Activity Report: Capacity needs assessment report for organizati	ions
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implementing the Common Wealth Foundation

Districts under this program: Kampala, Wakiso, Mukono, Gulu, Lira, Iganga, Busia,

Tororo, Masaka, Mubende, Mityana, Sheema, Kanungu

and Kasese

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Background/introduction

According to the Global Monitoring Report 2013, Uganda was one of the countries in the Eastern African region that registered poorest health indicators with MDG 4, 5 & 6 lagging behind; e.g. 16 mothers die every day while giving birth, infant mortality is at 54 per 1,000 births, under 5 mortality is at 90 per 1000 live births, contraceptive prevalence rate is at 30%, unmet need of FP at 34% and a rise in HIV prevalence from 6.4% in 2009 to 7.3% in 2011 & eMTCT is below the target. This could be a reflection of declining health financing by government, which was at 8.7% in 2013/14 down from 2010/11 at 9.1% & below the Abuja Target of 15%. While the last two decades registered improved CSOs' engagement in decision making processes, their potential (especially groups of WLHIV) have been undermined by limited skills in planning, governance & accountability. Majority of these groups have limited mobilization skills & information to mobilize & mount effective advocacy campaigns to engage government & hold it accountable to live to its commitment of providing at least 15% of its annual budget towards the health sector.

Whereas there are CSOs willing and ready to engage government authorities accountable in the provision of quality health services, these CSOs either lack advocacy capacity or work in isolation among others. Such a situation does not allow advocacy CSOs to insert enough pressure on the government to deliver on its commitments. The International Community of Women Living with HIV Eastern Africa (ICWEA) is currently implementing a 3-year project titled "Partnership with Women Living with HIV in improving health service delivery and accountability" in Uganda with financial support from Common Wealth Foundation. The project is being implemented in close partnership with organizations of women living with HIV and other health advocacy CSOs in their respective districts.

Holding government and its related agencies accountable to its commitment and delivery of quality services requires strong and competent advocacy organizations/CSOs at all levels. For this reason, ICWEA conducted a capacity assessment for the CSOs involved in the implementation of the CWF funded project to assess the capabilities in a set of domains, identify and outstanding capacity gaps and work with the CSOs to devise means of improving on the identified gaps for better service delivery. The assessment focused on the following domains; management and governance capacity, technical capacity, financial capacity, reporting (M&E) capacity and advocacy capacity.

Objectives of the Assessment;

- 1. Assess the managerial, technical, financial, advocacy and reporting capacity of selected CSOs from 14 districts.
- 2. Work with the staff and management of the selected CSOs to develop action plans for closing any identified organizational development gaps

Below is the list of organizations per districts;

Name of the district	Organizations
1. Kampala	Makerere Women's Development Association
	Tusitukirewanu Women's Group
2. Wakiso	Together Against AIDSs Positive Association
	Kawempe Youth Development Association
3. Mukono	Sikyomu Development Organisation for PLHIV
	Kyetume Community Based Health Care
	Volset Foundation
4. Gulu	ACET Gulu (AIDS Care Education and Training – Gulu)
	Dyere – Tek
	GWED- Gulu (Gulu Women's Economic Development and
	Globalization
5. Busia	Busia Consortium
	Busiime Rural Development Association
	Busia Widows and Orphans Association
6. Iganga	Integrated Disabled Women Activities
	United Africa Orphans and Widows Foundation.
	Uganda Women and Youth Development Initiatives
7. Tororo	Sule Integrated Development Organization
	Tororo Widows and Orphans Empowerment programs
	Community Vision Uganda
	Osukuru Parish Development Committee
8. Lira	Lira District Forum for PLHIV Networks
	Kicaarwot- Victory Out-Reach Post Test Association
	Community Seeking for Better Living
9. Mityana	Teacher Anti Aids Group
	Mityana District Forum of PLHIV
	Tamu Sityomu Star Group
10. Kanungu	Mend the Broken Hearts Uganda
	Kihihi Town Council Community of women living with HIV
	Kihihi Network of people living with HIV/AIDS
11. Mubende	Mubende People Living with HIV /AIDS Networks
	Women in Developmental Concerns Coalition Mubende
	Children and women of disabled soldiers Association
12. Kasese	Luhwahwa Youth Development Foundation
	Give a Goat - Africa
	Good Hope Foundation
13. Masaka	Masaka Association of Persons with Disabilities living with HIV/AIDS

	Masaka HIV/AIDS Consortium
	Fennawamu AIDS Support Organization
14. Sheema	Giramasiko Post Test Club
	Kyagaju Post Test Club

Methods

A questionnaire/checklist was developed by ICWEA staff, pre-tested with the Wakiso and administered in all the 14 districts. We had interactions with the staff and management (including volunteers) of the organizations in all the 14 districts. Staff and management of the organizations were debriefed on the assessment outcomes especially the gaps identified during the process.

Selection of the organizations

ICWEA selected at least 3 women and women related organizations from each district that had the following characteristics: registered with offices, have governing boards, interested in issues of women living with HIV, had advocacy components and managerial structure among others.

Major weakness of the exercise

Much as the weaknesses/gaps were identified and discussed with the teams, we did not develop the action points for improving the gaps because we were not sure of the support to work on the gaps.

Key finding after the assessment

We noted the following successes:

- 1. All assessed organizations had registration certificates and with functioning governing boards that meet at least once a year
- 2. 75% of the organizations had signed board reports and minutes to show, while 25% had board reports and minutes, but were not signed.
- 3. GWED- G, Community Vision Uganda, ACET Gulu, Integrated Disabled Women Activities Organization, and Kyetume Community Based Health Care meet all five areas of the assessment;
- 4. Only Integrated Disabled Women Activities Organization was engaging directly in budget advocacy at the national level

Key/common gaps observed during the Assessment

It was noticed that most of the organizations lacked the following capacities

Percent formula =
$$\frac{part}{whole (40)} * 100$$

Assessment Item	Percent
Management and	30% of organizations used attendance sheets. 27.5% of organizations used
governance	time sheets because it was a requirements needed by certain donors, like
capacity	from Civil Society Fund, for specific projects. 42.5% did not use any type
	of attendance checking
	95% of organizations' board sits once in 2 years leading to operating on out
	dated policies, while 5% did not.
	5% of organizations had an expired strategic plan, 15% of organizations
	did not have a strategic plan, 27.5% of organizations were still drafting
	their strategic plans, and 20% of organizations integrated work plan with
	strategic plan, and 32.5% of organizations had a strategic plan.
	67.5% of organizations had no human resource policy and 32.5% of
	organizations had a human resource policy
	37.5% of organizations' offices were not operating on the daily basis and
	62.5% of organizations' offices were operating on a daily basis
	Educational level of board members: 30% diploma/certificate, 40% degree,
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T1i1i4	12.5% masters, and 17.5% PhD
Technical capacity	32.5% of organizations' offices are operated by volunteers, 35% of
	organizations' offices are operated by staff, and 32.5% of organizations'
	offices are operated by volunteers and staff
Financial capacity	25% of organizations currently had no funding, 17.5% of organizations
	depended on their own Income Generating Activities, and 57.7% of
	organizations are currently funded.
	5% engaging in activities such as budget processes at the district, while
	95% were not engaging in activities such as budget processes at the district

	60% of organizations were audited and 40% of organizations were not audited
Reporting (M&E) capacity	25% of organizations had an M&E plan, 2.5% of organizations were drafting an M&E plan, and 72.5% of organizations were without an M&E plan. 85% of organizations had typed reports and documents, while 15% had handwritten reports and documents 95% of organizations kept all critical reports in the office, while 5% did not critical reports at the office in entirety. 75% of organization work that was well documented, and 25% of organization work that was not documented
Advocacy capacity	62.5% of the organizations said they were implementing advocacy, but had no report. 15% of organizations were implementing advocacy and had advocacy reports. 22.5% of organizations were implementing advocacy, but integrated advocacy in other reports. GWED- G was the only organization (2.5% of assessed organizations) that was assessed that had an advocacy officer with an advocacy plan

Recommendations:

Capacity building is need in the following areas:

- Most of the organizations (if not all) need to be supported to develop their managerial, technical, reporting and advocacy capacities
- Advocacy strategies especially on how the selected CSOs can engage with policy makers at the district level.
- Increased documentation of their achievement with focus on monitoring and evaluation
- Training on proposals writing/resource mobilization and reports.