

Local Capacity Initiative Facilitated Discussion and Capacity Assessment Tool: Facilitator's Manual

Advancing Partners & Communities and the Health Policy Project
September 2014



Advancing Partners & Communities

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Additionally, the authors would like to acknowledge that content for the capacity scaling sections came from USAID's *Organizational Capacity Assessment (OCA) Facilitator's Guide Version With NUPAS Items*, which is based on the Organizational Capacity Assessment (OCA) Tool originally developed in 2009 by Initiatives Inc. and JSI for the New Partners Initiative project (technical assistance for grantees provided by JSI and FHI 360). The OCA tool provides organizations with a set of criteria to assess their current management capacity to implement quality health programs, and to identify key areas that need strengthening. The tool allows for a holistic look at organizational systems with key members of management followed by action planning to develop an organizational roadmap for capacity strengthening. The tool is available at www.npi-connect.net.

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ACRONYMS AND ABBREVIATIONS

| | |
|-------|--|
| AIDS | acquired immunodeficiency syndrome |
| APC | Advancing Partners & Communities |
| CD | capacity development |
| CSO | civil society organization |
| HIV | human immunodeficiency virus |
| HPP | Health Policy Project |
| IT | information technology |
| JSI | JSI Research & Training Institute, Inc. |
| LCI | Local Capacity Initiative |
| M&E | monitoring and evaluation |
| MSH | Management Sciences for Health |
| NGO | nongovernmental organization |
| SMART | specific, measurable, achievable, relevant, and time-bound |
| TA | technical assistance |
| USAID | U.S. Agency for International Development |
| USG | U.S. Government |

INTRODUCTION TO THE LOCAL CAPACITY INITIATIVE

The Local Capacity Initiative (LCI) provides direct funding and support to civil society organizations (CSOs) that advocate for and deliver high-quality and sustainable HIV and AIDS programs through activities to reduce legal and policy/structural barriers; reduce stigma and discrimination; and ensure that people living with HIV and AIDS are involved in the planning and implementation of programs that affect their lives. The LCI will provide direct funding to organizations across 14 countries based on their country operational plans (COPs). Organizations will implement programs to strengthen advocacy around HIV and AIDS, while also focusing on organizational sustainability. Organizations will be supported through technical assistance provided by two central mechanisms funded by the U.S. Agency for International Development (USAID): the Health Policy Project (HPP), managed by Futures Group (and its consortium, including RTI International and Plan International USA), and Advancing Partners & Communities (APC), managed by JSI Research & Training Institute, Inc. (JSI) in partnership with FHI 360.

The technical assistance provided under the LCI aims to increase an organization's capacity in the following five outcome areas:

1. Capacity of organizations to advocate for and monitor transparent, evidence-based policies/regulations
2. Capacity of organizations to engage in each stage of HIV program development and implementation
3. Capacity of organizations to engage civil society networks/coalitions
4. Capacity of organizations to engage citizens in recognizing and advocating for high-quality services
5. Capacity of organizations to sustain activities beyond the life of U.S. Government funding.

PURPOSE OF THIS TOOL

To determine technical assistance needs, the LCI Capacity Assessment Tool will be used to conduct an assessment of the organization's policy, advocacy, and organizational systems capacity. The assessment consists of a facilitated self-assessment as well as optional stakeholder interviews. The tool is divided into five major sections (LCI outcome areas); four of these areas focus on critical elements for advocacy and one focuses on overall organizational capacity. Additionally, there are in-depth domains associated with each larger outcome, which can be used to further review capacity.

The tool's structure will be customized for each organization, depending on specific needs. The outcome areas will be reviewed for each organization, with additional domains added as needed. The stakeholder interview guide is available in Annex 2.

SUGGESTED PARTICIPANTS

The tool covers the organization’s capacity in a number of policy, advocacy, and organizational development areas:

- Policy analysis
- Policy monitoring
- Policy advocacy and communication
- Addressing policy implementation barriers
- Networking and multisectoral coordination
- Policy dialogue
- Accountability systems
- Monitoring and evaluation
- Governance
- Human resources management
- Resource mobilization

Key staff who manage the organization’s work in these areas, or provide technical input, should participate in the assessment. Additionally, for the governance section, it is useful to have the participation of board members. Optimally, 8–10 people from the organization will consistently participate in the discussions across the two days of assessment.

METHODOLOGY

This tool has been designed to be a facilitated self-assessment with components of group consensus scoring and individual scoring. Additionally, the facilitation team will also conduct stakeholder interviews at the national and local levels to inform the assessment. The findings from these discussions, validated by optional stakeholder interviews, provide general direction as HPP/APC, the LCI grantee, and the local and U.S.-based LCI Committee identify the priorities and approaches of the country action plan for each LCI grantee.

The assessment methodology has two major components: (1) a facilitated discussion and self-assessment and (2) optional stakeholder interviews.

The facilitated discussion and organizational self-assessment provides an opportunity for reflection on the organization’s capacity and abilities, so open and honest discussion is encouraged. The tool has the following components:

- **Organization technical areas** (individual assessment/small group discussions—ranked on a scale of agree/disagree and importance). Each technical area assessment begins with a targeted discussion of key technical components of policy analysis, advocacy, or organizational development. These discussions include developing a common understanding of the definition and performance ideal as well as some probing questions that encourage the participants to describe, reflect on, and interpret past experiences in each technical area. Next, the participants individually score specific capacity indicators (scale of 0 [don’t know], 1 [strongly disagree] to 4 [strongly agree]), and then small

groups discuss and score the same indicators for importance for the organization to conduct its work (1 [not important] to 5 [important]). The organization should rank no more than the highest-priority indicators as a “5” when it comes to importance. All indicators need to be marked somewhere along the 1–5 spectrum of importance to ensure that the scoring works.

- **Overarching LCI outcomes** (consensus discussion—spectrum scale). For each of the LCI outcomes, the facilitator will review the core outcome area and the four possible scores. The facilitator will guide participants through “rolling up” the related technical area discussions into an overall consensus of the organization’s position on a scale of 1 to 4, with 4 as the “gold standard.” Keep in mind that although the descriptions for the scores (1, 2, 3, or 4) may not exactly reflect an organization’s capacity in each category, it is important to determine a score that best reflects the organization. It is not necessary that each organization select a whole number; if a decimal best represents the organization, that is perfectly acceptable. This is an opportunity for reflection on what areas need continued attention and strengthening as the organization moves forward. Discussions should provide clear identification of those areas that need strengthening.

Optional stakeholder interviews include discussions with relevant donors, government officers, and nongovernmental organizations (NGOs) and CSOs. Standardized questions include:

- Describe the legal/policy framework and engaged government actors, organizations, including NGOs/CSOs, in the area of the LCI grantee’s focus.
- What are the key policy issues, barriers, points of entry/influence, challenges, and opportunities to improve the area of the LCI grantee’s focus?
- Do you have any recommended resources, reports, etc.?
- Do you have a past association with the LCI grantee? What are your suggestions for assuring its success in the area of the LCI grantee’s focus?
- How can we engage you as a supporter of the work of the LCI grantee?
- Do you have recommendations for local consultants, Organizational Development providers, twinning opportunities, secondments, etc.?

A stakeholder interview guide is included in Annex 2.

Consolidating Information

Assessment information gathered from the organizational assessment and stakeholder interviews will be consolidated and vetted with the LCI grantee. This data summary will include common themes from discussions and stakeholder interviews as well as bar charts and 2x2 plots to provide a graphic presentation of the assessment findings.

| | |
|---|--|
| Capacities of high importance and high capacity | Capacities of high importance and low capacity—focus of capacity development activities |
| Capacities of low importance and high capacity | Capacities of low importance and low capacity |

The findings, based on the participant responses to the capacity and importance questions, will be entered into a spreadsheet to produce the 2x2 plot. This information will be reviewed with the organization to ensure it is an accurate reflection and then collated into an assessment report.

Assessment Report

The previous section outlines the process by which the organizational assessment information will be gathered and the stakeholder interviewers will be consolidated and vetted with the LCI grantee. Each CSO will receive a copy of the assessment report with the action plan. Each report will enumerate the objectives, methodology, and participants. It will also include a summary of the results for each sub-section. The country action plan and a capacity-building plan will highlight the specific technical assistance priorities of the partner as well as mechanisms for how HPP/APC and the LCI grantee will work together.

PARTICIPATORY ASSESSMENT

Opening Sessions

(Allow approximately 1 hour/cushion for late start.)

Day 1

- Remarks from executive director of organization
- Remarks from host, U.S. Government/LCI
- Introductions
- Overview of schedule, content, methodology
- Purpose of assessment
 - Informal discussion; not an audit/report card/does not determine funding
 - Assessment report is “owned” by the organization; it will not be published or put on the Web
 - End result and how it will be summarized in a report
 - Participatory process for final report and action planning
 - How scoring will work
- Fundamental content
 - What is policy—laws, regulations, program/clinical guidelines, judicial findings
 - What is advocacy—similarities/differences between advocating for behavior change and policy advocacy

Subsequent Days

- Recap of previous day(s)
- Thoughts/questions/clarifications of previous content

Technical Area—Policy Analysis

(Allow approximately 45 minutes.)

| Technical Area: Policy Analysis | | | |
|---|----|-------------------|----------------|
| <p>Definition:</p> <p>Policy analysis is the process through which policy solutions to social/health issues are identified, analyzed, and presented to policymakers for consideration. Policymakers weigh their decisions based on various criteria. Thus, policy analysis extends beyond data analysis to support decisions based on the technical aspects of an issue and focuses on the political costs and benefits of policy reform (Thomas and Grindle 1994). Policy analysis is also needed to guide policy specifications, including provisions for financing, the lead agencies/organizations for multisectoral coordination, monitoring and evaluation (M&E), and client access and equity.</p> <p>Performance Ideal:</p> <p>At the highest level of performance, organizations and individuals should have the skills to regularly and systematically use data and research to define a problem that needs to be addressed through policy action as well as alternative solutions to the problem.</p> <p>Discussion Questions:</p> <ul style="list-style-type: none"> • What are some of the barriers that your clients face in accessing health services? • What are some of the programmatic interventions you have implemented to address these barriers? • Have you identified policies that create barriers to services? • How have you/would you address these policy barriers? • How did you engage the affected populations in the analysis or planning? • What do you think is your organization’s unique strength in terms of contributing to the evidence base for making good policy decisions—at the government level? At the clinic level? Within the private sector? | | | |
| Indicator Statements: | DK | Strongly Disagree | Strongly Agree |
| 1. Key staff at [organization] have knowledge of laws, policies, ordinances, guidelines, and programs at national and decentralized levels that impact availability, utilization, and quality of [service(s)] services for [target population(s)]. | 0 | 1 | 2 3 4 |
| 2. Key staff at [organization] are knowledgeable of international frameworks and policy commitments governing gender equality and human rights. | 0 | 1 | 2 3 4 |
| 3. Key staff at [organization] have knowledge on recent data, analyses, guidelines, and studies related to availability, utilization, and quality of [service(s)] services for [target population(s)]. | 0 | 1 | 2 3 4 |
| 4. Key staff at [organization] have a working understanding of the links between gender-based violence and barriers to [service(s)] services for [target population(s)]. | 0 | 1 | 2 3 4 |
| 5. [organization]’s perspective and approach to gender includes consideration of women, men, and gay/lesbian/transgender people. | 0 | 1 | 2 3 4 |
| 6. [organization] takes action to mainstream gender across all aspects of its programming. | 0 | 1 | 2 3 4 |
| 7. [organization] is able to develop a coherent analysis of barriers to [service(s)] services for [target population(s)], explain their magnitude, identify principal causes, and alternative policy solutions. | 0 | 1 | 2 3 4 |

| | |
|--|-------------------|
| 8. [organization] establishes and maintains strong working linkages with experts in statistics, health economics, political science, and policy research and analysis. | 0 1 2 3 4 |
| 9. [organization] strengthens the capacity of external organizations to develop coherent analysis of barriers to [service(s)] services for [target population(s)], explain their magnitude, identify principal causes, and alternative policy solutions. | 0 1 2 3 4 |
| 10. [organization] strengthens the capacity of [target population(s)] and their advocates to participate in policy analysis activities. | 0 1 2 3 4 |
| 11. [organization] incorporates input from [target population(s)] and their advocates into its policy analysis activities. | 0 1 2 3 4 |
| 12. [organization] represents policy analyses in policy forums and disseminates them externally. | 0 1 2 3 4 |
| 13. [organization] is seen as an unbiased source of policy analysis data. | 0 1 2 3 4 |
| 14. [organization] facilitates sharing of policy analyses findings among relevant stakeholders. | 0 1 2 3 4 |
| 15. [organization] strengthens the capacity of [target population(s)] and their advocates to represent, disseminate, and share policy analysis findings. | 0 1 2 3 4 |
| 16. [organization] strengthens the capacity of policymakers to understand and address findings of policy analyses. | 0 1 2 3 4 |

Technical Area—Policy Monitoring

(Allow approximately 45 minutes.)

| Technical Area: Policy Monitoring | | | | |
|--|----|-------------------|----------------|-----|
| Definition: | | | | |
| Monitoring the policy environment, and specifically assessing the processes by which policies are developed, enacted, and implemented, are necessary complements to M&E efforts that link policies with improved service delivery and health outcomes. In assessing the environment, there is a need to gauge the processes of stakeholder engagement, policy development, legislative endorsement of policy, and enactment of policies. | | | | |
| Performance Ideal: | | | | |
| High capacity for policy monitoring means being able to effectively and systematically collect, analyze, communicate, and use data related to the process and outcomes of policy development and implementation. Strong relationships among sectors and among individuals and organizations are required to adequately monitor the full policy process and use that information to improve policy development and implementation. Ideally, government institutions provide citizens and CSOs with the opportunity to participate in the process and provide access to information about the process of developing and implementing the legal and regulatory framework. Government institutions in collaboration with nongovernmental actors should have the ability to collect, analyze, present, and use data related to policy development and implementation, including financing data, data about service delivery, and health outcomes. | | | | |
| Discussion Questions: | | | | |
| <ul style="list-style-type: none"> Do you have any specific examples of systemic monitoring of policy formulation and implementation that you can share with us? Who led this action? What happens if there are unintended consequences or inequities from implementing policy/programs? How are these identified and resolved? | | | | |
| Indicator Statements: | DK | Strongly Disagree | Strongly Agree | |
| 17. Key staff at [organization] can articulate the benefits of and approaches to gathering evidence on the implementation of policies. | 0 | 1 | 2 | 3 4 |
| 18. Key staff at [organization] are knowledgeable about the processes for implementing and funding of policies by national/subnational institutions. | 0 | 1 | 2 | 3 4 |
| 19. Key staff at [organization] are knowledgeable about specific elements required for policy implementation, including policy goals, strategies and action plans, defining roles of different institutions and stakeholders, and funding and staffing requirements. | 0 | 1 | 2 | 3 4 |
| 20. [organization] tracks legislation, regulatory, and policy documents through development, implementation, and M&E phases. | 0 | 1 | 2 | 3 4 |
| 21. [organization] systematically evaluates the differential impacts of policy (existing or proposed) on service utilization by women and girls, men and boys, and lesbian, gay, bisexual, and transgender populations. | 0 | 1 | 2 | 3 4 |
| 22. [organization] systematically incorporates perspectives of community and technical experts in policy monitoring activities. | 0 | 1 | 2 | 3 4 |
| 23. [organization] organizes and synthesizes the information on policy implementation and takes relevant follow-up action. | 0 | 1 | 2 | 3 4 |

| | |
|--|---------------|
| 24. [organization] communicates findings of policy monitoring through a variety of communication channels (e.g., media, publications, etc.). | 0 2 3 4 |
| 25. [organization] facilitates sharing of policy monitoring findings among relevant stakeholders. | 0 2 3 4 |
| 26. [organization] monitors and analyzes budget spending to identify where [service(s)] services are not being scaled up. | 0 2 3 4 |
| 27. [organization] influences others to participate in monitoring the processes of policy development and implementation on [service(s)] services for [target population(s)]. | 0 2 3 4 |
| 28. [organization] strengthens capacity among [target population(s)] and their advocates to enable them to monitor policy implementation and take relevant action. | 0 2 3 4 |
| 29. [organization] strengthens capacity among [target population(s)] and their advocates to track legislation, regulatory, and policy documents through development, implementation, and M&E phases. | 0 2 3 4 |
| 30. [organization] strengthens capacity among policymakers to understand policy implementation monitoring data and take relevant action. | 0 2 3 4 |

Technical Area—Policy Advocacy and Communication

(Allow approximately 45 minutes.)

| Technical Area: Policy Advocacy and Communication | | | | | | | | |
|--|--|--|--|----|-------------------|----------------|---|---|
| Definition: | | | | | | | | |
| <p>Advocacy is a set of targeted actions directed at decision makers in support of a specific policy issue. (POLICY Project 1999) Advocacy efforts may be directed at public, private, political, or international institutions to adopt new policies/programs, revise existing policies/programs, ensure policy/program implementation, or mobilize resources. Giving voice to stakeholders includes strengthening skills in advocacy. Effective advocacy requires a range of competencies and capabilities: understanding of the policymaking process and actors; identifying and analyzing target audiences and stakeholders; devising strategic goals, objectives, and action plans; collecting, analyzing, and using reliable data and evidence; creating strategic messages that educate, persuade, or move target audiences to act; working collaboratively and networking with a range of partners; and monitoring and evaluating implementation of the advocacy strategy (Harvard Family Research Project 2007; Coffman 2009).</p> <p>While effective and responsive policies must be based on evidence, there is often a gap between research and policymaking. Policy communication makes quantitative and qualitative data accessible for use by policymakers and advocates and often includes a policy position or policy recommendations in communication products with the purpose of persuading policymakers to act. Key knowledge translation capabilities include understanding barriers to the use of data and research, being able to identify policymakers' information needs, and communicating research findings through a variety of channels (e.g., written formats, oral presentations, information graphics, media briefings, etc.) (Ashford 2006; Population Reference Bureau 2003). In addition, policy communication capabilities include the ability to articulate evidence-based policy recommendations and develop and implement persuasive communication strategies.</p> | | | | | | | | |
| Performance Ideal: | | | | | | | | |
| <p>High capacity for advocacy means being able to effectively communicate and influence the policy process. Advocacy efforts are targeted, strategic, and based on convincing evidence and community consultation. Organizations and individuals constructively engage in multi-stakeholder dialogues with policymakers and decision makers to represent the needs and interests of its constituents. They correspondingly communicate policy implications regularly to constituents and mobilize them to become active in advocacy activities.</p> | | | | | | | | |
| Discussion Questions: | | | | | | | | |
| <ul style="list-style-type: none"> • Are there examples of successful civil society advocacy, perhaps not even in health, that you can describe? • Can you share any evidence about the outcomes of this advocacy? What went well or not so well? Why? • What policy advocacy communications materials have you developed in the past 12 months? • What types of data sources did you draw from to prepare the materials? How were they distributed? • What do you see as your greatest strength as an advocacy organization? Challenges? | | | | | | | | |
| Indicator Statements: | | | | DK | Strongly Disagree | Strongly Agree | | |
| 31. Key staff at [organization] understand the use of qualitative and quantitative methods to gather evidence on the [service(s)] services needs and priorities of [target population(s)] and the effect of policies on service utilization. | | | | 0 | 1 | 2 | 3 | 4 |
| 32. Key staff at [organization] are aware of sources and use secondary data to inform advocacy strategies and materials. | | | | 0 | 1 | 2 | 3 | 4 |
| 33. Key staff at [organization] are aware of and participate in forums that review research and evidence regarding [service(s)] services availability, utilization, and quality by [target population(s)]. | | | | 0 | 1 | 2 | 3 | 4 |

| | |
|---|---------------|
| 34. Key staff at [organization] understand the policymaking and implementation processes and opportunities for advocacy. | 0 2 3 4 |
| 35. Key staff at [organization] assess the feasibility and effectiveness of proposed policy actions. | 0 2 3 4 |
| 36. [organization] has an up-to-date policy advocacy plan/strategy that guides its activities. | 0 2 3 4 |
| 37. [organization] identifies target audiences and analyzes their position for potential support or opposition to particular policy proposals. | 0 2 3 4 |
| 38. [organization] cultivates contacts inside and outside government to gather information about priorities and actions that may impact service availability, utilization and quality for [target population(s)]. | 0 2 3 4 |
| 39. [organization] has trust and credibility with decision makers. | 0 2 3 4 |
| 40. [organization] can accurately analyze power dynamics and opportunities for influence. | 0 2 3 4 |
| 41. [organization] understands the information needs of policymakers and appropriate materials and channels for delivering information. | 0 2 3 4 |
| 42. [organization] strengthens the capacity of [target population(s)] and their advocates to analyze the power dynamics and effective communication mechanisms of policymakers. | 0 2 3 4 |
| 43. [organization] routinely identifies opportunities and entry points to promote gender equality through policies and programs. | 0 2 3 4 |
| 44. [organization] consistently develops advocacy materials that are simple and targeted appropriately to specific audiences most relevant to increasing availability, utilization, and quality of [service(s)] services for [target population(s)]. | 0 2 3 4 |
| 45. [organization] strengthens the capacity of [target population(s)] and their advocates to develop advocacy materials strategically targeted to audiences most relevant to increasing availability, utilization, and quality of [service(s)] services for [target population(s)]. | 0 2 3 4 |
| 46. [organization] effectively communicates policy recommendations through writing, interpersonal communication, social media, or through public events. | 0 2 3 4 |
| 47. [organization] systematically monitors the effectiveness of advocacy activities to document “lessons learned” and improve future advocacy activities. | 0 2 3 4 |
| 48. [organization] strengthens the capacity of [target population(s)] and their advocates to develop and evaluate policy advocacy plans/strategies. | 0 2 3 4 |
| 49. [organization] strengthens the capacity of [target population(s)] and their advocates to develop effective advocacy messages. | 0 2 3 4 |

Technical Area—Addressing Policy Implementation Barriers

(Allow approximately 45 minutes.)

| Technical Area: Addressing Policy Implementation Barriers | | | | | | |
|--|--|--|--|----|-------------------|----------------|
| <p>Definition:</p> <p>Policies and programs often do not roll out exactly according to plan; they face unforeseen barriers and challenges. Often, barriers to implementation have their roots in policies that are nonexistent, inadequate, or conflicting. Furthermore, in the act of implementing a newly adopted policy, implementation and monitoring processes may reveal unintended consequences that must be remedied—for example, inequitable distribution in service coverage. Addressing barriers requires individual and institutional skills and competencies to understand the policy environment governing the health system and the configuration of the health system in the context of the government structure and the needs of beneficiaries/clients and implementers. It requires the ability to identify and assess the barriers and their policy roots and the appropriateness of the proposed solution. (Bhuyan, Jorgensen et al. 2010; Cross, Hardee et al. 2001)</p> | | | | | | |
| <p>Performance Ideal:</p> <p>High capacity for addressing implementation barriers requires attention throughout the policy process. It starts at the policy design and strategic action planning phases, with due consideration of potential roadblocks and steps to overcome them. Such barriers could include opposition from key stakeholders, inadequate human or financial resources, lack of clarity on operational guidelines or roles and responsibilities for implementation, and conflicts with existing policies. Attention to barriers continues during policy implementation—closely linked to policy monitoring—to track outcomes, identify challenges, and be alert to unintended consequences or inequities. Individuals are able to gather and synthesize different types of information and from various sources. Organizations elicit feedback from implementers, partners, and beneficiaries to identify barriers, explore root causes, and seek solutions.</p> | | | | | | |
| <p>Discussion Questions:</p> <ul style="list-style-type: none"> What are some of the stumbling blocks to effective implementation of policies/programs (e.g., opposition from key stakeholders, inadequate human or financial resources, lack of clarity on operational guidelines or roles and responsibilities for implementation, stigma against client populations, and conflicts with existing policies)? | | | | | | |
| Indicator Statements: | | | | DK | Strongly Disagree | Strongly Agree |
| 50. Key staff at [organization] understand the configuration of the government health system for [service(s)] services for [target population(s)]. | | | | 0 | 1 | 2 3 4 |
| 51. Key staff at [organization] are knowledgeable about the existing gender-based violence referral network and available services. | | | | 0 | 1 | 2 3 4 |
| 52. Key staff at [organization] are knowledgeable about the specific standards for service delivery and provider performance for providing [service(s)] services for [target population(s)]. | | | | 0 | 1 | 2 3 4 |
| 53. Key staff at [organization] have the tools and skills to assess the barriers to [service(s)] service utilization by [target population(s)], their policy roots, and the appropriateness of proposed solutions. | | | | 0 | 1 | 2 3 4 |
| 54. [organization] strengthens the capacity of [target population(s)] and their advocates to assess the barriers to [service(s)] service utilization by [target population(s)], their policy roots, and the appropriateness of proposed solutions. | | | | 0 | 1 | 2 3 4 |
| 55. Key staff at [organization] are able to engage diverse stakeholders, including program implementers and beneficiaries, in constructive policy dialogue to identify and address barriers to [service(s)] services for [target population(s)]. | | | | 0 | 1 | 2 3 4 |

| | |
|---|-------------------|
| 56. Key staff at [organization] understand cost analyses that compare budget allocations with the actual resources required to implement programs. | 0 1 2 3 4 |
| 57. [organization] strengthens the capacity of [target population(s)] and their advocates to understand cost analyses that compare budget allocations with the actual resources required to implement programs. | 0 1 2 3 4 |
| 58. Key staff at [organization] understand mechanisms to ensure compliance with policy directives and understand incentives for compliance as well as sanctions for noncompliance. | 0 1 2 3 4 |
| 59. [organization] advocates for adequate training, supervision, resources, and support for increasing uptake of [service(s)] services for [target population(s)]. | 0 1 2 3 4 |
| 60. [organization] considers gender norms when analyzing policy barriers to increasing uptake of [service(s)] services for [target population(s)]. | 0 1 2 3 4 |
| 61. [organization] designs and facilitates participatory assessments with communities and [target population(s)] to identify policy barriers to [service(s)] services utilization. | 0 1 2 3 4 |

Capacity Scaling

(Allow approximately 60 minutes.)

Review key discussion points from technical areas:

- Policy analysis
- Policy monitoring
- Policy advocacy and communication
- Addressing policy implementation barriers

Group consensus assessment: Where does [organization] fit on the following scales?

Indicator 1—Advocacy Planning

Does [organization] participate in or support the capacity to develop and/or implement an advocacy plan to improve uptake of [service(s)] by [target population(s)]?

| | 1 | 2 | 3 | 4 |
|--|--|---|--|---|
| I | <p>Organization does not participate in the development or implementation of advocacy plans.</p> <p>(Management Sciences for Health [MSH] 2011)</p> | <p>Organization has participated in developing formal short-, medium-, and long-term advocacy priorities, which have been identified and documented, based on local needs and informed by evidence.</p> | <p>Organization has participated in developing advocacy priorities and has participated in implementing an advocacy plan.</p> | <p>Organization has participated in developing and implementing advocacy plans and effectively influences policymaking at local or other levels.</p> |
| → Increasing and cumulative levels of capacity → | | | | |
| Place [organization] along spectrum to describe [organization]’s capacity to develop and/or implement advocacy plans | | | | |
| Place [organization] along spectrum to describe [organization]’s capacity to support sub grantees or other external organizations to develop and/or implement advocacy plans | | | | |

Indicator 2—Policy Implementation Monitoring

Does [organization] have processes or support development of processes to systematically monitor policy implementation?

| | 1 | 2 | 3 | 4 |
|---|---|---|--|--|
| 2 | Organization does not collect information about policy implementation. | Organization collects some information but may not analyze against the policy, or may not collect it systematically. | Organization collects and analyzes policy implementation data on a regular basis. | Organization identifies appropriate data on policy implementation to and effectively uses data to influence policymaking. |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to monitor policy implementation | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to support sub grantees or other external organizations to monitor policy implementation | | | |

Indicator 3—Knowledge of Policymaking and Implementation Processes

Does [organization] have or support staff knowledge of the formal policymaking and implementation processes and decision-making bodies at the applicable national or local levels and identification of where needed policy actions should emerge?

| | 1 | 2 | 3 | 4 |
|---|--|--|---|---|
| 3 | Organization has no understanding of the policy context. (MSH 2011) | Organization has some understanding of the policy context and is aware of some possibilities to influence policymaking processes. | Organization has a good understanding of the policy context and is aware of possibilities to influence policymaking. | Organization is fully aware of the policy context and has a strategy for policy engagement with targeted individuals/institutions. |
| → Increasing and cumulative levels of capacity → | | | | |
| Place [organization] along spectrum to describe [organization]'s understanding of how and where to influence decision making processes. | | | | |
| Place [organization] along spectrum to describe [organization]'s capacity to support sub grantees or other external organizations to understand how and where to influence decision making processes. | | | | |

Indicator 4—Development of Advocacy Materials

Does [organization] have capacity to develop or support the development of evidence-based advocacy materials to present clear and convincing policy alternatives and workable solutions?

| | 1 | 2 | 3 | 4 |
|---|--|--|--|---|
| 4 | Organization's advocacy materials lack qualitative or quantitative data and fail to present policy alternatives and workable solutions. | Organization identifies and incorporates strategic data and information into advocacy materials and activities in language that is easily understood by technical, nontechnical, and bureaucratic audiences. | Organization identifies and incorporates strategic data and information and policy alternatives and workable solutions into advocacy materials and activities in language that is easily understood by technical, nontechnical, and bureaucratic audiences. | Organization identifies and incorporates strategic data and information and policy alternatives and workable solutions into advocacy materials and activities in language that is easily understood by technical, nontechnical, and bureaucratic audiences in a variety of forums, formats, and channels to support policy change. |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe [organization]'s development of advocacy materials. | | | |
| | Place [organization] along spectrum to describe [organization]'s capacity to support sub grantees or other external organizations development of advocacy materials. | | | |

Indicator 5—Development of Quality Improvement and/or Standard Operating Procedures

Does [organization] have the capacity to directly or indirectly contribute to the development of quality improvement and/or standard operating procedures to improve uptake of [service(s)] by [target population(s)]?

| | 1 | 2 | 3 | 4 |
|---|--|--|--|---|
| 5 | Organization is unaware of needs and standards to improve HIV and AIDS services for client populations. | Organization is aware of the needs of client populations and the international or national standards to improve HIV services for these populations. | Organization is aware of the needs of client populations, the international or national standards, and assists in developing or adapting international or national standards to improve HIV services for these populations. | Organization is aware of the needs of client populations, the international or national standards, assists in developing or adapting standards, and monitors the application of standards to improve HIV services for these populations. |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe [organization]’s contribution to standards for [service(s)] services for [target population(s)]. | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to support sub grantees or other external organizations contribution to standards for [service(s)] services for [target population(s)]. | | | |

Indicator 6—Addressing Discriminatory Guidelines, Policies, or Procedures

Does [organization] have the capacity to directly or indirectly identify issues and create an advocacy plan to address discriminatory guidelines, policies, or procedures that create barriers to [service(s)] services by [target population(s)]?

| | 1 | 2 | 3 | 4 |
|---|--|--|--|---|
| 6 | Organization is unaware of the impact of discrimination on the uptake of HIV services by targeted populations. | Organization is aware of the impact of discrimination and engages targeted populations in analyzing policy and practices and in developing plans to address discriminatory practices. | Organization is aware of the impact of discrimination, engages populations in analyzing and planning, and takes actions to ensure discriminatory practices are addressed in planning, funding, and programming efforts within context of relevant national or local guidance. | Organization is aware of the impact of discrimination, engages populations, takes actions to ensure discriminatory policies are addressed in guidance, and monitors implementation of policy commitments to reduce discriminatory practices. |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe the capacity of [organization] to address discriminatory guidelines, policies or procedures that create barriers to [service(s)] services for [target population(s)]. | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to support sub grantees or other external organizations to address discriminatory guidelines, policies or procedures that create barriers to [service(s)] services for [target population(s)]. | | | |

Technical Area—Networking and Multisectoral Coordination

(Allow approximately 45 minutes.)

| Technical Area: Networking and Multisectoral Coordination | | | |
|---|----|-------------------|----------------|
| <p>Definition:</p> <p>Networking and multisectoral coordination are important and effective strategies for mobilizing and coordinating individuals and institutions to influence policy processes and outcomes. Multisectoral coordination refers to the bringing together of various stakeholder groups (e.g., government, civil society, the private sector) and topic areas (e.g., health, environment, economy) to work together to achieve a policy outcome. Key capabilities in networking and multisectoral coordination include recognizing the value of engaging different sectors and parties in the policy process and the ability to engage with a diverse group of stakeholders, effectively participate in policy dialogue, and strengthen partnerships and relationships. Multisectoral coordination requires strong leadership to motivate groups of stakeholders to action, set an agenda that is responsive to the needs of multiple stakeholder groups, and mobilize participation.</p> | | | |
| <p>Performance Ideal:</p> <p>An organization that successfully develops and sustains strong, supportive relationships with other organizations (or groups, divisions, communities, and institutions working in a variety of technical areas) has an internal culture and leadership that values and promotes collaboration and sharing as a key operating principle.</p> | | | |
| <p>Discussion Questions:</p> <ul style="list-style-type: none"> • How has collaboration with others helped you achieve your objectives? • Are you individually or as an organization a member of any formal coalitions or networks? Are you engaged with any global networks? Are you aware of their successes in influencing policy dialogue or reform? Examples? | | | |
| Indicator Statements: | DK | Strongly Disagree | Strongly Agree |
| 62. Key staff at [organization] are knowledgeable about organizations working in sectors that impact the ability of client populations to access services (media, private sector, government, civil society, faith communities, and donor community). | 0 | 1 | 2 3 4 |
| 63. Key staff at [organization] routinely share and leverage information and resources with other advocacy groups and organizations. | 0 | 1 | 2 3 4 |
| 64. Key staff at [organization] are able to manage group dynamics among collaborating partners (develop consensus, manage conflict, facilitate exchange, and ensure commitment to take action). | 0 | 1 | 2 3 4 |
| 65. [organization] is aware of the activities of network(s)/coalition(s) that impact [service(s)] services for [target population(s)]. | 0 | 1 | 2 3 4 |
| 66. [organization] is a formal member of at least one network/coalition that has the goal to improve access to [service(s)] services for [target population(s)]. | 0 | 1 | 2 3 4 |
| 67. [organization] establishes and maintains collaborative and mutually supportive relationships with external groups and organizations representing diverse constituencies (e.g., youth, women, service providers, marginalized populations, health professionals, and media). | 0 | 1 | 2 3 4 |
| 68. [organization] maintains constructive links with a range of stakeholders, including communities, media, faith communities, and peer organizations. | 0 | 1 | 2 3 4 |

| | |
|--|-----------|
| 69. [organization] maintains constructive links with diverse sectors (e.g., health, youth and sport, human rights, gender, uniformed services, education). | 0 1 2 3 4 |
| 70. [organization] strengthens the capacity of [target population(s)] and their advocates to effectively participate in networks and coalitions. | 0 1 2 3 4 |

Technical Area—Accountability Systems

(Allow approximately 45 minutes.)

Technical Area: Accountability Systems

Definition:

An accountability system establishes the processes for monitoring, analyzing, and improving the performance of an institution. Establishing accountability systems—when used in concert with other practices to increase accountability—is one mechanism for achieving good governance outcomes. The system includes procedures and tools for monitoring and evaluating progress in the activities of the institution.

Government leaders have a key role to play in fostering good governance and accountability—determining the rules and regulations that govern the health system, providing policy leadership and oversight, guiding policy and program implementation, harnessing resources, creating mechanisms for social participation, and answering to their citizens for pledged commitments. Civil society must be involved by serving as a watchdog to monitor how policies are actually being rolled out and affecting communities. Strong civil society networks, with the capability and relationships to influence policymaking and implementation, are a key component of the accountability system (McGee and Gaventa 2010). In addition, civil society groups must actively engage in policy monitoring and utilize participation mechanisms to hold policymakers accountable.

Performance Ideal:

Citizens, community groups, the media, and civil society have a broad range of options to hold government officials and institutions accountable. For accountability systems to work, these groups need the capacity to pick the appropriate method of engagement for a given issue. While some organizations are more adept at detailed analysis of government information, others excel at conducting public demonstrations or more visible advocacy methods. Capacity for investigative journalism within the media is also a key pillar of holding government accountable for service commitments. Accountability relies on non-state actors who are able to fill all of these roles.

Discussion Questions:

- What is the existence and functionality of governmental oversight mechanisms and institutions, such as an anti-corruption agency, ombudsman’s office, or audit office?
- Has your organization observed or worked with stakeholders who report being denied services or other issues related to access? Has your organization taken any steps to address these or bring these to the attention of higher authorities? If yes, what happened?

| Indicator Statements: | DK | Strongly Disagree | Strongly Agree |
|--|----|-------------------|----------------|
| 71. Key staff at [organization] are knowledgeable about legal and regulatory frameworks that hold HIV and AIDS service providers accountable. | 0 | 1 | 2 3 4 |
| 72. Key staff at [organization] understand the role and interests of different government and nongovernmental stakeholders in ensuring accountability. | 0 | 1 | 2 3 4 |
| 73. [organization] strengthens the capacity of [target population(s)] and their advocates to frameworks and dynamics holding service providers accountable. | 0 | 1 | 2 3 4 |
| 74. [organization] supports and promotes the knowledge of [target population(s)] regarding their rights and mechanisms for redress when rights are violated. | 0 | 1 | 2 3 4 |
| 75. [organization] has formal channels and mechanisms in place to solicit feedback and information on [service(s)] services from [target population(s)] and their advocates. | 0 | 1 | 2 3 4 |

| | |
|---|-------------------|
| 76. [organization] convinces media outlets to report on stories relating to the accessibility and quality of [service(s)] services. | 0 1 2 3 4 |
| 77. [organization] develops and maintains dialogue with politicians, government officials, legislators, media, and non-state actors on service auditing and monitoring issues. | 0 1 2 3 4 |
| 78. [organization] is sought out as a source of credible and independent experts in technical committees, working groups, and consultative forums related to government oversight. | 0 1 2 3 4 |
| 79. [organization] is known as a credible and independent ally by civil society watchdogs. | 0 1 2 3 4 |
| 80. [organization] has systems for requesting information from the government and can challenge the government if relevant information is not disclosed. | 0 1 2 3 4 |
| 81. [organization] strengthens the capacity of [target population(s)] and their advocates to request information from government and challenge government if relevant information is not disclosed. | 0 1 2 3 4 |
| 82. [organization] strengthens the capacity of [target population(s)] and their advocates to incorporate findings from citizen monitoring methodologies into advocacy efforts. | 0 1 2 3 4 |

Technical Area—Policy Dialogue

(Allow approximately 45 minutes.)

Technical Area: Policy Dialogue

Definition:

Policy dialogue engages various sectors and stakeholders and gives people a voice in the decisions that affect their lives and health; keeps attention on health issues throughout the process—from policy formulation to implementation and monitoring; and encourages consensus for policy action. Policy dialogue involves discussions among stakeholders to raise issues, share perspectives, find common ground, and reach agreement or consensus, if possible, on policy solutions. Meaningful policy dialogue requires governments and policymakers to be able to facilitate participatory processes and engage and form partnerships with diverse stakeholders. Dialogue requires the participation of civil society actors who represent relevant constituencies and are capable of engaging in effective advocacy, able to present evidence-informed arguments, and are knowledgeable about the policy process. Effective policy dialogue requires all involved parties to have strong communication, negotiation, problem-solving, and conflict resolution skills.

Performance Ideal:

High capacity in policy dialogue suggests stakeholders are able to hold or participate in an open, inclusive, and informed dialogue toward the best possible policies. During dialogue, participants should be able to freely contribute their knowledge, expertise, and ideas. Their views should be listened to and considered. Dialogue may be more effective when it draws on relevant data or evidence, including analyses, case studies, or pilot or demonstration projects. At its best, policy dialogue provides an avenue for improving mutual understanding, identifying priorities, enhancing ownership and participation, finding common ground, building constituencies and resolve for change, and influencing policy.

Discussion Questions:

- How does the government recognize the legitimacy of citizen participation in the policy process? What about the key and vulnerable populations?
- What is your organization’s experience with policy dialogue in the last year? At the national level? At the provincial/district/state level? At service delivery points?
- What were your priorities and what were the compromises you had to make?

| Indicator Statements: | DK | Strongly Disagree | Strongly Agree |
|--|----|-------------------|----------------|
| 83. Key staff at [organization] have knowledge of the capacity of [target population(s)] to effectively engage in policy dialogue, including their needs, interests, and level of technical understanding. | 0 | 1 | 2 3 4 |
| 84. Key staff at [organization] are able to negotiate effectively and problem solve; to raise difficult issues with a view to a positive resolution. | 0 | 1 | 2 3 4 |
| 85. [organization] strengthens the capacity of [target population(s)] and their advocates to negotiate effectively and problem solve; to raise difficult issues with a view to a positive resolution. | 0 | 1 | 2 3 4 |
| 86. [organization] conducts outreach with [target population(s)] and their advocates to heighten awareness of policy issues, keep them informed about policy dialogue activities, and elicit their inputs. | 0 | 1 | 2 3 4 |
| 87. [organization] strengthens the capacity of [target population(s)] and their advocates to engage in dialogue activities with stakeholders of different types and at different levels (e.g., grassroots, community, regional, national). | 0 | 1 | 2 3 4 |

| | |
|--|---------------|
| 88. [organization] is open to discussing and engaging in a dialogue of multiple policy alternatives as well as analyzing alternative policy options. | 0 2 3 4 |
| 89. [organization] strengthens the capacity of [target population(s)] and their advocates to discuss and engage in a dialogue of multiple policy alternatives as well as analyze alternative policy options. | 0 2 3 4 |

Capacity Scaling

(Allow approximately 45 minutes.)

Group consensus assessment—Where does [organization] fit on the following scales?

Indicator 7—Leveraging of Networks and Coalitions

Does [organization] leverage networks and coalitions or support the capacity to leverage networks and coalitions to further advocacy objectives?

| | 1 | 2 | 3 | 4 |
|---|---|---|---|--|
| 7 | <p>Organization works in isolation. They have no knowledge of the advocacy strategies or work of other organizations.</p> <p>(MSH 2011)</p> | <p>Organization has good knowledge of the advocacy strategies and work of other organizations in the local area.</p> <p>Organization consults with other organizations when planning advocacy programs to coordinate strategies.</p> <p>There has been at least one instance of collaboration in and advocacy effort with a partner in the last two years.</p> | <p>Organization has good knowledge of the advocacy strategies and work of other organizations in the local area and some knowledge of the advocacy strategies and work of organizations at other levels.</p> <p>Organization consults with other organizations when planning advocacy programs to coordinate strategies.</p> <p>There is at least one ongoing advocacy effort being conducted jointly with other partners/stakeholders.</p> <p>Organization has some contact with other institutes/organizations networks.</p> | <p>Organization has good knowledge of the advocacy strategies and work of other organizations in the local area and at other levels.</p> <p>Organization consults extensively when planning advocacy activities to ensure coordinated strategies.</p> <p>Organization is implementing more than one advocacy activity in partnership with other organizations/institutions and makes referrals to other organizations.</p> <p>Organization is active in agency and institutional networks.</p> |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to leverage networks and coalitions. | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to support subgrantees or other external organizations in leveraging networks and coalitions. | | | |

Indicator 8—Engaging Target Populations in Advocacy and Monitoring

Can [organization] identify or support identification of opportunities and mechanisms for engaging [target population(s)] and their advocates in advocacy and monitoring for high-quality [service(s)] services?

| | 1 | 2 | 3 | 4 |
|---|--|---|--|--|
| 8 | Organization does not engage targeted populations in advocacy and monitoring efforts to improve the quality of HIV-related services. | Organization engages targeted populations in monitoring the quality of HIV-related services. | Organization engages targeted populations in monitoring services and advocating for improvement in the quality of HIV-related services. | Organization engages targeted populations in monitoring and advocating for improved quality of services and supports mechanisms to systematize this engagement. |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to engage [target population(s)] and their advocates in advocacy and monitoring for high-quality [service(s)] services. | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to support subgrantees or other external organizations in engaging [target population(s)] and their advocates in advocacy and monitoring for high-quality [service(s)] services. | | | |

Indicator 9—Use of Citizen-Generated Data

Does [organization] integrate or support the capacity to integrate citizen-generated data into advocacy materials?

| | 1 | 2 | 3 | 4 |
|---|---|---|---|---|
| 9 | Organization advocacy materials and activities do not incorporate citizen-generated data. | Organization's information products are clear and effective at communicating citizen-generated data from targeted populations. | Organization provides clear citizen-generated data that are accessible to diverse technical, nontechnical, and bureaucratic audiences. | Organization provides clear citizen-generated data and assess effectiveness of communicating this data to improving HIV-related services uptake by targeted populations. |
| | | | | |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe [organization]'s capacity to use citizen-generated data in advocacy materials. | | | |
| | Place [organization] along spectrum to describe [organization]'s capacity to support subgrantees or other external organizations in their use of citizen-generated data in advocacy materials. | | | |

Technical Area—Monitoring and Evaluation

(Allow approximately 45 minutes.)

Technical Area: Monitoring and Evaluation

Definition:

Monitoring and evaluation are activities that cut across all aspects of the organization. Routine data generated by monitoring policy and program implementation, evaluations that assess the contribution of policies and programs to health outcomes, and the cyclical practice of applying new information to strengthen intervention designs are important to advancing program design, health policy, governance, and social participation.

Performance Ideal:

Strong capacity to conduct M&E means implementing a high-quality, integrated, and systematic means of collecting, analyzing, and using program data throughout the program cycle. Indicative of this capacity, organizations and individuals demand high-quality data to make evidence-based decisions to design programs. Programs are developed with SMART (specific, measurable, achievable, relevant, and time-bound) objectives and related indicators to measure progress. Program operations include routine data collection systems to track program performance (monitoring) and evaluative studies to gauge the effectiveness of the intervention (evaluation). Individuals systematically analyze and review available data for quality, relevance to program implementation, and information gaps. Finally, they share findings from the intervention and use those data in conjunction with external data sources (e.g., population surveys, service delivery statistics) to further improve their program design.

Discussion Questions:

- Is there a documented M&E plan that includes process (output) and outcome indicators, data collection tools and schedule, quality review, and methods for sharing and using data focused on advocacy and policy activities?
- Does the organization use indicators for tracking policy implementation?
- Are M&E data focused on advocacy and policy activities collected by trained staff using standardized tools on a regular basis?
- Is someone responsible for data quality review?
- Are M&E policy and advocacy findings reported on and shared with staff and appropriate stakeholders, including the community?
- Does the organization use lessons learned to adapt and apply M&E methods and frameworks to new policy issues and circumstances?
- Does the organization provide M&E (training/technical assistance/mentoring) related to policy/advocacy issues to other organizations? (Choose as appropriate.)

| Indicator Statements: | DK | Strongly Disagree | Strongly Agree |
|--|----|-------------------|----------------|
| 90. The senior management at [organization] emphasizes the importance of M&E to assess the quality of policy actions and inform policy strategies. | 0 | 1 | 2 3 4 |
| 91. Key staff at [organization] have the skills and knowledge to design and implement the evaluation of policy actions. | 0 | 1 | 2 3 4 |
| 92. [organization] strengthens the capacity of [target population(s)] and their advocates to design and implement evaluation of policy actions. | 0 | 1 | 2 3 4 |
| 93. [organization] has adequate staffing for M&E, in terms of numbers, competence, and responsibility. | 0 | 1 | 2 3 4 |
| 94. [organization] has systems in place to collect, analyze, and synthesize data, about their policy activities. | 0 | 1 | 2 3 4 |

| | |
|--|-------------------|
| 95. [organization] strengthens the capacity of [target population(s)] and their advocates to collect, analyze, and synthesize data about their policy activities. | 0 1 2 3 4 |
| 96. [organization] designates staff opportunities to keep abreast of global best practices related to M&E of advocacy and policy activities. | 0 1 2 3 4 |
| 97. [organization] produces public annual or semi-annual reports that reflect the organization's progress toward achieving stated policy goals and objectives. | 0 1 2 3 4 |
| 98. [organization] allocates financial resources to enable M&E of policy and advocacy activities. | 0 1 2 3 4 |
| 99. [organization] uses effective indicators and methods to monitor and evaluate policy activities. | 0 1 2 3 4 |
| 100. [organization] uses the outcomes of M&E to contribute to and inform future policy and advocacy activities. | 0 1 2 3 4 |
| 101. [organization] strengthens the capacity of [target population(s)] and their advocates to use the outcomes of M&E to contribute to and inform future policy and advocacy activities. | 0 1 2 3 4 |

Capacity Scaling

Group consensus assessment: Where does [organization] fit on the following scales?

Based on your understanding, please rank the organization’s capacity on the following scale.
Indicator 13—Management Systems: Evaluation

Does [organization] have or support key management systems (financial, IT, procurement, administrative, evaluation)?

| | 1 | 2 | 3 | 4 |
|-----------------|---|---|---|--|
| 13 D | The organization has no M&E plan focused on advocacy programming; has not identified key process and outcome indicators; and lacks capacity, tools, data collection system, or processes to analyze and report on its programs, activities, and impact as defined in the workplan. There is no process for sharing lessons learned. | The organization has a basic M&E plan focused on advocacy programming. Systems and trained individuals are in place to collect information on project activities, including process and outcome indicators, but data are not regularly collected, reported, or shared with relevant stakeholders. There is a basic process for sharing lessons learned. | The organization has a strong M&E plan focused on advocacy programming. Systems and trained individuals are in place to collect, analyze, and report on activities, processes, and outcome indicators. Most data are available and up to date, but are not consistently shared with relevant stakeholders. There is a good process for sharing lessons learned. | The organization has a strong M&E plan focused on advocacy programming. Data on program activities are available, up to date, and regularly used for follow-up planning and adjustments. Progress on stated targets is systematically tracked, reported, and shared with relevant stakeholders including policy makers and other advocates. There is a strong process for sharing and incorporating lessons learned, both externally and internally. |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to monitor and evaluate advocacy activities. | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to support subgrantees or other external organizations in monitoring and evaluating their advocacy activities. | | | |

Optional Technical Area—Capacity Development

(Allow approximately 45 minutes.)

Optional Area: Capacity Development

Description:

An organization with internal capacity to strengthen or develop technical or institutional capacities of other organizations has the staff, curricula, and resources to assess, design, deliver, and evaluate a range of capacity development interventions. Its capacity development work is grounded in proven and current adult learning concepts, models, and theories and is capable of blending classroom, computer, and distance learning with other relevant approaches such as mentoring/coaching, twinning/peer exchange, technical assistance, etc. It is recognized and respected nationally and possibly regionally as a provider of high-quality capacity development. Through qualitative and quantitative evaluation, it measures stated capacity development objectives and outcomes.

Discussion Questions:

- What do you see as your greatest strength as a capacity development organization? Challenges?
- What would you like to be known for in terms of your capacity development expertise?
- Who do you view as your clients—now and in the future?
- Who in the organization currently leads or has the potential to lead capacity development efforts?
- Do you need additional staff or consultant resources to achieve your capacity development goals?
- What systems and processes do you currently have in place that can support your capacity development goals?
- What systems and processes do you need in order to achieve your capacity development goals?

Indicator Statements:

| | DK | Strongly Disagree | Strongly Agree |
|--|----|-------------------|----------------|
| I02. [organization] has articulated its long-term commitment to capacity building as part of its mandate and vision. | 0 | 1 | 2 3 4 |
| I03. [organization] has technical resources and expertise to implement the following capacity development interventions with external organizations: | | | |
| I04. Assessment of external organization capacity | 0 | 1 | 2 3 4 |
| I05. Establishing capacity benchmarks | 0 | 1 | 2 3 4 |
| I06. Curriculum development | 0 | 1 | 2 3 4 |
| I07. Classroom training | 0 | 1 | 2 3 4 |
| I08. On-the-job training | 0 | 1 | 2 3 4 |
| I09. Mentorship/coaching | 0 | 1 | 2 3 4 |
| I10. Twinning exchange visits | 0 | 1 | 2 3 4 |
| I11. Technical assistance (to strengthen or institute systems, structures, models, etc.) | 0 | 1 | 2 3 4 |
| I12. Brokering relationships | 0 | 1 | 2 3 4 |
| I13. Facilitating strategic processes | 0 | 1 | 2 3 4 |
| I14. Web-based instruction | 0 | 1 | 2 3 4 |

| | |
|---|-----------|
| I 15. Computer-based training | 0 2 3 4 |
| I 16. Training-of-trainers | 0 2 3 4 |
| I 17. [organization] is recognized for its capacity development expertise in policy and advocacy. | 0 2 3 4 |
| I 18. [organization] is recognized for its capacity development expertise in administrative and operational functions. | 0 2 3 4 |
| I 19. [organization] publishes reports, articles, and tools to present research, document lessons learned, and/or share innovations and trends in relevant capacity development initiatives. | 0 2 3 4 |
| I 20. [organization] has relationships with other capacity development organizations (training institutes, universities, research centers, and private consulting firms) for exchange of staff, technical expertise, materials, resources, etc. | 0 2 3 4 |
| I 21. [organization] has technical expertise and tools to monitor and evaluate its capacity development efforts (i.e., the progress and performance of its members). | 0 2 3 4 |

Organizational Area—Governance

Technical Area: Governance

Definition:

Governance consists of the systems and processes concerned with ensuring the overall direction, effectiveness, supervision, and accountability of an organization. Responsibilities often include defining expectations for the organization, setting and maintaining vision, mission, and values; developing strategy (e.g., a long-term strategic plan); and creating and/or approving the organization's policies. Governing bodies also grant power through selecting, managing, and supporting the organization's chief executive. Last, the governing body also verifies performance of the organization through ensuring compliance with the governing document (e.g., charter); ensuring accountability and compliance with laws and regulations; and maintaining proper fiscal oversight.

Performance Ideal:

There is a clear written vision and mission statement widely known by staff, who refer to it regularly, update it regularly, and are able to explain it. There is an up-to-date strategic plan with explicit links to the vision and mission, which outlines the types of programs to be implemented. The plan was developed in a participatory manner, in consultation with board members and staff at various levels, reflects beneficiaries' needs, and is continuously monitored.

The organization has a governing body selected from experts and representatives of target populations in the community and beyond. Members represent the wide range of knowledge and expertise (e.g., finance, tax, legal, M&E, beneficiary program delivery, and fundraising) required to lead the organization and agree to a set time to serve on the board. As its mandate, the governing body reviews the organization's implementation and performance, reviews financial and activity reports quarterly, approves the annual budget and workplan, and assesses the performance of the most senior leadership and also its own function as a governing body.

Indicator Statements:

Please note: For the statements below, the term “governing body” is meant to identify the group of individuals (sometimes called a board, steering committee, executive committee, etc.) with the responsibility for defining and overseeing the vision, mission, and values of an organization.

| | DK | Strongly Disagree | Strongly Agree |
|--|----|-------------------|----------------|
| I 22. A governing body provides oversight and ensures accountability for [organization]. | 0 | 1 2 3 4 | |
| I 23. [organization]'s mission and values reflect a commitment to promoting increased access to health services among [target population(s)]. | 0 | 1 2 3 4 | |
| I 24. [organization] strengthens the capacity of [target population(s)] and their advocates to develop guiding mission and value statements. | 0 | 1 2 3 4 | |
| I 25. [organization]'s governing body and senior leadership actively contribute to or support its policy and advocacy efforts. | 0 | 1 2 3 4 | |
| I 26. The governing body is comprised of some people who have relevant policy and advocacy skills to provide oversight and advice to the executive staff. | 0 | 1 2 3 4 | |
| I 27. The composition of the governing body includes representation from [target population(s)] or their advocates. | 0 | 1 2 3 4 | |
| I 28. The governing body has mechanisms in place to ensure that the philosophy of [organization] is implemented. | 0 | 1 2 3 4 | |
| I 29. [organization] strengthens the capacity of [target population(s)] and their advocates to develop representative and effective governing body structures. | 0 | 1 2 3 4 | |

| | |
|--|-------------------|
| I30. Members of the governing body strategically promote the [organization]'s advocacy positions. | 0 1 2 3 4 |
| I31. The governing body defines overall policies that help guide the work of [organization]. | 0 1 2 3 4 |
| I32. The governing body is actively involved in defining the fundraising strategy of [organization]. | 0 1 2 3 4 |
| I33. The executive team of [organization] is accountable to the governing body. | 0 1 2 3 4 |
| I34. There is a clearly defined time limit to governing body membership, which does not exceed three years. | 0 1 2 3 4 |
| I35. The governing body meets regularly in accordance with [organization]'s statutes. | 0 1 2 3 4 |
| I36. The governing body participates in the strategic planning process of [organization]. | 0 1 2 3 4 |
| I37. The governing body reviews [organization]'s implementation and performance, reviews financial and activity reports quarterly, approves the annual budget and workplan, and assesses the performance of the most senior leadership as well as its own function as a board. | 0 1 2 3 4 |

Capacity Scaling

Group consensus assessment: Where does [organization] fit on the following scales?

Based on your understanding, please rank the organization’s capacity on the following scales.

Indicator 14—Mission and Vision, Organizational Structure, Governance Body

Does [organization] have or support governance structures that provide checks and balance?

| | 1 | 2 | 3 | 4 |
|-----------------|---|--|--|--|
| I4 A | The organization does not have a clearly stated vision of what it is working toward (desired end state), or a clear mission statement of what it does (why it exists). (USAID 2012) | The vision and mission provide a moderately clear and specific understanding of what the organization is working toward and what it does, but they are not widely held and/or rarely used to direct actions or set priorities. | The vision and mission are clear and specific statements of what the organization is working toward and what it does, are well known to most but not all staff and board members, and are sometimes used to direct actions and set priorities. | The vision and mission provide a clear, specific, and forceful understanding of what the organization is working toward and what it does; are broadly held by all staff and board members; and consistently used to direct actions and set priorities. |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe [organization]’s governing statements and their use in programming and priority setting. | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to support development of governing statements of subgrantees or other external organizations and their use in programming and priority setting. | | | |

Discussion Questions—Governance:

- Are vision and mission statements understood and relevant to the organization’s current purpose?
- Is the vision or mission statement posted where staff and/or visitors see it regularly?
- Is the statement(s) used in organizational materials (i.e., staff handbooks, orientation materials)?
- Does the organization review the vision and mission statements in conjunction with strategic planning?
- Does the vision and mission statement align with policy and advocacy activities the organization may engage?

| | 1 | 2 | 3 | 4 |
|-----------------|---|---|---|---|
| I4 B | The organization has no formal structure, and departments and/or key functions/responsibilities are not clearly defined. (USAID 2012) | The organization has a basic organizational structure with adequate definitions of responsibilities and/or key lines of responsibility. | The organization has an organizational structure that is well designed and relevant to its mission/goals. Roles and responsibilities of departments and/or functions are fairly well defined and appropriate. | The organization has an organizational structure that is well designed, functional, and relevant to the mission/goals. Roles and responsibilities of departments and/or key functions are clearly defined, appropriate, and known by all. |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe [organization]’s organizational structure. | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to support organizational structural design of subgrantees or other external organizations. | | | |

Discussion Questions—Organizational and Reporting Structure:

- Is the organizational and reporting structure clearly documented and disseminated?
- Please describe the functions of the departments and how departments communicate with each other.
- Please describe how the structure supports the organization’s mission.

| | 1 | 2 | 3 | 4 |
|-----------------|---|--|--|--|
| I4 C | Board/governing bodies exist on paper, but are not functional. Members have little relevant experience or are not active. Meetings are infrequent, are poorly attended, and/or are undocumented. The board does not understand its role. A few people make most of the decisions; conflicts of interest exist. There is no process for electing/appointing officers and/or term limits are not appropriate/respected. (USAID 2012) | The board (or governing body) is somewhat active and has occasional meetings. Members are somewhat diverse and representative but lack sufficient qualifications or knowledge to lead the organization. Roles of staff vs. board are not clear or not implemented. Some conflicts of interest (members of board are also staff). There is no process for electing/appointing officers, or the process is not appropriate or respected. | The board (or governing body) is active and committed to the organization. They are focused on policy/strategic decisions. Members are diverse and representative; all or most have relevant experience; both genders are represented. Meetings are well planned, documented, regular, and well attended. The roles of the board (governance) and of staff (implementation) are clear and respected. Board term limits are defined and reasonable. | The board is highly active and committed, with a clear role and responsibilities for policy and strategic decisions. Members are diverse and representative; all members have relevant experience and qualifications to govern the organization; both genders are well represented. Meetings are well planned, documented, and regular, with excellent attendance. Board term limits are defined and reasonable. Officers are elected/appointed according to board procedures. |
| | → Increasing and cumulative levels of capacity → | | | |

| | | |
|--|---|--|
| | Place [organization] along spectrum to describe the function of [organization]’s governing body. | |
| | Place [organization] along spectrum to describe [organization]’s capacity to support the functioning of subgrantees or other external organizations governing bodies. | |

Discussion Questions—Board/Governing Bodies:

- Discuss board membership (e.g., the number of members) and members’ experience.
- Are there term limits for board members (e.g., two years)?
- Is there a system for electing board members? Describe it.
- Are there regular board meetings? How often are they held?
- Are the board meetings well attended? What percentage of members attends each meeting?
- Are board meetings well documented? Are minutes circulated and referred to?
- Does the board have clearly defined terms of reference that detail key functions?
- Are board members involved in strategic planning and developing a financing strategy for the organization? Describe their involvement.
- Are board members involved in decision making related to strategic direction and policies (including finance/administration and programming)?
- Do board members review and approve the organization’s annual budget and annual financial statements?
- Is there a separation of board and executive roles? Is this written and adhered to?
- Is there a succession plan for board members whose term may be interrupted?
- In the past year, have any board members been involved in any policy and/or advocacy activities generated by the organization? Describe their involvement.

Indicator 11—Strategic Planning

Does [organization] have or support strategies to guide strategic decision making?

| | 1 | 2 | 3 | 4 |
|----|---|--|---|--|
| 11 | No strategic plan exists for the organization. (USAID 2012) | The organization has a strategic plan that generally reflects its vision, mission, and values; but it is not based on an analysis of its strengths and weaknesses, external environment, and client needs; does not include priority areas, measurable objectives, clear strategies; or is not used for management decisions or operational planning; and is not regularly reviewed. | The organization has a strategic plan that reflects its vision, mission, and values; is based on a review of strengths and weaknesses, the external environment, and client needs; states priority areas, measurable objectives, and clear strategies; but it should be more regularly reviewed and referred to for management decisions and/or operational planning. | The organization has a strategic plan that reflects its vision, mission, and values; is based on a review of strengths and weaknesses, the external environment, and client needs; states priority areas and measurable objectives; is referred to for management decisions and operational planning; and is regularly reviewed. |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe [organization]’s strategic decision making. | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to support subgrantees’ or other external organizations’ strategic decision making. | | | |

Discussion Questions—Strategic Planning:

- Does the organization have a strategic plan? When was it developed and for what period of time?
- Did the strategic planning include stakeholders?
- Does the strategic plan outline the organization’s mission, niche, competitors, and partners?
- Does the strategic plan include priority areas, measurable objectives, and clear strategies?
- Is the strategic plan used to guide work planning and staffing decisions?
- Does the organization have a mechanism for incorporating lessons learned and best practices into the planning process?
- Does the plan include a process for regular reviews?
- Does the plan identify resource needs and costs?

Indicator 12— Organizational Leadership

Does [organization] have leadership that can provide direction and align actions with strategy?

| | 1 | 2 | 3 | 4 |
|----|---|---|---|--|
| 12 | Organizational leadership has some understanding of respective roles and responsibilities vis à vis the governing body regarding strategic vision of the organization; some activities align with the strategic plan. Management decisions are not transparent and are generally made without staff input. | Organizational leadership has a clear understanding of respective roles and responsibilities and promotes staff participation in organizational planning. Staff input is not taken into account for decisions, and most decisions are not transparent. Culture is not open or supportive of staff. | Organizational leadership has a clear understanding of respective roles and responsibilities and promotes staff participation in organizational planning. Most decisions are transparent and take into account staff input. | Organizational leadership has a clear understanding of respective roles and responsibilities and promotes staff participation in organizational planning. Leaders create a culture of openness and transparency. Staff voices are taken into account for decision making. The organization's leadership inspires staff through its vision. |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe [organization]'s strategic decision making. | | | |
| | Place [organization] along spectrum to describe [organization]'s capacity to support subgrantees or other external organizations strategic in strategic decision making. | | | |

Discussion Questions—Leadership:

- Does the organization have a process for reviewing and updating the strategic or operational plans to address or prepare for government, funding, or donor changes (as applicable)?
- Does the organization have a process for monitoring whether revisions are implemented and lead to improvements?
- Does the organization encourage staff to participate in decision-making forums (staff meetings, strategic planning, visioning)?
- Does the organization have a means for gauging staff comfort with how change is addressed?
- Are multiple staff members (technical, administrative, financial) involved in relevant decision-making processes?

Organizational Area—Resource Mobilization

Technical Area: Resource Mobilization

Definition:

Resource mobilization includes identifying and leveraging different types of support for organizational financial sustainability and growth. Within an organization, the resource mobilization system includes the established proposal development processes, a clearly articulated organizational mission and vision, staff expertise within the organization's core technical areas, and financial controls and procedures to analyze and interpret financial data.

Performance Ideal:

High capacity for resource mobilization is characterized by a clear understanding of the organization's own mission and vision statement and a diversified funding base to support this long-term vision. The organization will have active engagement of the governing body, especially in the overall direction of the organization and mobilization of financial, human, and other resources. The organization is widely known within the community for its work and viewed as a constructive presence. Staff maintain linkages to other relevant institutions and are active in agency and institutional networks. The senior leadership of the organization implements several programs in partnership with other organizations. Senior staff have developed and implemented income-generating activities to support the diverse funding base for the organization. Additionally, the governance and senior leadership have a fundraising strategy in place and actively work to meet outlined goals in the strategy.

Discussion Questions:

- Has the organization designated a person to carry out the resource mobilization activities? Does the person have the required skills and qualifications for this task?
- Does the organization know the resources it needs based on an analysis of its programs or through reviewing strategic planning resource needs?
- Does the organization have sufficient funds to support activities for the next year? Three years?
- Have any resources been identified for policy and advocacy activities for the next year? Three years?
- Does the organization receive support from more than one donor? Who are the donors?
- Have potential resource providers (sources) been identified?
- Is there a development plan (fundraising/proposal writing) for obtaining additional resources?
- Is there a communication and networking strategy to attract resources?
- What is the minimum amount of money that will attract the organization to compete for a proposal?
- How many proposals has the organization submitted in the past year?

Indicator Statements:

| | DK | Strongly Disagree | Strongly Agree |
|--|----|-------------------|----------------|
| I38. [organization]'s leadership regularly scans the external environment for social, political, and environmental trends that impact its work. | 0 | 1 | 2 3 4 |
| I39. The governance and leadership of [organization] are able to document and describe policy and advocacy successes. | 0 | 1 | 2 3 4 |
| I40. [organization]'s senior leadership and governing body are effective at mobilizing financial and other resources to fund and sustain its activities. | 0 | 1 | 2 3 4 |
| I41. Senior leadership allocates sufficient resources (time, money, and staff) to support its policy and advocacy efforts. | 0 | 1 | 2 3 4 |
| I42. [organization] has a diversified funding base and is not overly reliant on any one funding source. | 0 | 1 | 2 3 4 |

| | |
|---|---------------|
| I43. Senior leadership at [organization] are effective at mobilizing financial and other resources to fund and sustain its policy and advocacy activities. | 0 2 3 4 |
| I44. Senior leadership and the governing body at [organization] have identified income-generating activities as a means of limiting its dependence on donors. | 0 2 3 4 |
| I45. [organization] has a clearly defined strategy to raise funds for policy and advocacy efforts. | 0 2 3 4 |
| I46. Staff at [organization] have the capacity to successfully implement their resource mobilization strategy. | 0 2 3 4 |
| I47. Staff at [organization] have the capacity to write successful funding proposals. | 0 2 3 4 |
| I48. Senior leadership and the governance of [organization] have a clear understanding of the role of [organization] within the policy and advocacy arena. | 0 2 3 4 |
| I49. [organization] is well respected by its current and potential donors. | 0 2 3 4 |

Capacity Scaling

Group consensus assessment: Where does [organization] fit on the following scales?

Based on your understanding, please rank the organization’s capacity on the following scale.

Indicator 10—Resource Mobilization

Does [organization] have or support reliable, diversified funding bases?

| | 1 | 2 | 3 | 4 |
|----|--|---|---|---|
| 10 | The organization has not estimated its resource needs and has taken no steps to identify additional local, national, or international resources or opportunities to support its programs and activities. Funding comes from one source. (USAID 2012) | The organization has taken preliminary steps to estimate resource needs and develop a resource mobilization plan , but it is not being implemented. Some opportunities have been identified, but most funding still comes from one source. | The organization has a resource mobilization plan, knows its resource needs, and has identified potential opportunities , although the plan is not fully implemented. It has fairly strong capacities for fundraising or proposal writing. Funding is diversified among multiple sources. | The organization has multiple donors , with no donor providing the majority of funds. The organization has a strong resource mobilization plan, knows its resource needs, and strong fundraising and proposal-writing capacities. It has successfully bid for resources from one or more sources. |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe [organization]’s resource mobilization capacity. | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to support subgrantees’ or other external organizations’ resource mobilization strategies. | | | |

Organizational Area—Management Systems

| Technical Area: Management Systems | | | | |
|--|----|-------------------|----------------|-----|
| <p>Definition:</p> <p>Management systems support the organization’s ability to maintain a satisfied and skilled workforce, manage operations and staff time, and manage the program and overall organizational finances. Management systems can focus on strategic initiatives such as management and recruitment, labor relations, succession planning, procurement, financial management, and administrative systems. At the macro level, management systems provide the organizational structure, such as human resources, administrative systems, and financial systems. In particular, human resources are in charge of leadership and culture, ensuring compliance with employment and labor laws and overseeing health, safety, and security issues within an organization. Administrative systems such as fixed-asset management, travel, and IT allow for programs to operate more efficiently. Financial management systems provide internal controls, policies, and procedures to ensure compliance with funding regulations and auditing functions to ensure fiscal health. The combination of these systems provides a management structure to support the functioning of the organization operations.</p> <p>Performance Ideal:</p> <p>Strong management systems are characterized by formal systems and known processes for human resources, procurement, financial management, and administrative systems. There are policies and systems in place to recruit, hire, and effectively manage staff; encourage strong performance; identify and fill staffing gaps with appropriate persons; and create a supportive, learning culture that is supportive of staff retention and growth. Financial systems are in place and policies are documented to support financial reporting, budgeting, and projecting. Appropriate financial controls are in place to ensure segregation of duties. Procurement systems are documented, are compliant with donor regulations, and allow for transparent and streamlined procurement for programming. There are policies and systems in place to manage and track fixed assets, support the IT needs of the organization, and ensure the security of staff and offices.</p> | | | | |
| Indicator Statements: | DK | Strongly Disagree | Strongly Agree | |
| I 50. The makeup of the staff and volunteer team includes representation from [target population(s)] or their advocates. | 0 | 1 | 2 | 3 4 |
| I 51. [organization] has the appropriate staffing to manage the policy and advocacy activities. | 0 | 1 | 2 | 3 4 |
| I 52. Responsibility for policy and advocacy activities is included in the job descriptions of designated staff. | 0 | 1 | 2 | 3 4 |
| I 53. [organization] provides designated staff with opportunities to keep abreast of global and locally relevant tools and best practices in policy and advocacy. | 0 | 1 | 2 | 3 4 |
| I 54. [organization] maintains job descriptions with relevant details—title, job duties/responsibilities, reporting requirements, supervisory responsibilities (if any), qualifications, and skills required—for all positions in the organization, including those for volunteers and/or interns. | 0 | 1 | 2 | 3 4 |
| I 55. There are transparent, written recruitment guidelines that include announcing/advertising, collecting CVs/short-listing, interviewing candidates, checking references and employment history, and making offers and employment agreements. | 0 | 1 | 2 | 3 4 |
| I 56. The staff at [organization] document positions needed and keep data on current vacancies and staff turnover. | 0 | 1 | 2 | 3 4 |
| I 57. [organization] conducts and documents exit interviews and identifies/analyzes reasons for staff departures. | 0 | 1 | 2 | 3 4 |

| | |
|---|-------------------|
| 158. There are documented personnel policies that include guidelines on work schedules, employee compensation (salary) and benefits, leave, performance reviews, grievances and disciplinary procedures, ending employment (resignation/termination), administrative procedures and employee conduct, and an ethics policy and awareness program. | 0 1 2 3 4 |
| 159. [organization] strengthens the capacity of [target population(s)] and their advocates to document and review personnel policies. | 0 1 2 3 4 |
| 160. There are health-related workplace policies, such as no alcohol, no smoking, HIV anti-discrimination-related policies, etc. | 0 1 2 3 4 |
| 161. Staff salaries and employee benefits conform to national labor laws. | 0 1 2 3 4 |
| 162. Pay increases and performance reviews are coordinated. | 0 1 2 3 4 |
| 163. Performance assessments include setting objectives, listing responsibilities/tasks for the review period, assessing performance on past activities, and reviewing supervision and professional development and are done for all staff and conducted regularly (at least yearly). | 0 1 2 3 4 |
| 164. [organization] strengthens the capacity of [target population(s)] and their advocates to assess staff performance. | 0 1 2 3 4 |
| 165. Policy and advocacy skills and achievements are assessed within the staff appraisal system for designated staff. | 0 1 2 3 4 |
| 166. There is task-specific training or orientation seminars provided to volunteers and interns. | 0 1 2 3 4 |
| 167. [organization] actively takes measures to prevent and address stigma and discrimination within its own structures including training of new staff in gender and stigma and discrimination awareness and sensitization. | 0 1 2 3 4 |
| 168. [organization] strengthens the capacity of [target population(s)] and their advocates to actively take measures to prevent and address stigma and discrimination within their own structures. | 0 1 2 3 4 |
| 169. The organization has complete and appropriate documented financial control procedures, updated as necessary, which are known and understood by staff and which are consistently adhered to, reviewed, and updated. | 0 1 2 3 4 |
| 170. The organization's financial management policies and procedures support accountability and transparency. | 0 1 2 3 4 |
| 171. Financial management duties are appropriately segregated so that no one transaction is handled by one finance team member from start to completion. (MSH 2013). | 0 1 2 3 4 |
| 172. [organization] strengthens the capacity of [target population(s)] and their advocates to document and update financial control procedures. | 0 1 2 3 4 |
| 173. Procurement policies clearly document procurement responsibilities, procurement planning, competition, exceptions, award, delivery and inspection, documentation, and inventory control and management. | 0 1 2 3 4 |
| 174. [organization] strengthens the capacity of [target population(s)] and their advocates to document and update procurement procedures. | 0 1 2 3 4 |
| 175. The organization has policies to guide staff in the areas of travel, fixed assets, IT, file management, meeting and workshop planning, and security and safety. | 0 1 2 3 4 |
| 176. Staff are trained and regularly adhere to policies related to travel, fixed assets, IT, file management, meeting and workshop planning, and security and safety. | 0 1 2 3 4 |

Discussion Questions—Management:

- Tell me about the process for recruiting a new staff member and the process when someone leaves the organization.
- What are some of the technical qualifications of senior policy and advocacy staff within the organization?
- Does the current staffing structure adequately meet the needs and the programming of the organization? Particularly, the policy and advocacy needs of the organization?
- Tell me about the organizational policy manual and the policies included.
- What is the performance assessment process and how are staff and supervisor inputs gathered for the review?

Capacity Scaling

Group consensus assessment: Where does [organization] fit on the following scales?

Based on your understanding, please rank the organization’s capacity on the following capacity scales.

Indicator 13—Management Systems

Does [organization] have or support key management systems (financial, procurement, administrative) in place and functioning?

| | 1 | 2 | 3 | 4 |
|--|--|---|---|--|
| I3 A | The organization has no documented administrative policies or procedures. Information systems are insufficient to manage its operations and/or programs. (USAID 2012) | The organization has some documented administrative policies and procedures but they are not complete or appropriate. Information systems support operations and programs at basic levels of functionality. | The organization has most or all administrative policies and procedures, and they are documented and appropriate. They are mostly known by staff and usually adhered to. Information systems are sufficient to support operations and programs at a good level of functionality without major problems. | The organization has complete and appropriate documented administrative policies and procedures, updated as necessary, known and understood by staff, and consistently adhered to. Information systems support operations and programs at a high level of functionality, and systems are in place for sustaining them. |
| → Increasing and cumulative levels of capacity → | | | | |
| Place [organization] along spectrum to describe [organization]’s administrative policies and procedures. | | | | |
| Place [organization] along spectrum to describe [organization]’s capacity to support subgrantees’ or other external organizations’ administrative policies and procedures. | | | | |

Discussion Questions—Operational Policies and Procedures:

- Are there written operational procedures? Are they approved?
- Do the documented procedures adequately support the operational needs of the organization (e.g., travel, procurement, fixed assets, IT, file management, meeting and workshop planning, security and safety)?
- Do the written operational policies/procedures address donor-specific rules and regulations, if applicable?
- Are the operational policies and procedures presented in a way that is easy for nonfinancial staff to understand and apply?
- Are staff oriented/trained in the procedures? How often? How is the orientation/training documented?
- Are the operational procedures formally reviewed/updated? How often? What is the process? Is it documented?
- Are copies of forms/templates incorporated in the manual and/or readily available?
- Are there systems to ensure compliance with operational procedures? Please describe. Have there been findings in external or internal audits related to noncompliance with operational procedures?

| | 1 | 2 | 3 | 4 |
|--|--|---|--|---|
| I3 B | The organization has no documented procurement policies or procedures (e.g., procurement plan, procurement manual, USG approvals). (USAID 2012) | The organization has some documented procurement policies and procedures (e.g., procurement plan, procurement manual, USG approvals), but they are not complete and/or appropriate. | The organization has most or all policies and procurement procedures (e.g., procurement plan, procurement manual, USG approvals), and they are generally well documented and appropriate. They are mostly known by staff and usually adhered to. | The organization has complete and appropriate documented procurement policies and procedures (e.g., procurement plan, procurement manual, USG approvals), updated as necessary, which are known and understood by staff, and which are consistently adhered to. |
| → Increasing and cumulative levels of capacity → | | | | |
| Place [organization] along spectrum to describe [organization]’s procurement policies and procedures. | | | | |
| Place [organization] along spectrum to describe [organization]’s capacity to support subgrantees’ or other external organizations’ procurement policies and procedures. | | | | |

Discussion Questions—Procurement:

- Are procurement policies and procedures documented, and if yes, where?
- Do the documented policies and procedures adequately support the needs of the organization (e.g., procurement responsibilities, procurement planning, competition, exceptions, award, delivery and inspection, documentation, inventory)?
- Are donor-specific procurement regulations addressed in the policies, if appropriate?
- Does the organization have a documented procurement plan that reflects organizational requirements? How often is it updated?

| Financial Systems | | | | |
|--------------------------|---|---|---|---|
| | 1 | 2 | 3 | 4 |
| I3 C | The organization has no documented financial management systems (e.g., budget tracking, annual budget, pipeline projections). (USAID 2012) | The organization has some documented financial management systems, but they are not complete and appropriate. | The organization has most or all financial management systems, and they are documented, appropriate, and adhered to. Some improvement could be made in disseminating them to all staff or adhering to them more consistently. | The organization has complete and appropriate documented financial management systems, updated as necessary, which are known and understood by staff and consistently adhered to. |
| | → Increasing and cumulative levels of capacity → | | | |
| | Place [organization] along spectrum to describe [organization]’s financial management processes. | | | |
| | Place [organization] along spectrum to describe [organization]’s capacity to support subgrantees’ or other external organizations’ financial management processes. | | | |

Discussion Questions—Financial Systems:

- Does the organization have a cash, accrual, or modified system? How is the system implemented?
- Does the organization use accounting software? If so, which system? If not, describe the manual system.
- Is there a chart of accounts (income and expenses, assets, and liabilities)? Does it address donor-specific requirements, if appropriate?
- Does the organization use another set of codes to assign transactions to a specific project/donor?
- Are all payments and receipts recorded in the organization’s bookkeeping system? How often are they recorded?
- Are field office expenses recorded on an advance-and-reconciliation basis in the system? Please explain.
- Is there a system for determining exchange rates? How are gains and losses recorded in the system?

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Annex 1. Technical Assistance Action Plan

LCI Country Action Planning Template

The purpose of the Local Capacity Initiative (LCI) is to strengthen sustainability of national HIV and AIDS responses through increased advocacy capacity of civil society organizations. Fourteen countries have been funded through direct assistance from Office of the Global AIDS Coordinator. Alongside direct funding, technical assistance will be provided by the Health Policy Project (administered by Futures Group) and the Advancing Partners & Communities Program (JSI prime with FHI 360 as a sub-partner).

Each organization funded through LCI will go through an organizational and advocacy/policy capacity assessment. The assessment includes a facilitated systems evaluation tool and a discussion with stakeholders. The results of the tool and stakeholder discussions will be presented back to the organization for its use and discussion. The organization and facilitators will then go through the action planning process to prioritize technical assistance needs, resources needed for technical assistance, responsibilities, and status.

The action plan will help prioritize and direct technical assistance during the life of the program. This document will be a living document that should be continually updated with the status of technical assistance activities. All desired technical assistance should be listed to discuss the potential resources available to meet the need. For each technical assistance activity, the organization, based on the findings of the assessment, should determine the priority level as high, medium, or low. Each activity should have a clearly stated outcome that links to the assessment findings and the organization's LCI workplan. A point person should be assigned to manage resources, provide updates on the status, and troubleshoot issues. Last, the status column should include information on the current implementation of the activity, challenges faced, and any anticipated changes to the end date. Once completed, the action plan can provide a "snapshot" of the technical assistance activity.

The plan will be developed through close collaboration between the organization and technical assistance provider and the U.S. Government LCI team. At the end of the action planning session, all parties should approve the plan by listing their name and organization at the bottom of the plan. The capacity assessment report should be attached to this plan, as a reference document. After the initial action plan has been completed, the organization should consider updating the action plan with the technical assistance provider as necessary and appropriate.

Organization Name:

Date of Plan Creation:

Activities to Support Capacity Development

| Capacity Need and Technical Area <i>Identified during assessment process</i> | Activity <i>What capacity-strengthening activities will be used?</i> | Expected Outcome <i>What is the end goal? How will we know the activity is complete?</i> | Responsible Person <i>Who manages this activity?</i> | Roles and Resources <i>What are the organization, TA provider, USG, and other stakeholder responsibilities?</i> | Proposed Timeframe <i>The anticipated timeframe for the activity</i> |
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Plan Developed By: Names and Organizations involved in the development of the plan.

Plan Reviewed By: Names and organizations who reviewed and provided feedback into the plan.

Attachments: Capacity Assessment Report.

Annex 2

NGO Partner Interview Instrument

Introduction:

We truly appreciate the time you are giving to conduct this interview. As you may be aware, [organization] has recently being awarded a grant funded by XXX through the Local Capacity Initiative (LCI) program, with the objective of XXX. The Advancing Partners & Communities Project (APC) or Health Policy Project (HPP) have been charged with providing technical assistance to [organization] to strengthen its capacity to do this work. For this reason, we are conducting a capacity-building assessment with [organization] that will serve as the basis to develop an action plan. To complement the findings and to identify specific strengths, challenges, and opportunities that [organization] can tap into to expand their advocacy work, we are conducting key informant interviews with a selected group of donors, partner CSOs, and government representatives.

1. How long has your organization been collaborating with [organization] and in which areas?

Probe for advocacy programs focused on policy change for HIV and AIDS, sexual and reproductive health (SRH) and family planning (FP) services, and work with young populations.

2. What is your current collaboration with [organization] (if any)?

Probe for specific funding the organization is currently giving to [organization]; specific TA support on advocacy, influencing policy making, accountability monitoring processes, and M&E.

3. What are the strengths that [organization] has in the areas of policy and advocacy based on your experience working with them?

Probe for [organization]'s capacity on the use of data to identify challenges, effective solutions, changes on policies, etc. What is their credibility with policymakers?

4. Do you see a role for [organization] to play in your overall policy and advocacy strategies, or for closer coordination between your programs and theirs?

5. What are the challenges [organization] has in the areas of policy and advocacy based on your experience working with them?

Probe for barriers to engage and influence policymakers (parliamentarians, health authorities, health care providers), particularly on the implementation of citizen monitoring actions using score cards), donors, and other NGOs.

6. Is your institution providing any technical assistance to [organization]? In which areas?

Probe for future technical assistance.

7. If you could prioritize the technical assistance support for [organization] around policy and advocacy, which three top areas you would focus on and why?

8. Do you have any resources, reports, or documents you would recommend that we review?

9. How can we collaborate/engage your organization to leverage the work [organization] will be doing with the funding they are receiving from LCI?

10. Additional comments?

Thank you again for the interview.



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