



HEALTHNET  TPO



# HEALTHNET TPO

STRATEGIC PLAN 2024-2028:  
A REVIVED AMBITION



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## Executive summary

HealthNet TPO is an international non-governmental organisation (NGO) with roots in the Netherlands that has been working in fragile and conflict-affected countries since 1992. Since its founding, it has worked in over 45 countries. Today, it has an operational presence in Afghanistan (since 1993), in South Sudan (since 1995), in Burundi (since 2000) and in Colombia (since 2016).

Supported by a small team in Amsterdam, our country teams collaborate with local communities, non-governmental and governmental institutions, international actors and other key stakeholders, to increase the health and wellbeing of populations. The environments in which we operate are complex and dangerous.

The Strategic Plan 2024–2028 aims to drive the organisation towards increased sustainability, efficiency and impact. It is guided by five objectives, namely:

- **Objective 1:** Enhancing community resilience and equitable access to development and humanitarian assistance.
- **Objective 2:** Improving the organisational PMEAL and knowledge capacities;
- **Objective 3:** Increasing organisational visibility with general public, sponsors and donors;
- **Objective 4:** Increasing cooperation and partnerships;
- **Objective 5:** Strengthening and optimising organisational resources.

In the course of the next strategic period, HealthNet TPO intends to keep its presence in the countries where it currently operates with the possibility of engaging in additional countries if deemed appropriate.

Our mission, vision and core values remain unchanged and there will be great focus to further integrate the developed mental health and psychosocial support (MHPSS) methodologies into new programme opportunities across the development silos and the triple nexus.



## Background and key trends

HealthNet TPO is an international non-governmental organisation (NGO) with roots in the Netherlands that has been working in fragile and conflict-affected countries since 1992. Since its founding, it has worked in over 45 countries. Today, it has an operational presence in Afghanistan (since 1993), in South Sudan (since 1995), in Burundi (since 2000) and in Colombia (since 2016<sup>1</sup>). Supported by a small team in Amsterdam, our country teams collaborate with local communities, non-governmental and governmental institutions, international actors and other key stakeholders, to increase the health and wellbeing of populations. The environments in which we operate are complex and dangerous. Since the writing of the last organisational strategy (2019-2023) some major events occurred which profoundly affected the humanitarian and development actors as well as our operations and staff, such as:

In Afghanistan, the transition of the Taliban as the de facto authorities in August 2021 severely impacted the social and economic wellbeing the Afghan population and posed a significant challenge to our operations as well as the health and safety of our staff. International sanctions in reaction to the Taliban takeover meant a rapid decline in development assistance for healthcare, which contributed to the near collapse of Afghanistan's aid-dependent health sector. HealthNet TPO - as other international NGOs - must continuously balance the requirement for donors to maintain political distance to not legitimise the de facto authorities, while at the same time providing humanitarian assistance.

1. At the time of writing in August 2023, we are in the process of acquiring official registration status as an INGO in Colombia.







The COVID-19 pandemic has had far-reaching impacts on all aspects of society, exacerbating existing inequalities and hindering progress towards the Sustainable Development Goals (SDGs). The pandemic has further reiterated the need to work towards achieving strong and resilient health systems and universal health coverage.

The scale of humanitarian crises significantly escalated in recent years. In 2022 alone, the number of individuals requiring humanitarian assistance grew by a third, reaching an estimated 406.6 million people. Ukraine emerged as the largest recipient of humanitarian funding in 2022 – securing the highest volume of contributions ever recorded in one year (US\$4.4 billion).

Donors also spent more official development assistance (ODA) on hosting refugees within their own countries – this expenditure has more than doubled in 2022 to US\$30.1 billion.

Countries grappling with humanitarian crises increasingly require more than just immediate relief: they are also in need of receiving development, peace and climate financing – which is fundamental to upholding basic services and building resilience. Donors are increasingly faced with a complex set of choices in how and where to allocate budgets across an ever-growing spectrum of needs.

While forecasting the precise course of change over the next five years remains intricate, certain trends will serve as guiding factors for the next strategic period:

### **Localisation agenda**

The concept of localisation advocates for aid efforts to be locally led, enabling communities to be the drivers behind programmes and services that support their own needs. HealthNet TPO remains committed to the need for increased localisation and participation of affected communities within our programmes. Over the next years, we will explore pathways for increased localisation while acknowledging the continued disparities inherent in financial mechanisms.

### **Triple nexus**

The triple nexus refers to a comprehensive framework that intertwines humanitarian aid, development, and peace building efforts, recognising their interconnectedness in addressing crises. Within this strategic period, we will explore synergies and collaboration with various actors and sectors working along the triple nexus.

### **High profile-crisis effect**

The intensity of attention of high-profile crises can be a double-edged sword; spotlighting the pressing need for aid and drawing attention away from other ongoing challenges. This may lead to sudden changes in donor funding streams and changes in their priority settings. Such crises highlight the necessity and importance for organisations to remain agile, adaptable to effectively address the changing contours of crises and unpredictable dynamic landscape of

global assistance. The growing number of complex global challenges and protracted crises will put even more pressure on financing systems to effectively respond in the years to come. We anticipate that this evolving landscape will bring significant changes.

### **Climate crisis**

There remains an urgent need for comprehensive solutions that address the intertwined issues of climate, food, health, livelihoods, displacement and violence. This calls for inventive strategies and collaboration across sectors to foster resilience capable of enduring climate-induced emergencies and confront its multidimensional challenges, in particular for more vulnerable populations who are at heightened risk of enduring the most of these impacts.

HealthNet TPO's Strategic Plan 2024-2028 reflects our commitment to increase and maintain the health and wellbeing of people living in countries which have been affected by crisis, considering the changing landscape, volatile environment and key challenges and trends outlined above. The following document presents HealthNet TPO's strategic vision and sets out five substantive and organisational steps towards its realisation.



# Who we are

## Mission

HealthNet TPO's mission is to support and strengthen communities affected by conflict or disaster so they may regain control of their own health and wellbeing.

## Vision

HealthNet TPO's vision is a world in which people in fragile and conflict settings can actively contribute to rebuilding their own lives, health and wellbeing. We believe even the most vulnerable people have the inner strength to (re)build a better future for themselves and those around them.

## Core values

HealthNet TPO seeks to ensure that our values drive organisational culture and bring greater consistency in the way programmes and activities are implemented and the behaviour that is expected from our employees.

### People-centred

We treat each individual as a person with respect and dignity, regardless of ethnicity, gender, religion, age or any other distinctive feature. We give agency to people and support them to improve their own lives.

### Passionate

We are motivated and enthusiastic to achieve our mission. We have team-spirit and are able to express our common vision, share experiences and success.

### Integrity

We conduct our work in an honest, transparent and ethical manner. We are open and communicate in an accessible way to reach our stakeholders.

### Evidence-based

We have a scientific approach and our interventions are based on research. We always strive for the best, expand our horizons and act on new possibilities for improvements. We share our knowledge, are accurate, consistent and context-specific.

### Professional

We have the required expertise, able to express our limitations, show respect to our colleagues and external stakeholders, act according to the HealthNet TPO standards and procedures.

### Outspoken

We are assertive and express our opinion, authentic, and critique our ourselves and our colleagues in a constructive manner.





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# Our strategic objectives

In order to build a more resilient, adaptive and reputable organisation that will be able to deliver on its mission, the following overall principals, strategic objectives and deliverables have been formulated.

## Principals of working

Overall HealthNet TPO aims to:

- Develop an agile strategy which sets targets but does not prescribe ways to achieve them.
- Strengthen the quality of our programmes and interventions by collecting evidence, foster learning and drive decision-making.
- Increase organisational visibility and collaboration through direct meaningful partnerships, networks and platforms: form rapid new partnerships and project development capacity.
- Foster trustful working relationships and team spirit: Teams come together when and where needed through fewer formal structures and a flat hierarchy.



## **Strategic Objective 1: Enhancing community resilience and equitable access to development and humanitarian assistance**

### **Deliverable 1.1: Integrate MHPSS approach(es) into projects addressing the triple nexus.**

HealthNet TPO's longstanding experience in implementing MHPSS activities in fragile settings has shown that there is no one-size-fits-all solution and that it is highly driven by contextual factors. We consider MHPSS services not to be a standalone sector but rather aim to integrate MHPSS services into the broader community as well as in our health programmes.

In addition, our own experience has demonstrated over the last thirty years that addressing the underlying psychological and social factors that contribute to conflict are the corner stone in achieving sustainable peace and development. MHPSS, therefore, should be addressed across the different silos and beyond the health sectors as such.

Within the framework of this strategic period, we will maintain our focus on health systems, where our expertise in MHPSS and our recognition as an MHPSS-specialised organisation, will be used for further integration. In addition, we will seek collaboration with partners to integrate MHPSS into programmes outside its direct scope of expertise on health.

This means that in the coming five years, there will be great focus to further integrate the developed MHPSS methodologies, including the 'Resource Mapping and Mobilisation' (RMM), the G30/G50 approach and Community-Oriented Socio-Therapy into new programme opportunities across the development silos and the triple nexus. We aim to develop and define additional MHPSS packages (services, financial, human resource, data management and M&E system) which can be further integrated within multi-sectoral programming.



**People don't seek mental health services because they don't see it as a need. Mental health doesn't kill. Yet people lose their functionality."**

*Dr. Atong, Head of the Department of Mental Health at the Ministry of Health, South Sudan.*



### Deliverable 1.2: Extend programming into humanitarian settings

The demand for humanitarian assistance grew over the last years including in South Sudan and Afghanistan where HealthNet TPO has been operational for decades. While we will maintain our focus on development projects, we will also aim to extend our programming to humanitarian projects. In doing so, HealthNet TPO will become an efficient double-mandated organisation within the next five years.



**I want a healthy community, healthy mothers and healthy children. That's why I walk long distances, even at night, to give the necessary support."**

*Grace Modong, Boma Health Worker, South Sudan*

### Deliverable 1.3: Extend programming to at least one new country

HealthNet TPO has the ambition to continue operating in the countries where we have a longstanding presence. In addition, given our strong track record in effectively managing development programmes in complex emergencies, we will aim to extend our capabilities to new geographic areas.









## Strategic Objective 2: Improving the organisational PMEAL and knowledge capacities

### Deliverable 2.1: Develop and implement a PMEAL system

HealthNet TPO will reinforce and strengthen our planning, monitoring, evaluation, accountability and learning (PMEAL) capabilities. A PMEAL policy will be implemented, and a global organisational data strategy will be developed and implemented. In addition, M&E policy guidelines will be finalised. We will put emphasis on M&E to become a standard integral part of the project design, concentrating our efforts to integrate PMEAL into the entire project cycle, from planning through to completion. This will include embedding PMEAL activities within project budgets and making them an integral part of resource allocation. This will allow us to respond to changing circumstances, unforeseen challenges and evolving community needs more adequately.

Through regular monitoring and evaluation, we aim to increase our capacity to adjust our interventions and strategies in real-time, increasing our effectiveness. In order to be able to achieve this, we will put more emphasis on building adequate structures and capacity at relevant levels of the organisation in the coming five years. We will provide training and resources to build the capacity of staff at all levels for effective PMEAL implementation. We will develop standardised

policies, guidelines and tools for PMEAL implementation across the organisation. This promotes consistency, comparability, and the ability to aggregate data for broader insights.

### Deliverable 2.2: Develop and implement operational research and disseminate results

In the coming strategic period, more emphasis will be put on designing and implementing operational research. Subsequently, more focus will be put on the integration of an operational research component in the upcoming programmes. HealthNet TPO sees the RMM strategies as a starting point to operationalise the line of research. We will position ourselves to support training and improve capacities within the communities. It is also an opportunity to generate strategic alliances with universities and educational institutions to strengthen the skills and capacities of community health systems through the involvement of interns, the exchange of experiences and the connection of universities to community processes.

HealthNet TPO will increase our efforts in data visualisation, analysis and dissemination efforts. This will include the publication of at least one operational research article per year.



### **Strategic Objective 3 : Increasing organisational visibility with general public, sponsors and donors**

#### **Deliverable 3.1: Develop and implement a communication and an advocacy strategy**

HealthNet TPO will consolidate a communications strategy that brings together the global objectives for the organisation in relation to communications and how it can be used for purposes of advocacy (and fundraising). We will expand and develop standardised policies, guidelines and tools for communications and visibility across the organisation. In addition, we will provide training and resources to build capacity of staff for awareness on visibility needs. We will put more attention to actively integrate communications and visibility into the project cycle, ensuring that it is adequately planned from the start with appropriate budgets to cater for visibility needs within the country and internationally throughout the life of the project to completion.

#### **Deliverable 3.2: Increase emphasis on website maintenance and social media messaging**

HealthNet TPO has made great strides in the last five years to improve the organisation's online visibility, credibility and brand. We will continue to connect with audiences online to improve engagement, generate conversation and create successful calls to action including liking, sharing, subscribing to the newsletter and donating. To achieve this, steps will be taken throughout the organisation to strengthen and embed the processes required for visibility

and communications and improve the quality of content created.

HealthNet TPO aims to become thought-leading and will put more emphasis in the coming years on harnessing the expertise within the organisation to produce higher quality written articles, vlogs and documentaries for the organisation's website and social media on key topics including MHPSS in fragile settings, within the triple nexus. We will further use news-worthy press-releases, human interest stories and opinion pieces for national and international media. In addition, we will enhance our efforts in adopting a people-centred approach to storytelling that highlights to the general public, sponsors and donors, the impact of our work on individuals and communities in fragile settings, whilst providing ownership, agency and ensuring to do no harm to those able to tell their stories.

In addition, HealthNet TPO will strengthen marketing initiatives to ensure that the correct messaging reaches the right audience for the purposes of visibility, advocacy, and fundraising. The website should portray up to date photography, news and blogs, and keeps users flowing through the site and able to find the information they need easily and completing a call to action. As the social media landscape is constantly and rapidly changing, HealthNet TPO must stay up to date to ensure that it is reaching and connecting the right audience with the right messages about its programmes and advocacy.





### **Deliverable 3.3: Develop robust relationships with present and potential new donors**

In the coming years, HealthNet TPO will invest in establishing a local network within the Netherlands to support the organisation by giving time and donations. This is a long-term plan for the organisation. It will involve increasing the organisation's visibility and trust with a local audience. Connecting with local Afghan, South Sudanese, Burundian and Colombian diaspora in the Netherlands is a priority to raise the profile of the organisation for people with direct links to our work. Events, including networking events, photography/film evenings and fundraising events can be used to connect with interested new and existing supporters. Crucially, the connection with local universities must be established: to employ future student interns; to ensure there is capacity for this advancement and support fundraising needs; to engage with students of psychology, international development, research and other related subjects; and to establish relationships for the long-term. HealthNet TPO will use online fundraising campaigns and engage with in-person fundraising events for specific projects and themes to raise vital unrestricted funds for the organisation.

## Strategic Objective 4: Increasing cooperation and partnerships

### Deliverable 4.1: Extend cooperation with development, humanitarian and peacebuilding organisations (triple nexus)

Building partnerships and cooperative relationships with development, humanitarian and peacebuilding actors will become an important strategic approach in the coming five years. We will consider partnering with different counterparts – such as international organisations, private companies, foundations, academia, civil society organisations - to address the full array of complex issues within its mandate. However, preconditions for potential partnerships will be an alignment with our vision and mission and zero compromise to its own principles and objectives. In addition, the localisation agenda will require further attention in the coming years. As we have a strong local presence in complex environments, we are well positioned to strengthen capacity of local partners through joint programming, ToTs and on-the-job training. We will continue to put a great emphasis on collaboration with local authorities, international institutions, universities and educational institutions, local and international NGOs, embassies, and other relevant stakeholders. Country teams and the Amsterdam support office will remain focused to build partnerships. In addition, HealthNet TPO continues to have the ambition to incorporate innovative solutions to support and complement current programmes. While not aiming to develop its own capacity for innovation, it strives to build innovative partnerships which could bring solutions to our programmes, whether applied through products (i.e., training, education treatment, distribution) or processes (data collection or communication).



### Deliverable 4.2: Maintain affiliate network with TPO Uganda and TPO Nepal

Although an MoU has been signed, the implementation has lagged behind due to competing commitments. The intention of the MoU was to develop a framework for collaboration between HealthNet TPO, TPO Uganda and TPO Nepal in order to combine the strengths of the three organisations by developing a strategic partnership to increase our global impact and effectiveness. The organisations agreed to seek options for collaboration in domains of community health and public health that build on and allow for further development of mutual expertise. Attempts were made to raise funds; however, the financing was not successful. Within the next strategic period, we will put renewed emphasis on establishing an active network with TPO Uganda and TPO Nepal in order match our collective ambitions and organisational requirements.



## Strategic Objective 5: Strengthening and optimising organisational resources

### Deliverable 5.1: Develop and implement a (public and institutional) fundraising strategy

Donors and partners are the backbone of the organisation: without their support it will be difficult to sustain our programmes and projects. For the coming strategic period HealthNet TPO will put renewed emphasis on donor diversification as it seeks to avoid dependency. In order to achieve this, we will scale up our efforts in building alliances and partnerships across the triple nexus as well as seeking to intensify our programmes and innovation activities. We aim to harness the quality of our current programmes by growing country project portfolios across the triple nexus. Consequently, the next five years will witness intensified efforts to secure acquisitions for expanding operations into additional countries. In addition, the development of a fundraising strategy will explore what is possible with current capacity for public/private fundraising within the Netherlands and internationally. This will require a fundraising consultant to support in the process and significant investment if the organisation wants to see results in public/private fundraising in the long-term beyond this five-year strategy.

### Deliverable 5.2: Increase operational and technical support capacity and HR

In the coming years HealthNet TPO will create and increase technical support capacity for executing MHPSS programmes and interventions as well as operational support capacity in order to support every country with an operational counterpart in the head office. We will create an

efficient structure for operational support. This will require a review of the current head office structure in order to be more effective and efficient. In addition, most of HealthNet TPO's female colleagues in the field office occupy positions in care and administrative support. We will prioritise equal representation of women in all leadership positions, particularly given the tightening restrictions experienced by women worldwide. We will be actively promoting diversity and equal representation of women across various levels of the organisation.

Amidst the challenging and complex environments in which HealthNet TPO operates, the staff, caregivers and other professionals may overlook their own self-care needs while providing essential services to others. We will prioritise self-care, through the development and implementation of a staff wellbeing policy in order to ensure resilience and sustainability of our workforce and the interventions we deliver.



### **Deliverable 5.3: Initiate (IT) solutions for labour intensive processes**

Within the countries, staff work on standalone computers and there is no shared network or platform for the organisation. In some areas there is a “SharePoint” platform including head office and country office, however there is a need to create a platform for coordination and information sharing. There will be also a specific focus on digital storage of financial documents in high volume.



### **Deliverable 5.4: Improve financial procedures, internal controls and risk management**

HealthNet TPO has a constant responsibility to deliver the best value for the resources made available to the organisation. Providing full disclosure concerning the use of resources is key to the process of continued improvement and accountability in the organisation. To this extent, we will increase our efforts to improve IT solutions; upgrade and standardise the accounting procedures and administrative system; standardise processes and provide guidance and accounting support to the countries. We will continue to feed a culture of transparency and integrity and will further develop the effective implementation of its Safeguarding and Ethics Framework. To be less dependent on awarded projects and programmes in the limited number of countries in which we have an office, we will continue to explore long-term collaboration with partners.

### **Deliverable 5.5: Strengthen the financial position of the organisation**

A healthy financial position is a legitimate need of every organisation and especially for HealthNet TPO as we operate in extremely challenging and dangerous situations. Considering the very volatile environments in which we operate, requiring a solid financial position, we aim to increase the financial reserves in the coming years. In addition, financing the ambitions for the coming five years requires sustainable growth and a certain level of flexibility in funding. Therefore, HealthNet TPO aims to build up its own constituency. This will in due time result in growth of private funding. The growth of unlabelled private funding will enable the organisation to increase its financial reserves.





## Forecasts and budgets 2024-2028

Amounts in 1,000 EUR	Budget 2024		Budget 2025		Budget 2026		Budget 2027		Budget 2028	
<b>Projects</b>										
Turnover	30,000		31,000		32,000		33,000		34,000	
Internal cost coverage	1,590	5.3%	1,642	5.3%	1,695	5.3%	1,750	5.3%	1,803	5.3%
<b>Project turnover</b>	<b>31,590</b>		<b>32,642</b>		<b>33,695</b>		<b>34,750</b>		<b>35,803</b>	
Project costs	-30,030		-31,031		-32,032		-33,033		-34,034	
Support costs covered	-100		-105		-110		-115		-120	
Other costs	-25		-20		-17		-15		-13	
<b>Project costs</b>	<b>-30,155</b>		<b>-31,156</b>		<b>-32,159</b>		<b>-33,163</b>		<b>-34,167</b>	
<b>Result projects</b>	<b>1,435</b>		<b>1,486</b>		<b>1,536</b>		<b>1,587</b>		<b>1,636</b>	
Revenues	15		25		35		45		50	
Staff costs	-1,085	-3.6%	-1,111	-3.6%	-1,102	-3.6%	-1,135	-3.6%	-1,163	-3.6%
Charged covered costs	100	0.3%	105	0.3%	110	0.3%	115	0.3%	120	0.3%
Other costs	-277	-0.9%	-282	-0.9%	-287	-0.9%	-292	-0.9%	-297	-0.9%
<b>Amsterdam office</b>	<b>-1,246</b>		<b>-1,263</b>		<b>-1,244</b>		<b>-1,267</b>		<b>-1,289</b>	
<b>Result</b>	<b>189</b>		<b>223</b>		<b>292</b>		<b>320</b>		<b>347</b>	

Risks		Mitigations
<b>Social and Environmental</b>	HealthNet TPO recognises the influence of cultural and gender norms on health behaviours and service acceptance. It also recognises the increase waste generated by health centres.	HealthNet TPO will adhere to comprehensive guidelines and protocols to ensure the safety, security and wellbeing of both the community and personnel while delivering essential services. Culturally sensitive, community-based communication will be implemented. In countries where HealthNet TPO delivers healthcare services, it will implement proper medical waste management plans following UNICEF and relevant national guidelines. Where appropriate, HealthNet TPO can/ will use the WHO WASH for health facility guidelines and train staff accordingly, covering hygiene, sanitation, safe water, and waste management. This will mitigate potential health risks, such as disease outbreaks, hazardous waste exposure and air pollution. HealthNet TPO will adhere to comprehensive guidelines and protocols to ensure the safety, security, and wellbeing of both the community and personnel while delivering essential healthcare services.
<b>Financial</b>	Several risks could compromise the financial capacity of HealthNet TPO. These include poor financial controls, limited financial reserves, income source dependency, unbudgeted losses, disallowed costs, inadequate insurance, failure to meet donor restrictions, fraud, exchange rate fluctuations, and changing taxation policies. Due to insecurity workforce challenges will remain in all country offices. Supply chain issues also remain a risk in countries where HealthNet TPO delivers health services and is responsible for the procurement of pharmaceutical and medical goods.	When project budgets are being developed they need to allow for contingencies and unexpected costs. The organisation will actively seek additional funding sources implement a robust monitoring and evaluation system to track budget utilization and detect potential financial risks early on. Each country office will have to strictly adhere to the organisation's financial, accounting, and procurement policies and procedures. Country offices will have to ensure compliance with country statutory laws, provide insurance coverage for all assets and staff, adhere to donor rules and regulations, conduct value-for-money analysis, and make evidence-based decisions.
<b>Operational</b>	Due to insecurity workforce challenges will remain in all country offices. Supply chain issues also remain a risk in countries where HealthNet TPO delivers health services and is responsible for the procurement of pharmaceutical & medical goods.	HealthNet TPO country offices will adhere to security protocols and conduct risk assessments. Programme implementation follows framework, regulations and procurement policies. HealthNet TPO will ensure strict compliance with donor procurement rules, maintain cold chain equipment and implement inventory systems for expiring items. Regarding emergency response and preparedness, HealthNet TPO has designated emergency response personnel and a rapid response team (RRT). HealthNet TPO will continue to advocate for funding from other donors and explore innovative financing mechanisms to ensure quality service delivery.
<b>Political</b>	Political shifts, corruption and governmental mismanagement of resources carry the potential to impact the programme's commitment and disrupt its implementation.	It is crucial HealthNet TPO staff in the country prioritise close collaboration and capacity-building efforts with government authorities to ensure their ongoing engagement and support. Where appropriate, HealthNet TPO will cultivate strong relationships with government authorities at all levels, fostering their ownership, participation, and commitment to the programme.
<b>Strategic</b>	Inadequate project design, planning and execution may result in adverse consequences, including disorganisation within its governance structure, unhealthy competition within the sector, a compromise in organisational culture, a loss of strategic direction, the departure of experienced senior staff in the country	HealthNet TPO will remain committed to strict adherence to the Code for Good Governance of Charities, the organisation's Code of Conduct, and relevant policies and guidelines. The organisation will invest in staff capacity-building and motivation, pursue innovative and strategic approaches and maintain ongoing environmental scanning to identify threats and opportunities. Moreover, HealthNet TPO will remain dedicated to its clear organisational vision, mission, values and strategy.
<b>Safety and security</b>	In conflict-affected areas, health workers face personal safety and security risks that may lead to service disruptions and personal safety concerns.	Security training will be provided and the and necessary safety measures will be provided where necessary. HealthNet TPO has security protocols and contingency plans for various conflict scenarios.





**HEALTHNET TPO**

**restoring health**  
**rebuilding communities**

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