



NACOSA

COLLECTIVELY TURNING THE
TIDE ON HIV, AIDS AND TB

ANNUAL REPORT
2012



DIRECTIONS
10 YEARS OF
TURNING THE TIDE

WHO WE ARE

The Networking HIV&AIDS Community of South Africa (NACOSA) works to reduce the impact of HIV, AIDS and TB through capacity development, networking and strengthening systems to build healthy communities in South Africa.

Created as an outcome of a national conference in 1991 to lobby for and develop the first National AIDS Plan for South Africa, NACOSA is now a network of more than **1 200** HIV, AIDS, TB and other related role-players working in communities across South Africa.

NACOSA is a Principal Recipient of Round 9 funding from The Global Fund to Fight HIV, AIDS, TB and Malaria and manages grants to organisations, home-based carers and patient advocates countrywide. Through this, NACOSA is able to distribute and monitor funding to smaller community organisations that find it difficult to access and account for development aid.

NACOSA is represented on national, provincial and local structures and forums including the South African National AIDS Council

(SANAC), Provincial AIDS Councils and The Global Fund Management Committee in the Western Cape. NACOSA has been deeply involved in the consultative processes around a policy framework for community health workers and the role of home-based care. As an executive member of the Joint Primary Health Care Forum (JPHCF), NACOSA helps to oversee and advise on the effective implementation of the re-engineering of Primary Health Care policy in South Africa.

By working at multiple levels - from local communities right up to national government - NACOSA is able to facilitate an integrated response to HIV, AIDS and TB and promote better health outcomes in communities.

NACOSA is:

- A registered Non-Profit Organisation: NPO 017-145
- A Public Benefit Organisation: PBO 18/11/13/1602
- VAT registered, number: 484 024 0990
- Section 18A Tax Exempt
- A Level 2 B-BBEE organisation
- A signatory to The Independent Code

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"NACOSA takes forward the voices of the people on the ground."

- NACOSA network member

CHAIRPERSON'S REFLECTIONS



Dr Saadiq Kariem has selflessly served NACOSA as Chair since the organisation's inception a decade ago. He has seen NACOSA's vision roll out from provincial beginnings into a national outreach which, particularly in the year under review, is making significant headway to stem the tide of the HIV and AIDS epidemic in South Africa. In this interview with Communications Officer Amanda Luyenge, he reflects on the contribution of groups and individuals within NACOSA.

How do you rate NACOSA's performance in the previous year?

NACOSA's performance has been remarkable. Our member numbers have swelled and we have definitely strengthened the impact we make in society. NACOSA's footprint in the field of HIV and AIDS has become stronger as we continue to apply our three-tier model: Networking, Capacity Building and Promoting Dialogue. It's been a very productive year indeed, and much hard work has gone into managing The Global Fund, which has enabled us to extend the services that we offer. I must say that the Health and Welfare Sector Education and Training Authority (HWSETA) accreditation has been a highlight!

Looking forward, what is on the cards for the year ahead?

I have a number of desires for NACOSA in the coming year, but the foremost are to:

- Ensure NACOSA continues to meet the requirements of The Global Fund
- Leverage additional funding in order to facilitate further small grants to organisations
- Continue to expand our services generally
- Establish a NACOSA Community Training Institute in our own building.

What are the critical factors enabling NACOSA to continue its work?

Apart from continuing to ensure sustainable funding to keep providing our services, we need to attract and retain competent staff who will guarantee that NACOSA delivers on its mandate.

Tell us more about your role with the organisation.

I have been involved with NACOSA from the very beginning and it is extremely gratifying to have seen it grow from a previously Western Cape-focused organisation into national prominence. As Chairperson I plan on expanding our presence in all the provinces through providing best practice networking, capacity building and promoting dialogue.

Is there anyone in particular you feel deserves special recognition?

Firstly, my appreciation goes to the Executive Director and all her staff members for their absolute commitment and dedication. Thanks are also due to our funders for their invaluable contribution in the fight against HIV, AIDS and TB. We would like to honour them by ensuring that we are a credible and well run organisation. Furthermore, my gratitude goes to all our member organisations and individuals, and lastly my fellow board of directors for giving their time and energy towards realising NACOSA's mission. I have every confidence that we will go from strength to strength!

10 YEARS OF TURNING THE TIDE

EXECUTIVE DIRECTOR'S REFLECTIONS



NACOSA celebrates its 10th year! With a history rooted in the development of the first National AIDS Plan for South Africa, we have developed and put in place a three-tiered model of capacity building, networking and promoting dialogue to build a sustainable civil society response to HIV, AIDS and TB.

When I joined NACOSA in 2005, the organisation had 11 staff members and an operational budget of less than R3 million. This has grown to more than R18 million for the 2011/12 financial year – excluding the R56 million distributed to national and provincial organisations.

Recognition

We were mandated in 2007 to expand our scope of work beyond the Western Cape to other provinces – a strategy which was vindicated when an external evaluation showed the success of our model and the sector's appreciation.

In 2010 NACOSA became South Africa's first Global Fund Principal Recipient for Civil Society, managing a grant which has enabled almost 100 national and provincial organisations to deliver services to thousands of people living with HIV and AIDS. NACOSA strengthened its own systems to meet The Global

Fund's stringent requirements and we are proud to have been awarded an A-rating for our impeccable grant management.

This year, NACOSA received full accreditation as a training services provider from the Health and Welfare SETA, enabling us to offer a package of accredited training modules responding to national and provincial priorities. This is the first step in developing our flagship NACOSA Community Training Institute, which you can read more about on page 10.

Expansion

Our provincial programmes are also set to expand. In the Free State, the priority is to strengthen the civil society response to HIV, AIDS and TB and local health structures. In the Northern Cape, it is to train child and youth care workers supporting the Department of Social Development's orphans and vulnerable children (OVC) programme. In the Eastern Cape and KwaZulu-Natal we need additional funding for consultative meetings and health systems strengthening. NACOSA in the Western Cape will continue to grow its active systems strengthening programme.

Paying tribute

What originally attracted me to NACOSA is its resilience, vision and ethos. Although we have grown significantly, our focus remains unchanged: to collectively turn the tide on HIV, AIDS and TB and to build healthy communities in South Africa.

I thank all those who have helped shape NACOSA into what it is today – past and current staff, board members, donors, our networking partners, government and the dedicated professionals who have crossed our path. We have had many visionaries amongst our allies, but I would like to pay special tribute to the contributions made by the late Drs Ivan Toms and John Frankish.

The past decade has been both challenging and rewarding and I am confident that NACOSA is well positioned to play a vital role in supporting 'a long and healthy life for all South Africans' in years to come.

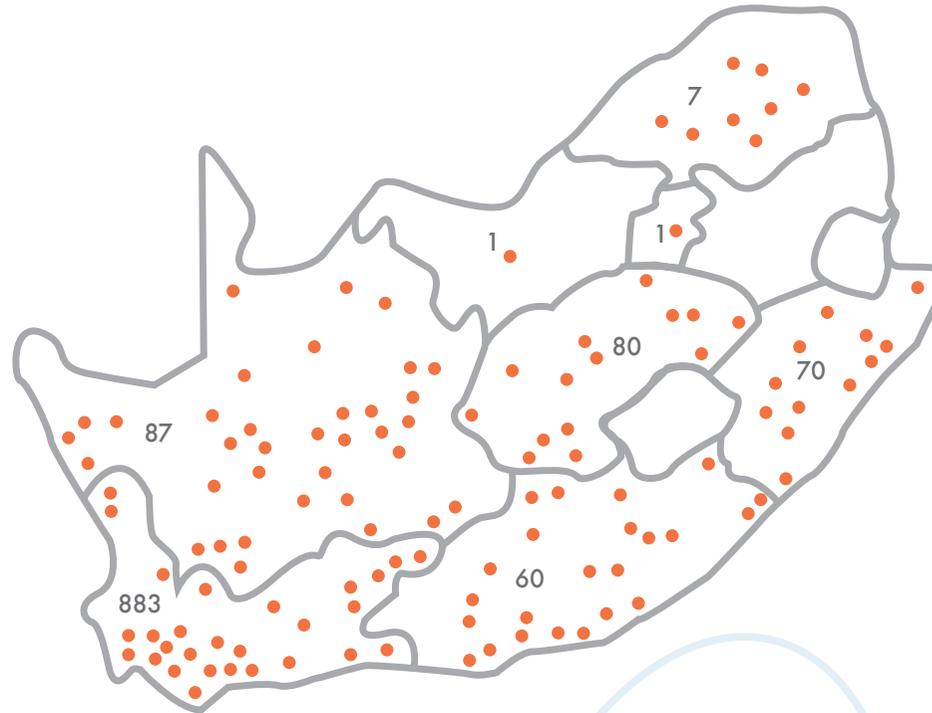
OUR NETWORK

"Thanks NACOSA for being there for us, when the vision was conceived we were limited with what we could do as an individual organisation and forgot the many benefits to be achieved as we network with you."

Solomon Mbong, Centre For Charity and Development Foundation

Alliance Against HIV/AIDS would like to thank you for the good work that you are doing and the difference it is making in the community and country at large. We appreciate that you devote your time and effort to help those who are less fortunate.

Mrs Mapheello Sebudi



"Thanks for being our Good Samaritan NACOSA, the support you are giving us in terms of capacity building, we really appreciate it."
We Care Ministries

"NACOSA took our organisation from Zero to Hero through the knowledge and finances they have given us."
Great Commission Divine Project, Mthatha

Eastern Cape (60 members)

Districts:
Cacadu 17
OR Tambo 12
Amatole 17
Nelson Mandela 10
King Sabata Dalindyebo 4

Western Cape (883)

Cape Town Metro 447
Cape Winelands 128
Eden 124
Central Karoo 34
Overberg 83
West Coast 72

Free State (80)

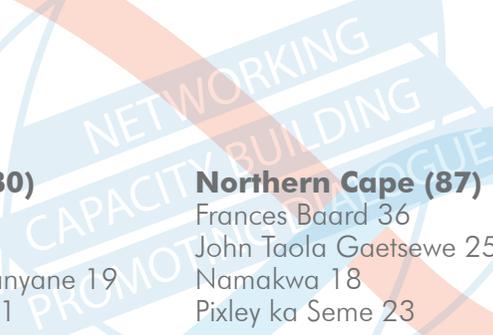
Xhariep 22
Motheo 38
Thabo Mofutsanyane 19
Lejweleputswa 1

Northern Cape (87)

Frances Baard 36
John Taola Gaetsewe 25
Namakwa 18
Pixley ka Seme 23

KwaZulu Natal (70)

Amajuba 10
Ethekwini 12
Umgungundlovu 25
Umzinyathi 13
Uthukela 10



PROVINCIAL DIRECTIONS

Western Cape

Fast paced, dynamic and results-orientated in a changing climate best describes NACOSA's achievements in the Western Cape. Through increasing the number of mentored organisations from 20 to 60, sub-granting to 10 organisations and training the leadership of community structures such as Multi-Sectoral Action Teams (MSATs), the programme has expanded in both numbers and focus.

- The trainings have reached 505 people across the province
- Consultations in 24 sub-districts and six health districts have inspired collaboration for better quality services to address gaps
- Dialogues with 1 161 people have helped shape the new NSP - the guiding document for work in the HIV, AIDS and TB sector from 2012-2016.

Monitoring and evaluation systems are in place and we feel especially rewarded when an organisation's service to the community becomes more effective and consistent, effectively intervening in peoples' lives. We are inspired by the dedication of care workers and others that work selflessly to make a difference. We value the relationships built with organisations, government officials, partner organisations and people in the field. We celebrate the achievements of each and every organisation we work with. We look forward to seeing them aligning their plans and activities to achieve national and provincial priorities and working collaboratively at a sub-district level to achieve common goals. We are excited at the prospect of continuing to contribute towards changing the national landscape for the better.



Menaka Jayakody, Western Cape Provincial Manager



Sydney Davis, Eastern Cape Provincial Manager

Eastern Cape

NACOSA's activities in the Eastern Cape have gained momentum over the past two years. Since 2008, the National Department of Health (NDoH)-funded Governance and Leadership programme was managed from Cape Town but implemented by two partner organisations in the province. In June 2010 NACOSA opened a provincial office in East London, providing a central base from which to operate. Apart from the NDoH programme, a capacity building and prevention programme funded by the Anglo American Chairman's Fund (AACF) was launched in the OR Tambo District. November 2010 saw the first group of provincial sub-recipients (PSRs) for The Global Fund joining the ranks, spreading NACOSA's influence further into the province.

Currently NACOSA provides funding, support and capacity building to 14 PSRs in The Global Fund programme and to eight CBOs funded by AACF. Through our community mobilisation and systems strengthening programme, direction and guidance is being provided to NGOs, CBOs and communities across the province in the fight against HIV, AIDS and TB.

- 13 PSRs employing 100 carers are providing psycho-social support to 3 000 OVC
- 1000 OVC receive 45 000 meals per quarter and by the beginning of the next school year 2100 OVC will have received material support
- Nine PSRs provide home based care by employing 75 carers, conducting 20 700 visits per quarter to 1725 clients.

We are anticipating a major expansion of our OVC programmes within the next year, as there are a multitude of CBOs clamouring for capacity building and support.

PROVINCIAL DIRECTIONS

Northern Cape and Free State

The office has seen a few staff changes over the past year; however, these changes did not impact on our service delivery. The emphasis has been to keep our eye on the ball regarding The Global Fund programmes as well as NDoH projects. Going forward, a major focus is key stakeholder relationship development.

Know Your Status events were held and support groups established across both provinces. Consultative forums have also been held as well as effective strategy training. NACOSA participated actively in World AIDS Day programmes in the Northern Cape and has been involved with the Provincial AIDS Council. In addition, the South African Business Coalition on HIV/AIDS (SABCOHA) Plan was handed over to the Northern Cape Premier and we were requested to do a presentation to all NDoH managers in the Northern Cape on NACOSA. A presentation was likewise made to Department of Social Development managers in the Free State and links established with key stakeholders.

Regarding outcomes, all NDoH targets have been achieved in both provinces and strong relationships fostered with PSRs, with continuous capacity building of the latter. Relationships are also being cultivated with government and civil society.

KwaZulu-Natal

This has been a year of sinking our roots a little deeper into the ground of the province, ensuring that NACOSA's name is synonymous with competence, reliability and practical support for partner organisations and other stakeholders. We acknowledge the hard work of our partners in The Global Fund Round 9 Programme that ensures that OVC as well as people living with HIV and AIDS (PLWHA) receive much needed support in a terrain where resources have become extremely scarce. NACOSA has enabled communities to receive skills, resources and guidance to run support groups while those who did not have access to testing had these services brought closer to them at ward level. This has contributed towards increased life expectancy for our communities in the Umgungundlovu and UThukela Districts. NACOSA staff also partnered with the municipal districts and the Department of Health to advance uptake and compliance with prevention of mother-to-child transmission (PMTCT).

The future holds much more work for NACOSA in this province. The need most often expressed is for funding for everyday physical needs of children and people living with HIV and AIDS. Members acknowledge that while as individual organisations they may not be structurally ready to attract the needed resources, they believe NACOSA can function as a conduit for cluster funding using its established reputation and experience. The sacrifices of the extremely professional and committed NACOSA team have not gone unnoticed in what has been a year of hard work that was also truly rewarding.

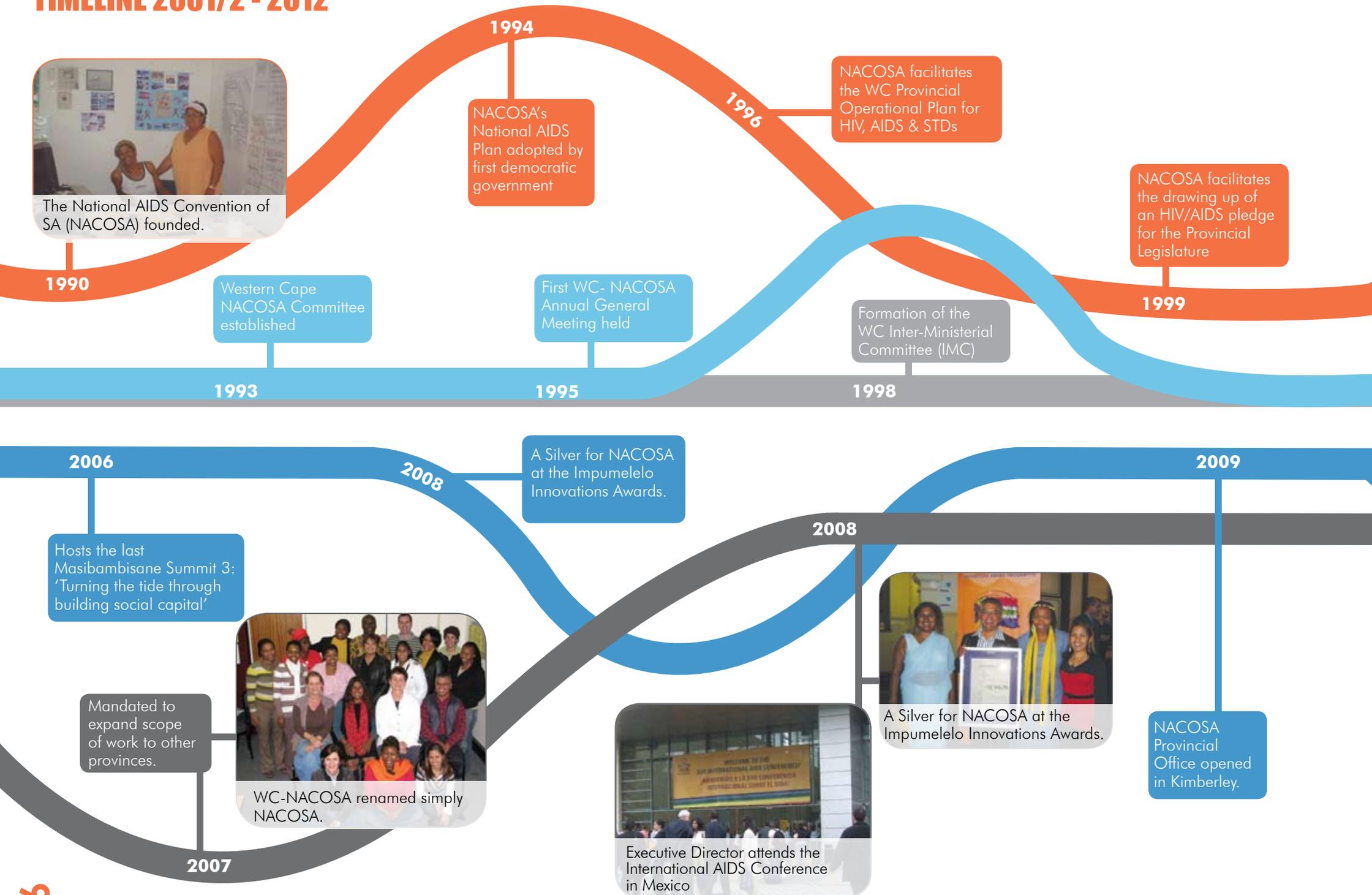


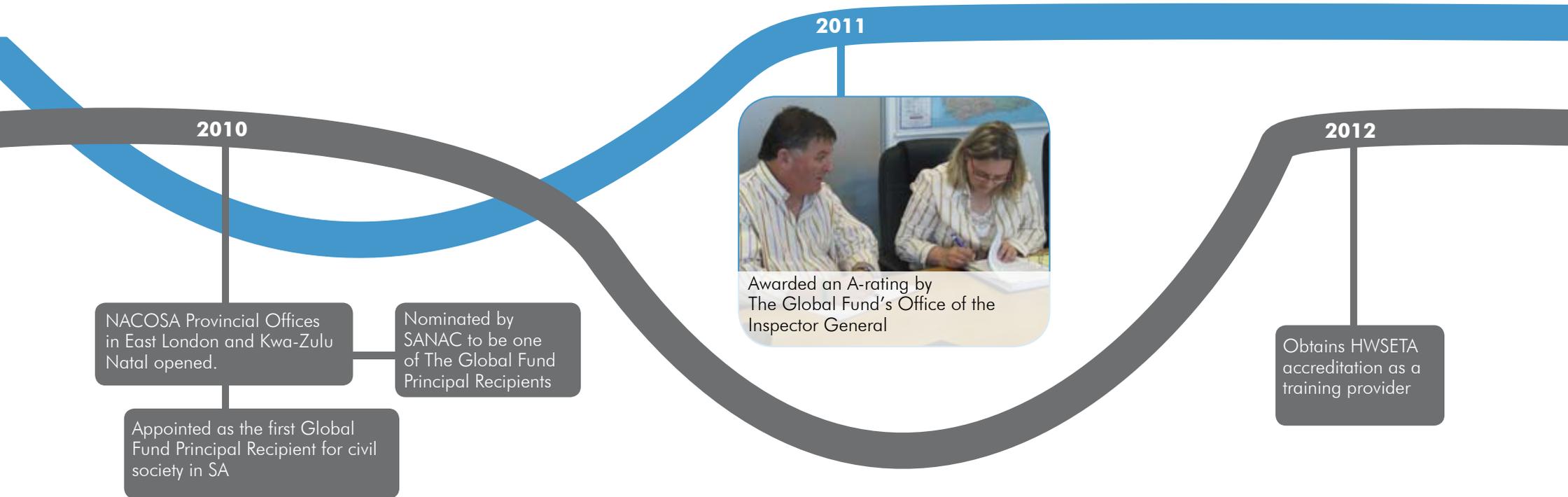
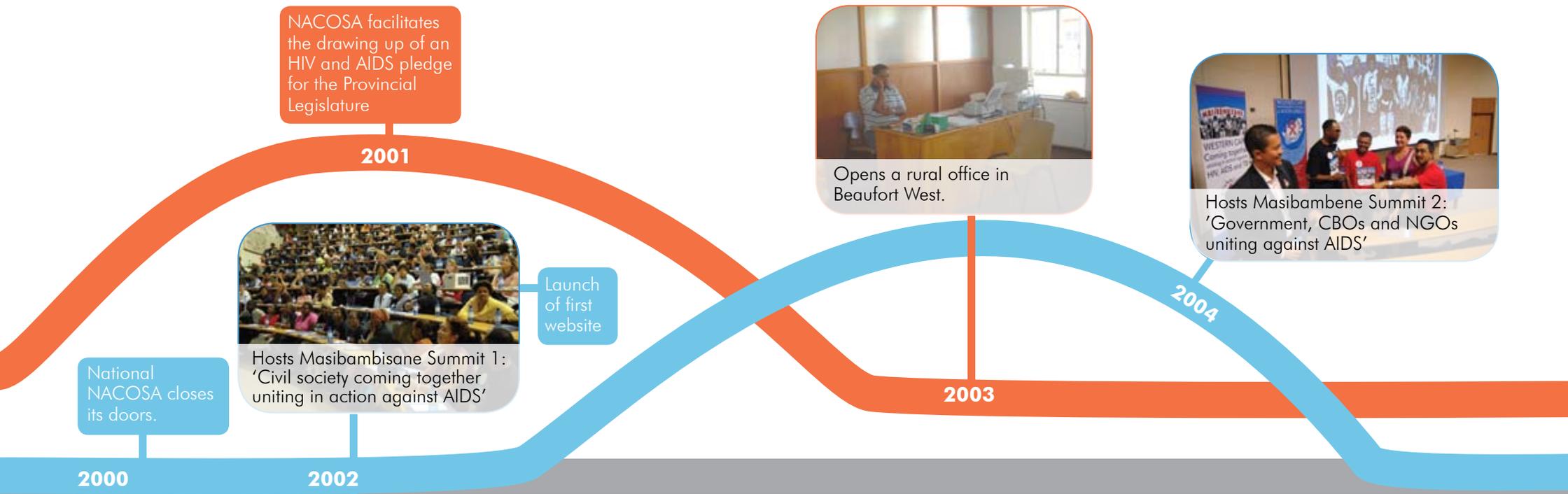
Hulene Hadje, Northern Cape & Free State Provincial Manager



Stellar Zulu, KwaZulu-Natal Provincial Manager

TIMELINE 2001/2 - 2012





THE GLOBAL FUND

GROUNDWORK FOR GETTING TO ZERO

In December 2009 South Africa received news of its successful Global Fund Round 9 country application and NACOSA was elated to be selected as a civil society Principal Recipient (PR) – a first in South Africa. This meant receiving and directly channelling money to many organisations in the HIV and AIDS sector. Programme Director Marieta de Vos reflects on the year under review.

Post budget negotiations and providing due diligence evidence, the contract was signed to commence on 1 August 2010. Eight months into the grant, South Africa's Country Co-ordinating Mechanism (CCM) approved a Single Stream Funding (SSF) model, requiring all PRs to operate on the same April-March fiscal cycle. Thus work done up until that date was concluded and audited and NACOSA was delighted to receive an A1 rating (exceeding expectations) for its grant management. A new contract was then signed with The Global Fund for the two-year period April 2011 to March 2013. The total grant budget is USD 20.3 million, monitored through a performance framework with 13 indicators determining progress.

During the first year of the new contract NACOSA funded six national and 75 provincial sub-recipients (SRs) for a variety of HIV Prevention, Care and Support and Community Systems Strengthening programmes and activities. NACOSA's grant is unique in its focus on most-at-risk populations (MARPS). Hundreds of ground level workers, such as Community Home-Based Carers (CHBC), Orphaned & Vulnerable Children (OVC) carers, patient advocates, peer educators and programme

counsellors, receive stipends to deliver their sorely needed services in communities - none of the progress made would have been possible without their dedication.

Much training and mentoring of organisational managers, carers and health workers took place during the past year. NACOSA offered training in essential grant management aspects as well as three-month skills programmes for both CHBC and OVC carers through accredited training providers. Many Peer Educators were trained by SRs and sub-sub-recipients (SSRs), as well as public health workers in programmatic issues.

In July 2011 The Global Fund's Office of the Inspector General (OIG) conducted a diagnostic review of NACOSA's grant management policies and systems. Overall we received good results and NACOSA immediately implemented the recommendations. At the end of March 2012 we were able to report full achievement on 10 of the 13 indicators, with two others achieving over 90%.

Preparing and implementing The Global Fund grant has been a huge learning curve for NACOSA, resulting in our policies, systems and processes being strengthened. It has been an honour to manage the grant and I thank all NACOSA staff for their support. My gratitude also goes to our SRs, SSRs and service providers for what they have done for real people, helping to save lives.

A separate annual report on The Global Fund grant with more detailed information is available on NACOSA's website.



Marieta de Vos, Global Fund Programme Director

"We have already managed to do so much with these children. One little girl is about to start ARVs; another little girl is back at school now that she has a school uniform and loves her pretty clothes; a young boy has a spring in his step and is smiling and playing again, thanks to his treatment taking effect."

**Sr Sara Warren,
Hillcrest AIDS Trust**

OTHER NACOSA PROGRAMMES

In addition to its flagship Global Fund programme, NACOSA runs a number of parallel programmes funded by national and provincial government and other funders. Collectively these programmes allow NACOSA to provide capacity development services to its members.

Community-Based Response

NACOSA's contribution to the Community-Based Response component of The Global Fund Round 3 Roll-On Continuation Grant (RCC R3) programme in the Western Cape grew out of our first Masibambisane Conference. NACOSA receives referrals from sub-district and district co-ordinators of community-based organisations (CBOs) in need of capacity development. We then identify their specific needs and develop organisational capacity as well as providing technical assistance and mentoring.

Issues arising from these organisations are brought to national and provincial decision-making structures and NACOSA lobbies government and service providers for increased civil society participation in provincial programme planning plus access to resources and assistance. We host consultative meetings and produce regular communications to enhance networking, information sharing and dialogue between civil society and government. We also facilitate sub-district meetings and capacity-building sessions for comprehensive planning, monitoring and evaluation of district and sub-district plans and processes.

Health Systems Strengthening

NACOSA has a long-standing partnership with the National Department of Health and developed the Health Systems Strengthening programme in consultation with several provincial departments. This enables community and primary

health care systems to expand their access to services, combat HIV, AIDS and TB, increase life expectancy and build healthy, informed communities.

NACOSA facilitates forums for the HIV, AIDS and TB sector for networking, capacity strengthening and mapping of services; these meetings are followed by training sessions. As well as providing regular communications on issues affecting the sector, we also represent civil society with local, provincial and national government. Through this programme, NACOSA facilitates the implementation of support groups for people living with AIDS and HIV (including children) and supports partner organisations to provide 'know your status' information sessions and stigma mitigation.

Cape Town Capacity Building

Many community organisations operating in the City of Cape Town have little experience or knowledge of the rigours of organisational development. Weak governance structures are often not able to support individual skills development. By offering a combination of training workshops and structured mentoring (with a governance focus), NACOSA helps small organisations to make major strides. Supporting structures and systems, such as Mutli-Sectoral Action Teams (MSATs), ensure sustainability within affected communities.

NACOSA's City of Cape Town Community-Based Response Capacity Building Programme provides short term cluster mentoring services, training and support to MSAT leaders and co-ordinators. This includes capacity building training workshops to organisations funded by the City health funding programme - as well as NGOs and CBOs not funded by the programme - to strengthen financial management and reporting, organisational governance, monitoring and evaluation as well as basic HIV awareness and education.



NACOSA'S COMMUNITY TRAINING INSTITUTE

By Sophie Hobbs, Commercial Strategy Consultant



Poverty, HIV and AIDS and unemployment are the three key economic challenges in contemporary South Africa. They are integrally linked and interdependent. We can never hope to turn the tide on HIV, AIDS and TB without addressing the social issues in marginalised communities. And this is where community organisations play such a vital role – these groups interact with affected communities, react quickly to community needs and issues and engage with affected and vulnerable groups.

An increasing number of community and non-governmental organisations fill service delivery gaps on the ground. The social care sector employs the second greatest number of people yet is under-served in terms of business services, capacity development and technical training; while the government's focus on primary healthcare, community social care and National Health Insurance (NHI) makes the need for capacity development and training more critical than ever.

Track record

With full SETA accreditation, a network of 1 200 civil society members and a 10-year track record in training and development, NACOSA is perfectly positioned to spearhead the development of an innovative centre of excellence – the Community Training Institute.

This Institute will support, service and train community workers, non-profit, community or faith-based organisations, government, international agencies, small business, volunteers and social entrepreneurs. It will be an accredited, affordable and 'green' training facility, generating an income which will support NACOSA's work in the field. The Institute will bring business, government and civil society together to build the organisational capacity of a sector that employs more people than mining and manufacturing.

Innovation

NACOSA's Community Training Institute will offer:

- **Accredited training and courses** in organisational development and community health and social development.
- A fully equipped and affordable **training, conferencing and events venue**.

- **Offices** for NACOSA's national head office and Western Cape region.
- **Excellent links** to public transport, as well as its own taxi service.
- **Quality budget accommodation** and **catering facilities**.
- A home for **research, dialogue** and **discourse** on community health and social development.
- An **outdoor amphitheatre** space for performances, entertainment and gatherings.

The Institute will be financed by a combination of grant funding, impact investment (loan) and by gifts in kind. As an inclusive, accredited, affordable and sustainable community training facility, we believe it will be one of the first of its kind.

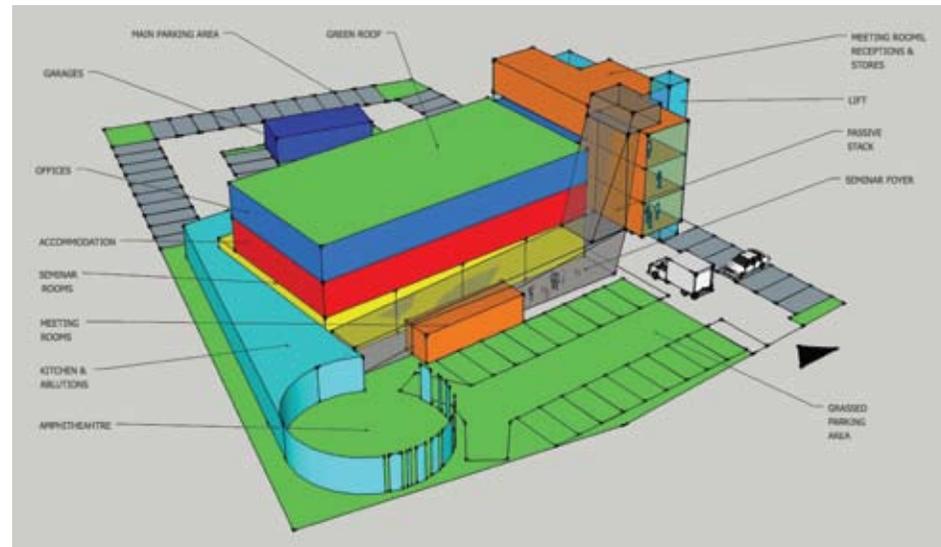
As a venue for training and conferences, the Institute will become the ethical choice for businesses and agencies, as well as offering B-BBEE points for procurement and enterprise development. It could become a beacon for sustainable tourism, providing overflow for the already very busy Cape Town Convention Centre as well as an alternative venue for social impact, national and international development, sustainability and 'voluntourism' events.

Impact

NACOSA is looking for investors to become partners in this high-impact project. We believe that the Community Training Institute will promote:

- Sustainability – environmental and financial
- Sector cohesion and capacity
- Job creation and small business development
- Healthy, productive communities

If you would like to explore investing in the Institute, please contact Business Development Officer Khanyisa Dunjwa on 021 552 0804 or email Khanyisa@nacosa.org.za



Bulk modelling graphics and sketches by James Finnie, Gapp Architects and Urban Designers

NETWORKING HIV/AIDS COMMUNITY OF SOUTH AFRICA

Financial Statements for the year ended 31 March 2012



Local income

Anglo American Chairman's Fund		
The City Health Directorate of the City of Cape Town		
Contract Training		
The D.G. Murray Trust		
The Department of Social Development		
Fundacion para Estudio e Investigacion de la Mujer (FEIM)		
Foundation for Professional Development (Pty) Ltd		
National Department of Health		
Provincial Department of Health - Western Cape		
Western Cape Education Department		
The South African Breweries		
Sundry Donations		

Foreign income

Gestos - Soropositividade, Comunicação e Gênero		
Rockefeller Brothers Fund		
The Global Fund to fight AIDS, Tuberculosis and Malaria		

Other income

Discount received		
Interest received		
Membership fees		
SDL refund		

Total income

Expenses

Net (deficit)/surplus for the year

Transfer to asset funding reserve

Net accumulated funds for the year

	2012 R	2011 R
Local income	4 485 028	6 081 245
Anglo American Chairman's Fund	429 548	256 551
The City Health Directorate of the City of Cape Town	112 642	221 757
Contract Training	125 996	68 911
The D.G. Murray Trust	-	254 000
The Department of Social Development	-	336 777
Fundacion para Estudio e Investigacion de la Mujer (FEIM)	16 216	-
Foundation for Professional Development (Pty) Ltd	-	480 000
National Department of Health	1 467 991	2 483 821
Provincial Department of Health - Western Cape	2 312 326	1 904 428
Western Cape Education Department	20 309	-
The South African Breweries	-	45 000
Sundry Donations	-	30 000
Foreign income	12 885 003	6 448 998
Gestos - Soropositividade, Comunicação e Gênero	220 298	40 801
Rockefeller Brothers Fund	-	102 934
The Global Fund to fight AIDS, Tuberculosis and Malaria	12 664 705	6 305 263
Other income	255 193	285 712
Discount received	-	297
Interest received	215 237	275 930
Membership fees	6 791	9 485
SDL refund	33 165	-
Total income	17 625 224	12 815 955
Expenses	-17 815 997	-11 452 688
Net (deficit)/surplus for the year	-190 773	1 363 267
Transfer to asset funding reserve	161 335	-1 168 700
Net accumulated funds for the year	-29 438	194 567

NETWORKING HIV/AIDS COMMUNITY OF SOUTH AFRICA

Financial Statements for the year ended 31 March 2012

	2012	2011
	R	R
Operating expenses		
Human resources	-2 204 677	-3 430 103
Consulting fees	-80 345	-128 370
Salaries and wages	-2 082 918	-3 218 293
Staff recruitment	-41 414	-83 440
Personnel development and wellness	-19 495	-40 906
Workplace skills plan	-19 495	-40 906
Planning and administration	-506 644	-294 138
Auditors remuneration	-283 500	-229 018
Bank charges	-52 069	-36 098
Loss on disposal of assets	-35 343	-
Legal fees	-11 320	-6 500
Marketing materials	-47 315	-
Printing and stationery	-77 097	-22 522
Overheads	-1 471 052	-981 856
Cleaning	-12 957	-4 653
Computer expenses	-41 650	-38 884
Courier and postage	-3 928	-7 902
Depreciation, amortisation and impairments	-272 847	-136 102
Insurance	-47 611	-36 158
Hire of equipment	-45 553	-37 163
Underprovision of audit fees	-6 000	-
Rent, security and utilities	-835 112	-526 001
Repairs and maintenance	-3 581	-13 582
Staff and board expenses	-30 354	-26 333
Subscriptions	-5 312	-10 099
Telephone, fax and internet costs	-166 147	-144 979
Communication materials	-194 053	-242 301
NACOSA newsletter	-194 053	-242 301
Governance	-80 354	-144 492
Annual general meeting	-50 350	-75 464
Board meetings	-4 228	-34 984
Management meetings (including internal)	-25 776	-34 044
Programmes		
Capacity building	-1 054 986	-1 079 273
HBC stipends	-	-80 750
Mentoring	-100 401	-286 341
Training	-954 585	-712 182
Networking	-536 324	-511 891
Consultative meetings	-412 200	-405 053
Sub-district meetings	-124 124	-106 838
Promoting dialogue between civil society & government	-148 711	-171 352
Travel, accomodation, conference fees	-148 711	-171 352
Global Fund R9 (per programme)	-11 599 701	-4 556 376
Care and Support for the Chronically Ill	-3 539 145	-392 394
Expanding the Care for Carers programme by Training	-80 683	-47 782
Health Systems Strengthening: Community Systems Strengthening	-2 435 131	-1 554 206
Implement Behaviour Change Interventions	-433 196	-961
Institutional Support and Programme Management	-2 195 611	-1 284 165
Monitoring and Evaluation	-1 128 218	-612 416
Provide HIV Testing and Counselling	-23 137	-349 945
Support for Orphans and Vulnerable Children	-1 764 580	-314 507
Total expenses for the period	-17 815 997	-11 452 688

THANK YOU TO ...

- **The Global Fund** for their partnership and affording us the privilege of reaching our goals.
- **The National Department of Health** for funding our networking, leadership and governance programmes in the Northern Cape, Eastern Cape and Free State as well as co-funding the NACOSA Informer.
- **The City of Cape Town** for their partnership where we mentor and train CBOs in the Eastern Metro and contribute to the development of MSATs.
- **The Provincial Government of the Western Cape; The Department of Social Development and The Department of Health** for partnering us in training community caregivers in the Western Cape in support group development and facilitation skills.
- **Anglo American Chairman's Fund** for funding mentoring and training in the Eastern Cape, as well as for providing small grants to five CBOs.



PROUDLY SUPPORTED
BY ANGLO AMERICAN

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