Partnerships often look good on paper but may be challenging in practice. This learning paper describes a promising partnership in India and the partners’ innovative approach to strengthening the capacity of local organizations.

Here’s how they set themselves up for success:

- They considered the partnership’s context, including the donor landscape.
- They ensured that the local partner truly wanted assistance with capacity strengthening.
- They used a participatory approach.
- They drew from local networks and communities to find the right skills.

**WHAT LED TO THE PARTNERSHIP?**

In India, Catholic Relief Services and Caritas are collaborating to strengthen the organizational capacity of the local Diocesan Social Service Societies (DSSS). This initiative began when the DSSS decided that it needed to improve its positioning in a challenging donor landscape. CRS and Caritas agreed to provide the necessary structural guidance and support to achieve this goal. The three partners agreed that the DSSS needed long-term organizational capacity strengthening and accompaniment on an institutional level.

The donor landscape in India is changing, and many DSSS have been trying to do more with less. Traditional funding sources have become scarce and more competitive while the needs of local communities continue to increase, casting concern over whether the DSSS will remain effective in serving the poor. Further, external resource venues increasingly require greater organizational capacity as a precondition for funding. The new donor trend toward funding indigenous organizations directly, for example, often means that organizations must oversee complex programs.
In order to effectively fulfill their mission to serve the poor and to improve their sustainability, many DSSS recognized the need to strengthen their capacity. Staff needed to upgrade their skills in order to manage more complicated programs. Although some DSSS were strong in certain areas, there was limited idea sharing between the various DSSS. There were few mechanisms for applied learning or for sharing best practices. The DSSS also reported that their organizational systems and structures were insufficient to oversee complex programs, especially with regard to financial planning and program management. Further, the use of internal monitoring tools to encourage adherence to international standards and to foster learning was extremely limited.

These factors have made it extremely challenging for the DSSS to maximize the existing resources, and increasingly difficult for them to secure external support. This discrepancy between the existing level of capacity and the increasing demands of the environment has been the driving force behind capacity building efforts in India.

**USING A PARTICIPATORY MODEL**

Regular mentoring and technical support has strengthened the organizational effectiveness and sustainability of each DSSS. In order to identify the areas of greatest need, CRS and Caritas have facilitated a participatory assessment of organizational strengths and weaknesses with each DSSS. This assessment has been the springboard from which DSSS, CRS and Caritas will continue to design a tailored and individualized capacity strengthening program, expanding the model beyond the initial pilot.

Throughout the initiative, CRS and Caritas will continue to document the capacity strengthening processes. The partners will continue to apply and share the innovations, lessons learned and promising practices that result from the partnership.

The intervention has supported nine DSSS associated with four regional forums, which are regional conferences of bishops in India. The following criteria have been used to select the target DSSS:

- DSSS that are currently implementing projects with CRS
- DSSS that are currently implementing projects with Caritas
- DSSS that would have been implementing projects with CRS but the project was canceled due to external factors (such as the closure of a state office)
- Geographic balance between north and south
- Willingness to participate

The nine target DSSS are listed below with their respective regional forum.

<table>
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<tr>
<th>Regional Forum</th>
<th>Targeted DSSS</th>
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<tbody>
<tr>
<td>Andhra Pradesh</td>
<td>• Kurnool Diocesan Social Service Society, Kurnool</td>
</tr>
<tr>
<td></td>
<td>• Multipurpose Social Service Society, Cuddappah</td>
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<tr>
<td></td>
<td>• Lodi Multipurpose Social Service Society, Warangal</td>
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<tr>
<td>Bihar</td>
<td>• Bihar Water Development Society, Patna</td>
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<td></td>
<td>• Bettiah Diocesan Social Service Society, Bettiah</td>
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<tr>
<td>Madhya Pradesh</td>
<td>• Kripa Social Welfare Society, Ujjain</td>
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<td></td>
<td>• Pragati Society, Jhabua</td>
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<tr>
<td>Tamil Nadu</td>
<td>• Pondicherry Multipurpose Social Service Society, Pondicherry</td>
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<tr>
<td></td>
<td>• Tirunelveli Social Service Society, Palayamkottai</td>
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The assessment procedure involves three visits. Prior to the visits, the partners selected the survey team, consisting of forum staff, CRS staff and Caritas staff. Then members learned about the assessment methodology. When the participants reached a shared and complete understanding of the process, they asked the DSSS to identify key staff and board members to participate in the assessment.

The assessment has been structured along the nine capacity areas that are essential to organizational development:

1. Identity and governance
2. Strategy and planning
3. General management
4. External relations and partnerships
5. Sustainability
6. Organizational learning
7. Human resource management
8. Financial and physical resource management
9. Programming services and results

The assessment has generally followed this timeline:

**First visit (3 days)**
- Introduce the Holistic Organizational Capacity Assessment (HOCAI) tool and key staff.
- Use the HOCAI tool for organizational development areas presented in chapters 1–5 (3–4 hours).
  - Conduct a point-by-point focus group discussion. Each participant should give anonymous individual ratings.
  - Spend time separately with key board members. Ask them to use the assessment tool, and follow up with a group discussion.

**Second visit (2 days)**
- Review the main points from the previous session.
- Use the HOCAI tool for organizational development areas presented in chapters 6–9 (3–4 hours).
  - Conduct a point-by-point focus group discussion. Each participant should give confidential and anonymous individual ratings.
  - Spend time separately with key board members. Ask them to use the assessment tool, and follow with a group discussion.
  - Discuss emerging trends with the archbishop, bishop or vicar-general and with the director or assistant director.
  - Solicit input from senior leaders of the DSSS.

**Collation period**
- Tabulate the results and understand trends in the assessment.
- Rationalize and expand upon the findings with anecdotes from the focus group discussions and from individual reflections.
• Evaluate the relationship between the quantitative feedback and the qualitative feedback.
• Produce a draft of a report, taking care in the language and the approach to reveal the truth without being too critical or blunt.

**Third visit (2 days)**

**Day 1, part 1 (3 hours)**
• Present results in one location with all key members present.
• Provide the summary to key members, seeking their feedback and input.

**Day 1, part 2**
• Divide the team into four groups and request that each group analyze two sections/chapters (one group will have three).
• Facilitate in-depth reflection on the findings and the actions that should be undertaken.

**Day 2, part 1**
Listen to the working groups as they report back to the larger group.

**Day 2, part 2**
• Ask the participants to identify the most critical issue and the second-most critical issue among the nine areas that they would like CRS and Caritas to focus on.
• Confirm these issues with all members. Observe any resistance to the selected issues, and try to reach a consensus of more than 80 percent agreement.
• Prepare an action plan for the future, including ways to ensure that participants
  • understand the issue in depth,
  • can identify the local resource team,
  • create a six-month plan and
  • define indicators for progress and success.

**ENSURING SUSTAINABILITY**

In order for the assessment to remain relevant and effective, a team of local resource people must be engaged to support both the initiative and the Church.

The resource team is composed of technical experts who are interested in the development of the Church in their region, and volunteer to commit their time and expertise. The resource team, being truly vested in the enhancement of the capacity of the DSSS, is expected to be a cohesive and motivated team, exhibiting strong leadership qualities and training skills in their respective areas of experience. All members of the resource team (including staff from CRS, Caritas and the regional forum, clergy from religious orders, and qualified laity) will be responsible for providing technical support in the areas of need that emerged in the assessment. The vision for the resource team is to enhance recognition, increase credibility, strengthen systems and improve staff capacities in the selected capacity development areas.

Throughout the process, CRS and Caritas have monitored the quality of capacity building support and will progressively hand over increasing levels of responsibility to

**Learning from the partnership**

A participatory model authenticates ownership of the capacity building initiative and increases the likelihood that the technical support will truly affect the areas of greatest need. Couple a formal assessment tool with focus group discussions to ascertain collective, emerging themes as well as pointed individual insights, creating a comprehensive picture of organization capacity at present.
For more information, contact pqpublications@crs.org.

Learning from the partnership

A local network of qualified individuals is a key tool in creating a sustainable path forward. Engage community members, as well as partner staff, who possess not only expertise specifically tailored to the capacity needs of the organization, but also a strong interest in improving the ability of the Church to serve the poor.