

Vision, Mission and Strategy 2019 – 2023

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Rabobank NL47RABO0123585163 Donations NL64RABO0104080000 Chamber of Commerce no. 41211943



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I. A vision based on integrated healthcare for people in fragile countries



HealthNet TPO is an NGO and global aid agency with roots in The Netherlands, that has been working on restoring and strengthening health care systems in areas disrupted by war or disaster since 1992. Our vision is a world in which people in fragile and conflict settings can actively contribute in rebuilding their own lives, health and wellbeing. Our mission is to facilitate and strengthen communities and help them to regain control and maintain their health and wellbeing. We are convinced that even the most vulnerable people have the inner strength

to (re) build a better future for themselves.

HealthNet TPO delivers a broad package of integrated health services, including mental health and psycho-social support, to populations in fragile countries. HealthNet TPO is a knowledge-driven organization. This means our activities are based on scientific research and we continuously improve the effectiveness of these activities. We also develop new methods to improve the health of people in distress, which are esteemed by colleague organizations.

We implement activities in our countries according to a public health approach combined with community activities to address the United Nations Sustainable Development Goals (SDG's) related to individuals, risk groups and the community. Our multiyear local programs that address the SDG's are funded by institutional donors in collaboration with local authorities.

Healthnet TPO adjusts its strategy for 2019 - 2023 to align it with developments in thinking about care in settings with low resources to address basic health and the need for regaining health. We furthermore align the strategy with the specific skills of the organization in this respect and its utilization, and the availability of funds from sponsors and donors. Finally, we will strengthen the own organization and the financial position and explore long-term cooperation or a merger with partners.

HealthNet TPO will continue to operate in the countries where it has a longstanding presence on the ground. HealthNet TPO will grow the country project portfolios in the coming five years. This means that acquisition efforts will remain mainly focused on these existing geographical locations. An expansion of activities to additional countries will be considered on a case-by-case basis.

In the fragile countries in which HealthNet TPO operates, the development-humanitarian-peace nexus is becoming increasingly important. A more integrated international response from governments, civil society, the private sector, and multilateral institutions and think tanks is seen. Therefore, for the period 2019 - 2023 HealthNet TPO will keep the focus on multi-annual longer-term integrated recovery and development programs, while at the same time engage in shorter projects, complementary to the main focus.



II. An evolving strategy for 2019 - 2023

A. Integrate mental health and psycho-social support into existing health systems



Building on its track record in mental health and psycho-social support activities, HealthNet TPO aims to strengthen these activities in new program opportunities. Given its operational presence in the countries on health system and community level, HealthNet TPO is in a strong position to combine mental health and psycho-social support activities effectively and integrate these into the already existing systems.

According to the World Health Organization (WHO), universal health coverage (UHC) means that all people and communities can use the promotive, preventive, curative, rehabilitative and palliative health services they need, of sufficient quality to be effective, while also ensuring that the use of these services does not expose the user to financial hardship. This definition of UHC does look at the equity of access to health services, quality of healthcare and financial risk to the community. Mental health and psycho-social support (MHPSS) is part of universal health coverage. "There is no health without mental health".

MHPSS is part of objective three of the Sustainable Development Goals (SDG) where two targets are directly related to mental health and substance abuse. Target 3.4 requests that countries by 2030, reduce by one third premature mortality from noncommunicable diseases through prevention and treatment and promote mental health and well-being. Target 3.5 requests that countries strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol. HealthNet TPO will adopt a strategy for an integrated health system approach, for ensuring access to quality mental health services at all levels.

In the forthcoming period, HealthNet TPO will continue to develop integrated programs and implement learnings from its research activities and use these for further acquisition efforts and proposal development. HealthNet TPO will continue to seek funding to expand its mental health and psychosocial research activities at head office level as well as at field locations.

Since 2011, Healthnet TPO participates as a member in the research consortia PRIME (2011 - 2019) and EMERALD (2012 - 2017). The objective of the 'Programme for Improving Mental Health Care' (PRIME) consortium was to generate world-class research evidence on the implementation and scaling up of treatment programmes for priority mental disorders in primary and maternal health care contexts in low resource settings. The objective of the 'Emerging Mental Health Systems in Low- and Middle-Income Countries' (EMERALD) consortium was to improve mental health outcomes by enhancing the health system performance.

The development of evidence based and practice-based procedures, implementation strategies, tools and the knowledge building over the years, will be used in the years 2019 - 2023 to implement mental health services in the basic health and essential health care facilities in our local projects.



HealthNet TPO considers provision of MHPSS not to be a stand-alone activity nor strategy. Therefore, our programmes address mental health as well as psycho-social problems in a combined approach. We integrate MHPSS into the community and health programmes in Afghanistan, South Sudan, Columbia and Burundi. As psycho-social problems frequently play a role in the onset of mental disorders, such as depression, anxiety disorders, alcohol and drug use disorder, a reduction of psycho-social problems and stressors is therefore a focus in all our programmes, to prevent the onset of mental health problems and disorders.

The sustainable upscaling of provision of mental health services by local public health centres is combined with participative community activities to accelerate and support both the individual and the community to identify and use individual and community social resources to improve the health and living circumstances. The developed participative community activities 'Resource Mapping and Mobilisation' (RMM), the G30/G50 approach and Community Oriented Socio Therapy were developed and implemented over the last years in Burundi and Columbia.

HealthNet TPO's research and development activities continue to build knowledge on how public health systems can best provide services on mental health and psycho-social problems, in collaboration with governments, local health authorities and local health providers. The success of our programmes contributes to the awareness on the necessity, but more important on the feasibility of integrating mental health treatments into primary health care.

HealthNet TPO strives to apply a comprehensive mental health program, in alignment with the World Health Organization's mental health global action plan. In accordance with HealthNet TPO's mission, we will acquire and carry out comprehensive, integrated and responsive mental health projects in community-based settings. Even under severe circumstances in fragile countries, persons with mental disorders should be able to access essential health and social services that enable them to achieve recovery and the highest attainable standard of health.

B. Utilize unique expertise and research and development skills



In the coming years, HealthNet TPO will identify additional and complementary projects where it can make a significant contribution to increase the health and wellbeing of the people it serves. Innovative program development will be pursued in the 2019 - 2023 period, to apply to products (i.e. training, education treatment, distribution) and processes (data collection, communication).

According to Dr Tedros Adhanom Ghebreyesus, Director-General of the World Health Organization, the world is accepting the concept of universal health coverage. Mental health must be an integral part of universal health coverage. Nobody should be denied access to mental health care because she or he is poor or lives in a remote place. Sigrid Kaag, the Dutch minister for Foreign Trade and Development Cooperation, tweeted (translated from Dutch): "In crisis situations, psycho-social assistance is just as important as food, water and shelter. Let us ensure that that becomes the norm internationally."



The 'Theory of Change' of our individual, group and community programs that address mental and psycho-social problems, refers to the mechanisms of sense of coherence to help and support people to manage challenges and (extreme) demands to protect their mental health or accelerate their recovery from mental health and psycho-social problems.

HealthNet TPO defines (mental) health as a continuum ranging between two extremes: health-ease (salutogenesis) and dis-ease (pathogenesis). The specific position of an individual on this continuum depends on the interplay between external influences (e.g. stressors, life challenges), the resources that protect the individual (individual, generalized resilience resources and community resources and mechanisms) and sense of coherence.

The literature describes sense of coherence as a key determinant in the maintenance of good health and the prevention of diseases: a strong sense of coherence is associated with a positive health outcome when confronted with (extreme) demands and stressors (Antonovsky 1979, 1990, Eriksson & Lindstrom 2006).

Recent research of HealthNet TPO in Burundi (sexual and reproductive health and rights project) and Bosnia (group intervention for victims of sexual and gender-based violence), focussed on the role of sense of coherence after the exposure to extreme life events and stressors. The research in Burundi and Bosnia confirmed that stressors and extreme demands are managed better by a strong sense of coherence and presence of resilience and support resources result in outcomes that refer to complete recovery.

These research findings have led to a 'paradigm shift' in our programmes that address mental health and psycho-social problems of both individuals and groups in the community. This paradigm shift involves combining the deficiency model (pathogenic disease risk factors) with the 'use of available resources' model. As a consequence of the additional focus, our new programmes will include addressing specific causes and stressors of mental health and psycho-social problems (e.g. the biomedical model: prevention, care and treatment activities) and activities that explore and incorporate capabilities, resources and community mechanisms to enhance a healthy outcome once confronted with demanding stressors and life changes or events.

The paradigm change to explore what keeps people healthy is particularly useful for a humanitarian context in which stressors are extreme, ongoing, unavoidable and often encountered consciously.

C. Create robust planning, monitoring, evaluation, accountability and learning capabilities



HealthNet TPO will reinforce and strengthen its planning, monitoring, evaluation, accountability and learning (PMEAL) capabilities. A PMEAL policy will be developed. Improved PMEAL facilitates HealthNet TPO to further improve its performance and achieve even more impactful results. We will better be able to improve the current and future management of outcomes and the impact of our programmes, and to assess the performance of projects by linking past, present and future actions.



The PMEAL processes will be managed internally, in addition to the assessment performed by the sponsors and donors who are financing the assessed projects and activities. If needed and feasible, the monitoring and evaluation will be performed by independent parties, to improve the credibility and objectivity of monitoring and evaluation reports. Monitoring and evaluation is embraced in the developing countries where the governments have created their own national M&E systems to assess the development projects, the resource management and the government activities or administration.

Monitoring is a continuous assessment that aims at providing all stakeholders with early detailed information on the progress or delay and quality of the ongoing assessed activities. Its purpose is to determine if the outputs, deliveries and schedules planned have been reached so that action can be taken to correct the deficiencies as quickly as possible. An evaluation is a systematic and objective examination concerning the relevance, effectiveness, efficiency and impact of activities in the light of specified objectives. The idea in evaluating projects is to isolate errors, not to repeat them, and to underline and promote the successful mechanisms for current and future projects. Learning is the process through which individuals' and HealthNet TPO's knowledge is gained and ultimately project quality is improved.

HealthNet TPO is concerned with monitoring the population's health status, the quality of healthrelated interventions, progress towards project outcomes, compliance with defined standards, assumptions and the context of project environments and the financial results of projects. In evaluating projects, HealthNet TPO periodically and systematically addresses the relevance, the quality, the efficiency, the impact and the sustainability of an activity or intervention in the context of a defined objective. It should provide independent, credible, reliable and valid information leading to recommendations for the decision-making process. It incorporates activity, project and programme evaluation but also strategic evaluations.

D. Activate the network of sponsors and donors



Sponsors and donors are the backbone of our organization. Their support enables HealthNet TPO to sustain its programs and projects. The development and aid environment is changing, which impacts HealthNet TPO's acquisition activities and program development and implementation in the years to come.

According to the Global humanitarian assistance report 2018, Official Development Assistance (ODA) is growing at a slower rate than before. A larger propor-

tion of ODA is being spent as humanitarian assistance. The traditional dominance of government donors is changing with a multitude of actors and new aid and development mechanisms and modalities being developed, from innovative financing and solidarity initiatives to public-private partnerships and pooled funds. For the strategic period 2019 – 2023, HealthNet TPO will emphasize donor diversification to lessen dependencies and risks.



The European Union and its Member States together are the largest donor of development aid in the world. In April 2019, the Development Assistance Committee (DAC) of The Organisation for Economic Co-operation and Development (OECD) showed that in 2018 almost 57% (EUR 74.4 billion) of all ODA came from the European Union and its Member States. Around 5% of this was contributed by the Netherlands, both via the EU budget and via the contribution to the European Development Fund (EDF), which is outside the EU budget. Within the 2019 - 2023 strategic period, HealthNet TPO aims to regain the Netherlands Framework Partnership Agreement status with ECHO and to also receive funding released under the EU Neighbourhood, Development and International Cooperation Instrument (NDICI) within the next multiannual financial framework (MFF) 2021 - 2027.

HealthNet TPO will improve its relationships with Dutch and EU embassies and diplomatic missions in the operating countries, as some bilateral programs fall under their remit. Furthermore, efforts are underway to build strategic partnerships with relevant Dutch and local NGOs to achieve funding under the new framework, which is being developed by the Netherlands Ministry of Foreign Affairs, the Power of Voices and the Sustainable Development Goal 5 funds (achieve gender equality and empower all women and girls).

Multilateral development banks play an increasingly important role in crisis financing. These banks do channel funds as humanitarian assistance, but also provide financing beyond humanitarian assistance to countries affected by and at risk of crisis. Many multilateral development banks have a growing range of instruments and mechanisms that can provide crisis financing for preparedness, response, recovery and reconstruction. HealthNet TPO will tap into these funding channels mainly disbursed via ministries in countries. For the period 2019 – 2023, HealthNet TPO will focus on fostering its relationship with relevant national ministries in the operating countries.

UN agencies often partner with international and local NGOs to implement humanitarian assistance and protection through country-based pooled funds which are established when a new emergency occurs or when an existing crisis deteriorates. They are managed by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), under the leadership of the Humanitarian Coordinator and in close consultation with the humanitarian community. HealthNet TPO will aim to tap into these funding opportunities.

'The Grand Bargain' represents a package of reforms to humanitarian funding, launched at the World Humanitarian Summit. Signed by thirty representatives of donors and aid agencies, The Grand Bargain includes 51 commitments to make emergency aid finance more efficient and effective. With minister Kaag as eminent person, the Netherlands will get increased attention in this field. HealthNet TPO will follow the process of The Grand Bargain closely and engage in relevant meetings in the Netherlands. HealthNet TPO will aim to become a signatory within the strategic framework.

HealthNet TPO will further strengthen the relationships with USA and UK diplomatic missions and aid agencies in the various operational countries and profile our organization in terms of track record and unique capabilities.

The role of the private sector in sustainable development is becoming more prominent with a number of highly influential and cash-rich private organizations and initiatives, such as the Bill and Melinda Gates Foundation. Development is also increasingly becoming part of the core business mix of corporations. HealthNet TPO will expand its engagement with companies, trusts and foundations.



HealthNet TPO will develop and roll out a detailed strategy with the aim of achieving a significant and systemic increase in income in years to come. HealthNet TPO monitors the development of new aid and development mechanisms and modalities, such as social impact bonds very closely and will engage actively.

E. Explore long-term collaboration or merger partners



HealthNet TPO will focus increasingly on building strategic alliances and partnerships. HealthNet TPO builds new partnerships which bring innovative solutions (i.e. digital solutions) to its programs.

Institutional donors increasingly seek partners that are able to implement largescale projects, covering multiple locations, sectors and areas of expertise. For HealthNet TPO this means that working with consortia remains of strategic im-

portance. Efforts are underway to build strategic partnerships with relevant Dutch and international NGOs that go beyond the new funding framework of the Dutch government.

The 'localisation' agenda is gaining momentum and it will impact the implementation of relief and recovery programs. HealthNet TPO has local presence in a number of fragile countries and thus is well positioned to strengthen capacity of local partners through joint programming and on the-job training. HealthNet TPO must effectively support health systems and build community resilience with the locally available resources. We will put a much greater strategic emphasis on establishing networks with relevant organizations such as TPO Uganda and TPO Nepal among others in order to match our collective ambition and organizational requirements. HealthNet TPO will continue collaboration with local authorities, international institutions and other local and international NGOs as well as Dutch embassies and other relevant stakeholders. Country teams will remain focused on building partnerships in the field and head office will do the same.

One of the most important yet the most neglected activity of HealthNet TPO's acquisitions effort is having personal meetings with donors and partners. Efforts are underway to change this practice and will also be scaled up in the coming years. HealthNet TPO will also increase its efforts to stay actively involved in relevant networks at the Dutch, international as well as country levels, i.e. Platform Humanitarian Action, UN cluster meetings, NGO platform meetings, Partos events and Inter-Agency Standing Committee (IASC). HealthNet TPO will make an inventory of relevant Networks and Platform and make strategic choices to participate and join.

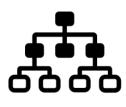
We will continue to explore closer collaborations, through a merger or otherwise, with other partner organizations, where such close collaboration is of mutual benefit to both parties.

HealthNet TPO offers value through its – partly unique – functional capabilities, including MHPSS and operational capabilities at the head office and in the countries, its considerable track-record of projects since 1992, over 250 publications of research papers, strong relationships with key institutional donors as World Bank, World Health Organization, Gavi – the Vaccine Alliance, Global Fund, USAID, UK's Department for International Development (DFID), the European Union, the Ministry of Foreign Affairs and others. We have exceptionally strong country teams in Afghanistan and South Sudan, with high-performing management.



We are interested in strong partnerships for the purpose of creating synergistic value, pooling common resources for more efficacy and efficiency, increasing our reach to the target population, and strengthening functional and operational capabilities for improved outcomes. We will engage with other aid organizations in and outside the Netherlands.

F. Strengthen the organization and financial position



The staffing of the head office in Amsterdam has been reduced to improve efficiency and effectiveness. The head office has been relocated to another office space in order to reduce the costs of it, without compromising the quality of the operational activities. HealthNet TPO focusses on decentralization of management capacity, strengthening of the country offices and improving the project, administrative and accounting systems.

The head office team will be strengthened once sufficient resources are available, for PMEAL and other initiatives mentioned before. In addition, the competences and capacity for policy development and support building PMEAL capabilities in the Netherlands and the other countries, will be enhanced. Furthermore, the capabilities in lobbying and representing HealthNet TPO in the mental health and psycho-social support community in the Netherlands and abroad, need to be improved to enhance acquisition of projects and obtain institutional donor funding. The number of staff at head office is therefore expected to increase by one full time equivalent as from January 1st, 2020.

The administrative support for the operational activities will be strengthened by the purchase and commissioning of new hardware and software for the (project) administration, which can be expended in all countries. This will greatly improve internal control and the quality and speed of the creation of information and reduce the workload of the accounting staff in Amsterdam. A better quality of the administration, internal control procedures, financial reporting and the balance sheet file, will lead to efficiency improvements for the external auditor and partially lower audit costs.

As a result of the cost reduction, the organization reached a turning point in mid-2019, whereby the results are slightly positive. This will ultimately improve the liquidity and solvency of the organization. Nevertheless, there will still be a relatively low equity capital for some time and the question is relevant whether the activities can be continued undisturbed without cooperation or a merger with a partner. For this reason, the organization continues to be looking for partners with which this cooperation can be given shape or with which a merger can be achieved.

HealthNet TPO strives to achieve a positive operating result on a structural basis, although the operating result may be negative due to incidental factors over short periods. As a result of the positive operating result, the reserves gradually increase in size to an acceptable level, which is in line with the size and the risks of the activities of HealthNet TPO. Liquidity must be structurally positive. Occasional liquidity shortages may no longer occur.



III. Achievement of objectives and measurement of performance

A. Integrate mental health and psycho-social support into existing health systems



- Define domain and its quality framework
- Develop mental health infrastructure for executing mental health programmes
- Design and execute integrated community based mental programmes

B. Utilize unique expertise and research and development skills



- Revitalize global TPO Research Network, including WHO UNHCR
- $\sqrt{}$ Develop and contribute to research agenda and setting priorities
- $\sqrt{}$ Develop and contribute to research infrastructure at all levels

C. Create robust monitoring and evaluation capabilities



- Develop a PMEAL policy
- Set up and implement PMEAL processes
- Realise, perform, evaluate and improve PMEAL processes

D. Activate the network of sponsors and donors



- Obtain additional funding
- Become a signatory to The Grand Bargain
- Improve relationships with embassies and multilateral development banks

E. Explore long-term collaboration or merger partners



- Realise strategic partnerships
- Establish networks with (amongst others) TPO Uganda, TPO Nepal
- Explore and discuss collaboration or merger

F. Strengthen the organization and financial position



- Align staffing and capabilities with organizational needs and available resources Implement new IT systems before mid 2020
- Realise and maintain structurally positive operating result and liquidity



IV. Forecasts and budgets

Amounts in 1,000 euro	Forecast 2019		Budget 2020		Budget 2021		Budget 2022		Budget 2023	
Projects										
Turnover Internal cost	16,811		20,500		21,000		20,500		20,800	
coverage	880	5.2%	1,050	5.1%	1,100	5.2%	1,075	5.2%	1,080	5.2%
Project turno- ver	17,691		21,550		22,100		21,575		21,880	
Project costs Backstopping	16,060		20,525		21,030		20,525		20,828	
covered	933		180		180		180		180	
Other costs	79	-	51		52		51		52	
Project costs	17,072	-101.5%	20,756	-101.3%	21,262	-101.3%	20,756	-101.3%	21,060	-101.3%
		-								
Result pro- jects	619		794		838		819		820	
Amsterdam office										
Revenues	2		0		0		0		0	
Staff costs Charged cov-	-781	-4.6%	-720	-3.5%	-744	-3.5%	-744	-3.6%	-744	-3.6%
ered costs	171	1.0%	180	0.9%	180	0.9%	180	0.9%	180	0.9%
Other costs	-184	-1.1%	-216	-1.1%	-222	-1.1%	-234	-1.1%	-234	-1.1%
	-792		-756		-786		-798		-798	
		-				-		-		
Result	-173		38	=	52	. =	21	=	22	