



# Chapter 9

## Capacity assessment of civil society organizations

### 1. Introduction

The challenge of assessing CSO's capacity for effective scaling-up of activities to deliver/implement national HIV/AIDS program objectives is recognized to be a key challenge in National HIV/AIDS Program (NAP) implementation. There are a variety of CSO's with different sizes, capacity, knowledge, skills, and geographic coverage which are responding to the HIV/AIDS endemic. The capacity assessment is at two levels: (a) the overall national capacity of CSO's to deliver/implement NAP objectives; and (b) individual CSO assessment to obtain grant funding from the NAP.

This chapter deals with CSO capacity assessment needs, methodologies and suggests essential assessment aspects from MAP experience. There are a number of CSO (NGO/CBO) assessment toolkits developed by various organizations that are available on the internet. This chapter does not recreate anything new but reproduces what seems most relevant for a HIV/AIDS program.

### 2. Why CSO assessment is important?

The need for CSO capacity assessment is important to:

- Determine a country's overall implementation capacity;
- Assess to what extent scaling-up of HIV/AIDS initiatives can be realistically pursued in a country;
- Help in planning realistic policies, strategies and plans to enhance a country's response to HIV/AIDS in partnership with CSOs;
- Develop practical working relationships with CSOs in fight against HIV/AIDS from the community to the national levels;
- Determine individual CSO's capacity at the time of their request for grant financing from the MAP (and other) sources of funds. This is to ensure that the CSO can deliver the outputs and outcomes needed for the HIV/AIDS programs in a transparent and accountable fashion; and
- Mobilize as many resources as possible to generate a rapid response against the epidemic.

### 3. What type of CSOs and the levels of assessment ?

- **Types of CSOs and the levels of assessment.** It is necessary to understand the types of CSOs in a country and their basic characteristics and the level of assessment required under a NAP. The following table illustrates these aspects as experienced under the MAP:

Table 9.1

Types of CSOs	Basic characteristics	Level of assessment required
Grassroots level community group.	<ul style="list-style-type: none"> <li>The leader is usually the community head or the religious leader of the community.</li> <li>The group has some knowledge of delivering community based activity(ies).</li> <li>Has access to people who can read, write and can maintain basic cash-in and cash-out registers.</li> </ul>	<ul style="list-style-type: none"> <li>A sample of such groups should be included in the national assessment.</li> <li>Basic assessment is required to determine if they can undertake HIV/AIDS initiatives on a limited scale at the time of applying for the funds.</li> </ul>
Community Based Organization. including Special interest group (women, youth, CSW etc)	<ul style="list-style-type: none"> <li>Has a formal management structure (usually 3+ people).</li> <li>Covers well identified target locations, or 1-5 villages or small population clusters.</li> <li>Has some knowledge of accounting requirements and usually has access to a fulltime or part-time accountant or a bookkeeper.</li> <li>Has basic knowledge of HIV/AIDS related issues, community mobilization, community based development.</li> </ul>	<ul style="list-style-type: none"> <li>A sample of such CBOs needs to be included in the national assessment.</li> <li>Assessment at the time of grant application to include: past experience in implementing social development activities; knowledge of HIV/AIDS and related challenges; acceptability by the communities (community leaders) they cover; fiduciary management capacity.</li> </ul>
Local NGO	<ul style="list-style-type: none"> <li>Has a formal management structure (usually 10+ people).</li> <li>Covers more villages or population clusters.</li> <li>Has satisfactory knowledge of accounting requirements and has access to a fulltime or part-time accountant.</li> <li>Has general knowledge of HIV/AIDS related issues and community mobilization, community based development, monitoring and evaluation requirements.</li> <li>Is currently receiving funds (not necessarily for HIV/AIDS) from bigger NGOs (local or international), donors or the government.</li> </ul>	<ul style="list-style-type: none"> <li>A sample of such LNGOs needs to be included in the national assessment.</li> <li>Assessment at the time of grant application to include: past experience in implementing social development activities; HIV/AIDS activities, knowledge of HIV/AIDS and related challenges; acceptability by the communities covered; fiduciary management capacity including past financial statements; monitoring &amp; evaluation knowledge and practice; established office place with consumables, equipment and having a regular operating budget, ability to mobilize additional funds and a strategy for scaling up HIV/AIDS activities.</li> </ul>
International NGO	<ul style="list-style-type: none"> <li>Has a formal management structure including technical and administrative staff.</li> <li>Has established accounting procedures per international standards.</li> <li>Covers a number of population clusters.</li> <li>Has thorough knowledge of HIV/AIDS related issues, community mobilization, community based development, monitoring and evaluation requirements.</li> <li>Have considerable years of experience in the county (or internationally) in the areas of basic health care and/or HIV/AIDS.</li> </ul>	<ul style="list-style-type: none"> <li>A sample of such LNGOs needs to be included in the national assessment.</li> <li>Assessment at the time of grant application to include: past experience in implementing social development activities; HIV/AIDS activities, knowledge of HIV/AIDS and related challenges; acceptability by the communities (community leaders) covered; fiduciary management capacity; monitoring and evaluation knowledge and practice; established office with consumables, equipment and having a regular budget.</li> </ul>

**When to assess?** There are two instances when CSO capacity assessment is required: (a) During project preparation, an overall assessment is required to establish a country's capacity in delivering an HIV/AIDS program. At this stage, an appropriate sample of community groups, CBOs, FBOs, LNGOs, and NGOs should be selected and an overall assessment should be done<sup>13</sup>; and (b) Every applicant to access funds from the NAP needs to be assessed by the NAC/NAS (or its authorized entity, such as a program management agent) to determine if the applicant has satisfactory knowledge and capacity to deliver what they are proposing.

<sup>13</sup> This assessment not only provides information on what is required to scale up CSO operations but what kind of fiduciary architecture – financial management and disbursement, procurement and program monitoring and evaluation – is appropriate, relevant, effective and efficient.

**Project preparation stage**

(a) *What to assess? Approaches for both cases are different, a broader assessment is needed to establish overall country's capacity:*

- Geographic area covered, type (table 9.1), experience in HIV/AIDS or basic health care areas, budget & sources of funding, staffing, beneficiaries being served, type of subprojects being implemented or experienced;
- HIV/AIDS awareness in the CSO staff;
- Attention to gender issues, community ownership;
- Community participation in project design/development, and that it addresses matters raised by the community;
- Relationship with public-sector counterparts and relevant donors;
- Planning, administration and project management capacity;
- Financial management, procurement management capacity – sustainability, experience and weaknesses;
- Program monitoring and evaluation capacity;

(b) *What to deduce from assessment?*

- Generic capacity weaknesses and activities to mitigate capacity risks;
- Assessment criteria for the NAP grant applicants;
- M&E requirements;
- Sub-grant application process(es);
- Contracting out options for subproject appraisal, review, supervision, fiduciary management, fiduciary advisory services for CSOs;
- Whether the community has been involved in the design of the project, and whether it addresses concerns raised by the community;
- Levels of government and non-government mechanisms to get resources to the CSOs as swiftly as possible;
- Capacity building plan with cost estimates and strategy for implementation; and
- Defining the scope of the MAP.

**Sub-grant proposal application stage**

(a) *What to assess? Specific, case-by-case assessment of individual CSOs at the time of applying for MAP funds. Such assessment generally include:*

- **General.** Legal status, office/field office locations and geographic area covered, type (table 9.1), infrastructure, budget & sources of funding, staffing, beneficiaries being served, type of subprojects being implemented or experienced;
- **Institutional.** Includes experience in HIV/AIDS and/or basic health-care areas and/or community mobilization and capacity building areas; staff and their HIV/AIDS awareness and training levels; relationship with the public-sector counterparts and relevant donors; planning, administration and project management capacity; monitoring and reporting capacity; legal dispute or debts which could materially affect CSOs'ability to undertake the subproject;
- **Coherence.** Understanding of problems and their causes, understanding of the technical issues; adequacy of activities proposed in subproject proposal; rationality of outcome/outputs indicators; budget and its reasonability for the proposed activities; understanding and adequacy of monitoring plan; adequacy of personnel/resources to monitor the implementation; and innovative or creativeness;
- **Fiduciary.** Financial management and disbursement, procurement management capacity in terms of staffing (or access to); record keeping; accessibility to banking services; relevance of activities and expenditure items; and reporting;

- **Sustainability.** Community participation in proposal preparation; implementation maximizing on existing experience, knowledge and/or skills (and of the local community); strategy to sustain operational/maintenance costs once implementation is complete; role of women in the community/subproject and the impact it will have;
- **Social.** Attention to gender issues, community ownership; understanding of community characteristics (ethnic/cultural, socio-economic, main sources of income, literacy, health status, etc.); good understanding of the people and community; recognition of the concerns of women, youth, the elderly and other vulnerable groups; community participation; risks from the local groups or institutions which may pose an obstacle to the success of the initiative.

*(b) What to deduct from assessment?*

- Generic capacity weaknesses and activities to mitigate capacity risks proposed and included in the CSO's proposal;
- Relevance of activities proposed to existing capacity and knowledge;
- Establish scope of proposed activities and relevant budget;
- Establish program M&E requirements based on proposal duration and output indicators;
- Establish essential capacity building needs and inclusion in the capacity building plan of the NAC/NAS;
- Determine association with other experienced CSO for implementation support, fiduciary support and capacity building;

#### 4. Lessons learned

- **Overall country level CSO assessments have not been comprehensive.** Some assessments done during MAP preparations are either too detailed in some areas but not comprehensive or lack important dimensions. The overall assessments generally do not have the right mix of different CSOs;
- **There is a shortage of relevant professionals** to conduct such assessments. It is an appropriate investment to hire local consultants to perform this work;
- **It is not necessary but a template approach would be useful** to determine a country's CSO capacity.
- **At the subproject appraisal level,** not all applicants are equally assessed. In some MAP countries there are too many levels involved in assessing the same CSO that takes an unnecessarily long time and discourages the CSOs.

In some MAP countries the CSO assessment is so casual that implementation becomes a problem. In some cases, the communities have not been sufficiently involved in the project design, and the implementing partner has developed the project without a real project proposal. An assessment can detect such cases.