partnerships CCNAPC is able to provide peer-to-peer technical assistance across a myriad of areas to assure those National AIDS Coordinators and their staff are equipped with public health leadership and programme management skills to mitigate HIV at national and sub-regional levels. As of February 2001, CCNAPC was recognised as a full partner in PANCAP, which has been endorsed by various Caribbean heads of state and recognised as a “best practice” by UNAIDS.

VIII. VISION

CCNAPC envisions a sustained, well-coordinated, multi-sectoral HIV/AIDS response in all countries and territories of the Caribbean, contributing to the global mitigation of HIV/AIDS.

IX. MISSION

To empower CCNAPC members to build strong national, territorial and regional responses to HIV/AIDS in the Caribbean by reinforcing member leadership and building programme management capacity primarily through peer collaboration.

X. STRATEGIC PRIORITIES

Strategic Priorities: Broad, overall priorities or directions adopted by an organisation. Strategic priorities answer the question: *What is the focus of CCNAPC?*

STRATEGIC PRIORITY 1: *ADVOCACY AND POLICY*

STRATEGIC PRIORITY 2: *TECHNICAL ASSISTANCE AND CAPACITY BUILDING*

STRATEGIC PRIORITY 3: *NETWORKING AND ALLIANCE BUILDING*

STRATEGIC PRIORITY 4: *ORGANISATIONAL DEVELOPMENT*

XI. GOALS

Goals: General results CCNAPC is seeking over the period of the framework. They answer the question: *What results are CCNAPC seeking in this five-year period? (OR) What will it generally achieve?*

STRATEGIC PRIORITY 1: *ADVOCACY AND POLICY*

GOAL 1.1 Create an enabling environment for the implementation of appropriate policies to effectively mitigate the impact of HIV/AIDS in member countries and territories.

GOAL 1.2: Advocate for increased recognition of the role of NACs nationally, regionally and internationally.

GOAL 1.3: Advocate for an enabling environment for the implementation of appropriate programmes for reducing stigma and discrimination within countries and territories in the region.

STRATEGIC PRIORITY 2: *TECHNICAL ASSISTANCE AND CAPACITY BUILDING*

GOAL 2.1: Strengthen capacity of members to provide effective leadership in HIV/AIDS programme management.

GOAL 2.2: Strengthen technical assistance programme with a focus on peer exchange.

STRATEGIC PRIORITY 3: *NETWORKING AND ALLIANCE BUILDING*

GOAL 3.1: Facilitate networking among National AIDS Coordinators to contribute to a harmonised regional response.

GOAL 3.2: Build alliances with regional and international organisations that serve the resource and technical assistance needs of member countries and territories.

STRATEGIC PRIORITY 4: *ORGANISATIONAL DEVELOPMENT*

GOAL 4.1: Strengthen capacity of CCNAPC to respond to member needs.

GOAL 4.2: Ensure financial sustainability of CCNAPC.

GOAL 4.3: Ensure efficient governance for CCNAPC.

XII. OBJECTIVES

Objectives: Specific quantifiable, time-phased targets that measure the accomplishment of a goal over a specific time period. Objectives answer the question: *How will CCNAPC achieve its goals?*

STRATEGIC PRIORITY 1: <i>ADVOCACY AND POLICY</i>		
GOAL 1.1: Create an enabling environment for the implementation of appropriate policies to effectively mitigate the impact of HIV/AIDS in member countries and territories.	GOAL 1.2: Advocate for increased recognition of the role of NACs nationally, regionally and internationally.	GOAL 1.3: Advocate for an enabling environment for the implementation of appropriate programmes for reducing stigma and discrimination within member countries and territories.
OBJECTIVE 1.1.1: Increase the knowledge of CCNAPC members on existing policies and programmes relevant to HIV/AIDS by 2008.	OBJECTIVE 1.2.1: Define the role of National AIDS Coordinators as part of the Caribbean national expanded response to HIV/AIDS by 2006.	OBJECTIVE 1.3.1: Complete a periodic review of CCNAPC member activity to address stigma and discrimination and develop policy recommendations.
OBJECTIVE 1.1.2: Increase the ability of CCNAPC members to develop HIV policies relevant to their countries and territories national responses by 2009.	OBJECTIVE 1.2.2: Increase annually the stakeholder knowledge of NACs' roles and responsibilities (2007 baseline).	OBJECTIVE 1.3.2: Establish specialised systems in selected regional countries and territories to receive and respond to human rights violations to PLWHAs by 2009.
OBJECTIVE 1.1.3: Increase participation of CCNAPC members in policy and programme development efforts of their countries'/territories' national responses by 2009.		

STRATEGIC PRIORITY 2: TECHNICAL ASSISTANCE AND CAPACITY BUILDING	
GOAL 2.1: Strengthen capacity of members to provide effective leadership in HIV/AIDS programme management.	GOAL 2.2: Strengthen technical assistance programme with a focus on peer exchange.
OBJECTIVE 2.1.1: Define core competencies for HIV/AIDS programme management by 2006.	OBJECTIVE 2.2.1: Develop appropriate technical assistance databases by 2006.
OBJECTIVE 2.1.2: Develop appropriate plan for member training in programme management by 2006 and update annually.	OBJECTIVE 2.2.2: Formalise the TA programme by 2005 and strengthen the programme annually using 2005 as the baseline year.
OBJECTIVE 2.1.3: Implement plan in member countries and territories by 2009.	OBJECTIVE 2.2.3: Annually monitor and report the need for technical assistance by members and their programmes.
	OBJECTIVE 2.2.4: Annually monitor the TA program.
	OBJECTIVE 2.2.5: Biennially evaluate the TA program based on selected indicators (first evaluation in 2007).
STRATEGIC PRIORITY 3: NETWORKING AND ALLIANCE BUILDING	
GOAL 3.1: Facilitate networking among National AIDS Coordinators to contribute to a harmonised regional HIV/AIDS response.	GOAL 3.2: Build alliances with regional and international organisations that serve the resource and technical assistance needs of member countries and territories.
OBJECTIVE 3.1.1: Assure timely communication with members by 2005.	OBJECTIVE 3.2.1: Increase to 70%, Board Member representation of CCNAPC at regional and international activities by 2007.
OBJECTIVE 3.1.2: Achieve communication in member preferred languages by 2007.	OBJECTIVE 3.2.2: Develop an inventory of international and regional donor organisations and their mandates, requirements, and opportunities by 2005.
OBJECTIVE 3.1.3: Develop a sustained network of National AIDS Coordinators that will contribute to a harmonised regional HIV/AIDS response by 2007.	OBJECTIVE 3.2.3: Advocate for a more equitable distribution of resources to National AIDS Programmes/Commissions based on an overview of country resource needs by 2007.

OBJECTIVE 3.1.4: Establish regular sub-regional communication through executive board members by 2007.		
OBJECTIVE 3.1.5: Ensure adequate resources for decentralised communication structure by 2008.		
STRATEGIC PRIORITY 4: ORGANISATIONAL DEVELOPMENT		
GOAL 4.1: Strengthen capacity of CCNAPC to respond to member needs.	GOAL 4.2: Ensure financial sustainability of CCNAPC.	GOAL 4.3: Ensure efficient governance for CCNAPC.
OBJECTIVE 4.1.1: Increase human resource and infrastructure capacity of the Secretariat to function more effectively by 2007.	OBJECTIVE 4.2.1: Secure multi-year funding for CCNAPC by 2007.	OBJECTIVE 4.3.1: Expand organisational governance documents by 2006.
OBJECTIVE 4.1.2: Increase visibility and recognition of CCNAPC nationally, regionally, and internationally by 2009.	OBJECTIVE 4.2.2: Expand sources of funding for CCNAPC by 2009.	OBJECTIVE 4.3.2: Increase organisational governance capacity of Executive Board and Secretariat by 2006.
OBJECTIVE 4.1.3: Increase to 75%, CCNAPC members actively participating on subcommittees and working groups by 2009.	OBJECTIVE 4.2.3: Annually demonstrate consistent compliance with donor financial management requirements.	OBJECTIVE 4.3.3: Monitor and evaluate Executive Board performance bi-annually commencing in mid-2007.

XIII. FRAMEWORK REVIEW CYCLE

CCNAPC will monitor the progress of the strategic framework annually and throughout the planning period. The review will address the following:

- Organisational accomplishment of framework;
- Relevance of framework targets appropriate given the changing environment;
- Emerging issues which impact CCNAPC's strategic priorities; and
- Adjustments to the framework and targets.

XIV. CONCLUSION

The 2005-2009 CCNAPC strategic framework will guide the work of CCNAPC as it seeks to accomplish its mission “*to empower its membership to work toward a strong country and territory response to HIV/AIDS in the Caribbean region by reinforcing their leadership and programme management capacity through peer collaboration.*”

The success of this framework will be determined by several “critical success factors,” which include:

- Resource mobilisation for CCNAPC as an organisation;
- Organisational development for CCNAPC;
- Coalition-Building with country level, regional and international organisations;
- Marketing of CCNAPC in the region; and
- Strong member communications

Over the next five year period, CCNPAC will continue to evolve as a regional HIV/AIDS organisation and work toward their vision of “a sustained, well-coordinated, multi-sectoral HIV/AIDS response in all countries and territories of the Caribbean, contributing to the global mitigation of HIV/AIDS.”

XV. GLOSSARY

The following terms are used throughout the strategic framework and were used during the plan’s development during the data gathering stages, the January 2005 strategic planning meeting, and in this companion review document:

ACTIVITIES: The specific actions required to produce services or products.

CRITICAL SUCCESS FACTORS: Major items, issues, or activities central to CCNAPC’s success in general or to the successful achievement of the strategic framework.

ENVIRONMENTAL SCAN: Method by which an organisation or other entity examines the environment around it in order to engage in organisational planning. Often, environmental scans involve a review of the organisation’s strengths, weaknesses, opportunities, and threats (SWOT).

EXTERNAL PARTNERS: Individuals and organisations throughout the Caribbean region that have an interest in National AIDS Programmes and National AIDS Commissions/Committees are CCNAPC’s external partners.

GOALS: Broad or general results CCNAPC is seeking over the period of the framework. Goals answer the question: *What results are CCNAPC seeking in this five-year period?* (OR) *What will it generally achieve?*

INTERNAL PARTNERS: CCNAPC’s internal partners include representatives from its thirty-five member states and territories; these members consist of national AIDS coordinators, managers, and directors who direct their country and/or territory’s response to HIV/AIDS.

KEY INFORMANT(S): Person(s) with background, knowledge, or special skills relevant to topics examined by the evaluation.

MISSION STATEMENT: A succinct statement of the organisation's purpose with focus on its particular contribution to the vision of the organisation.

NATIONAL AIDS COORDINATOR: The person designated by the country or territory as the individual who is actively engaged in directing their country or territory's HIV/AIDS response.

OBJECTIVES: Specific quantifiable, time-phased targets that measure the accomplishment of a goal over a specific time period. Objectives answer the question: *How will CCNAPC achieve its goals?*

STRATEGIC PLANNING: A process through which an organisation or business identifies its future direction; clarifies its purpose, mission, goals, and objectives; and determines the means and strategies to achieve its vision of the future.

STRATEGIC PRIORITY: Broad, overall priorities or directions adopted by an organisation. Strategic priorities answer the question: *What is the focus of CCNAPC?*

SWOT: strengths, weaknesses, opportunities, and threats

VISION STATEMENT: Identifies where the organisation intends to be in the future or where it should be to best meet the needs of stakeholders. Incorporates a shared understanding of the nature and purpose of the organisation and uses this understanding to move the organisation toward a greater purpose.