**CARE Afghanistan: Partner capacity assessment – Technical Approach**

**Background:** CARE International is conducting institutional capacity assessment of local SCOs in provinces of Balkh, Kandahar and Herat Provinces. This **Capacity Assessment** forms part of CARE Afghanistan’s strategy for strengthening civil society. Through contributing to strengthening partners’ institutional and technical development, CARE hopes that civil society partners will be able to play a more active role and contribute to a more vibrant in civil society in Afghanistan. CARE is especially interested in enabling its civil society partners to advocate, represent and serve the interests of their constituencies. For that matter, the assessment emphasizes eight capacities considered as characteristic of strong civil society actors: **leadership, strategic management, financial management, governance, service delivery, advocacy, sustainability and gender equality.**

For this CARE is looking for consultancy services to offer CARE recommendation on partner strengths and weaknesses, as a basis for discussion and for developing, monitoring and revising civil society partners’ institutional development plans.

**Target Groups/Geographic location:**

* **Qualitative:** interviews with stakeholders the partners are working with, interview with CSO board members, reflective meeting with partner’s donors and review of their existing system

For practical reasons, it is possible to include all questions of all eight capacities that serve the same purpose, provided the following conditions are met:

* All eight capacities have to be clearly included and identifiable (data about each capacity can be extracted and reported on its own);
* All sub-questions in each capacity have to be included;
* The eight capacities and their sub-questions have to remain unchanged throughout the whole program period, this assessment and quarterly measurement, in order to allow for a comparison.

**Sample size/sampling protocol:** The Sample size selected for this assessment include interviews with 36 key staff, 36 beneficiaries and 12 stakeholder meeting. The selection of interviewees will be based on their role and the insight they can provide. For selection of individuals, the consultancy company will involve getting support of CSO management who will provide a total list of staff for MPWC and as well as their general support staff. The company will proceed randomly selecting the staff required – see details under data collection section.

**Assessment team:** An assessment team should be composed with a view to secure expertise as well as objectivity. There may be many options: the company may put together an advisory team that includes different perspectives in order to reduce biases. Such a team may include a representative from company, a representative from the organization under review, a representative from CARE. A team may be composed of two to three members and be gender-balanced as much as possible. The advantages of using a team may be to secure balanced reporting as well as to make sure that the learning from the assessment stays within CARE and or the organization under review. Self-assessments will be avoided to avoid risks of bias. Having at least one member from the team that managed the Due Diligence Assessment (DDA) on these partners is a good way to ensure consistency from this assessment to the DDA.

**Data collection:** The evidence base of the assessment consists of loosely structured interviews. The team should interview various staff internal to the organization that work at different levels and with different aspects of the operations. This may include the director, chairman/members of the board, field officers, volunteers, staff in charge of finance, staff that work with implementing activities etc. The team should enable informants to present concrete examples of how they work, provide examples of success and failures, and discuss strength and weaknesses of the organization. Focus groups can also be used, provided that conditions for protecting the confidentiality of opinions expressed by the participants are met.

The team should also interview various people external to the organization. This may include program participants, representatives of partner organizations, representatives of local authorities, and or other actors that may provide important information with regards to reviewing the capacities of the organization. In these interviews or focus groups, the team may seek answers to how the organization is viewed by the local community, how it engages with stakeholders as well as its relative capacity of service delivery and advocacy.

**Role and responsibility:**

* CARE Afghanistan will support with tools develop, clarify the scope and share related material for this exercise
* Partners will share required details at both field and their staff level and project level to facilitate review.
* A consultancy Company will manage data collection, data entry, analysis and reports
* The consultant will also prepare final assessment report
  + The assessment report should present quantitative scores for each dimension as well as for individual questions. Scoring to be discussed with CARE before application
  + The assessment report will **include a short and succinct narrative presenting some of the key findings and analysis**. The narrative should provide context to the issues within the dimensions and help to explain the scores, based on comments and justifications made directly in the form. It should also explain the relevance of each dimension for specific organization. This part of the narrative will be essential for understanding the room for improvement, the organizations key strengths and weaknesses, and for informing capacity development strategies.

**Timeline and activities:**

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| **Days** | **Activity** | **Description** |
| 4 | Secondary data Review | * Review secondary data of both CARE DDA, organization reports different assessment and external from OCHA, GBV-SC and national protection cluster. |
| 4 | Tools development | * Qualitative and quantitative tools (score based) * Translation into local language * Data mask/Kobo development |
| 12 | Data Collection | * Produce sampling protocol * Generate list of the interviewees * Conduct interview |
| 3 | Data analysis | * Prepare analysis framework – score based * In-depth data analysis – disruptive analysis * Data collation tabulation and analysis * Review qualitative and quantitative data/transcription * Prepare analysis for reflection |
| 3 | Report write-up | * Undertake report writing * prepare first draft * create share-drive to upload all content/analysis accessible to CO and CI team * Prepare a presentation of the first to present to CO * Share the report with CO for review and comments |
| 4 | Report finalization | * Revise the report on the basis of CO review comments * Finalize recommendation and finding * Submit the finalized report |
| **Total days 30 calendar days** | | |

**Deliverable:**

|  |  |  |  |
| --- | --- | --- | --- |
| **S/N** | **Dimension** | **Scores** | **Current Situation (Strengths – Weaknesses)** |
| 1 | Leadership |  |  |
| 2 | Strategic Management |  |  |
| 3 | Financial Management |  |  |
| 4 | Governance |  |  |
| 5 | Service Delivery |  |  |
| 6 | Advocacy |  |  |
| 7 | Sustainability |  |  |
| 8 | Gender Equality |  |  |

* Proposed activities to strengthen Financial Management and Gender Equality
* Proposed activities to strengthen Leadership, Financial Management and Gender Equality
* Proposed activities to strengthen Leadership and Governance
* Proposed activities to strengthen Governance and Sustainability
* Proposed activities to strengthen Advocacy, Sustainability and Gender Equality

**Payment**

The consultant will work for a total of 30 days to complete this task. CARE will provide the consultant reasonable cost of the exercise upon completion and approval of the assessment reports.