



ELEMENT 2

ORGANIZATIONAL ANALYSIS – PROGRAMMATIC NEEDS WITHIN YOUR AGENCY

© SECTION 1: IDENTIFYING INTERNAL STRENGTHS AND WEAKNESSES

Take Advantage of Strengths. In the course of your program development you may determine that your organization has numerous strengths it can capitalize on. Building on these strengths will help give your agency a head start to success. For example, any efforts on behalf of your organization to outreach to Vietnamese commercial sex workers may be easier if your organization already has a well-respected substance-use counseling program serving the Vietnamese community. Your efforts may be more successful because you have already established a necessary level of trust with this community.

Acknowledge Weaknesses. It is also important to recognize your organization's limitations, such as those related to your staff's skills and knowledge in an area or its cultural and linguistic capability. Also keep in mind that while it's necessary to maintain lofty goals it is just as important to be realistic and practical. How hard can your staff be worked? How much time will it take to get community buy-in for a controversial intervention, such as needle exchange, or a seemingly simple condom demonstration for women who never discuss sex?

Areas to Consider.

- Staff skills and abilities
- Staff workload
- Motivation of staff
- Team work
- Cultural & linguistic capability
- Current mix of programs
 - Outreach, prevention, education, clinical services, case management, policy, research
- Populations that are already being served
- Collaborations with other agencies

- Agency awareness in the community
- Reputation in the community and among funders
- Capital
- Financial resources
- Grant-writing & development capabilities
- Infrastructure and space
- Volunteers
- Innovation
- Efficiency of implementation
- Board of Directors
- Leadership and management
- Vision

Once you've identified your organization's strengths and weaknesses you may want to consider the areas your organization would like to strengthen, and identify the means and resources required to do so. You should also consider your organization's priorities in implementing your proposed program. Oftentimes, organizations do not possess the resources necessary to strengthen its capacity in multiple areas. However, keep in mind that at times, improving an organization's capacity in one area may consequently improve your organization's capacity in another area.

Matching Strengths and Weaknesses with Current and Forecasted Needs.

Your organization, given its experience working in its community, is likely to know its needs. However, how can your organization best fill those needs? What kinds of programs and interventions would best suit your targeted populations and help fill the gaps that exist in service provision and access for these populations? It may be a good idea to lay out all of your program possibilities, and narrow your options to those that capitalize on your organization's strengths. Once you have determined what staff, skills, cultural competencies, and resources are in-house, you can begin to utilize these strengths and create a program that is feasible and sustainable. Keep in mind whether the program is meant to provide short-term or long-term solutions to the community's needs. Also allow for some flexibility in the program as funding priorities change (e.g. prevention vs. case management) and the epidemiology of HIV changes (e.g. more heterosexual women contracting HIV).

© SECTION 2: FORESEEING OPPORTUNITIES AND OBSTACLES

Recognizing Opportunities and Obstacles. Through the course of your program development, how will you and your agency recognize the myriad of internal and external opportunities and obstacles that may arise, and ensure that they strengthen and not compromise your program and agency overall? By anticipating them beforehand and list-

ing events and scenarios that: 1) you are certain will occur, 2) are likely to occur, and 3) you can influence to occur. Events that will impact your mission and vision are the most relevant. Questions for discussion could include:

- What future events or circumstances will impact your agency? Program? Target population? These events may be political, social, seasonal, financial, or organizational.
- How likely are they to occur?
- When will/ would these events or situations occur?
- Which effects are direct vs. indirect?
- Where do you foresee a need for a service that no one else can or will fill?
- Are there bills or propositions that will affect your target populations or ability to implement your plans?
- Would it be possible to turn an obstacle into an advantage?

For example, pending legislation to increase names reporting of those individuals testing HIV positive, will adversely affect your agency's ability to test hard-to-reach populations. However, participating in efforts to educate policymakers of the impact this legislation will have on your testing efforts may lead policymakers to re-evaluate the need for the bill altogether.

Involving Stakeholders. Who are the key players and stakeholders of the proposed program? Clinic staff, potential clients, a community planning group, CARE council, the board or funders are all stakeholders that can help identify opportunities or obstacles your organization may face when planning your program. It may be beneficial to have a multidisciplinary team within your organization conduct the following exercise on an annual basis: 1) identify trends and probable events, and 2) play out how your agency will react in the BEST and WORST case scenarios. For example, if the CDC announces that an RFP with landfall funding will be issued in two months, is your agency prepared to respond to this RFP with current and reliable data that supports your needs assessment? If your county funding was cut by 25% tomorrow, are there other financial resources you could tap into? Anticipating how your agency would react in each of these situations will better prepare your organization for these scenarios as they arise. Having varied perspectives to draw on in these exercises will help your organization generate more ideas, and help you develop more comprehensive and appropriate action plans.

Possible Partnerships. As you consider the potential partnerships your agency might develop to ensure the comprehensiveness and success of your program, consider the following questions: Are there community advisory groups that can assist in the development or evaluation of your program? Are there health centers or providers already doing HIV work with AAPIs? Are there best practices that exist in this area? Are any competing or collaborating agencies planning to develop a program that your agency would also like to implement? Your organization may benefit from working with an organization that specializes in an area where you have limited expertise or resources. For example, if your agency is just beginning an HIV/AIDS program targeting the Vietnamese community, it might be helpful to collaborate with an organization that has HIV/AIDS education materials translated in Vietnamese.

Keeping the vision in sight. The “face” of HIV changes every year- new treatments and prophylactics change the way we manage cases, media attention on the epidemic is waning, and funding sources fluctuate from year to year. While assessing the potential opportunities and obstacles you might face, it is essential to keep in mind where your agency sees itself in the short-term and long-term and adjust your expectations and plans along the way. Your agency might ask itself, “Where do we see ourselves in 5 years? In 20 years?” In answering this question, your organization can determine where to direct its energies as well as prioritize the opportunities and obstacles it wants to address.

© **SECTION 3: ORGANIZATIONAL CAPACITY TO FILL THE COMMUNITY NEED: ANOTHER CHECKLIST TO CONSIDER**

Because of the political history of the disease, the types of populations served in relation to the disease, and the sensitive discussions that are often required between patient and health care provider regarding risk factors such as sex, sexual orientation and substance use, HIV/AIDS work is not for everyone nor is it for every organization. The activities providers must engage in require very specific sensitivities as well as capabilities. The checklist below provides you with starter questions to help gauge your staff and organization’s readiness to do HIV/AIDS work. You will likely add many of your own questions based on the type(s) of HIV/AIDS services you plan to offer and your current organizational capacity.

Once you have completed an organizational assessment, determine what areas of your organization will require additional development. Then determine whether it is an area that your organization is willing and able to change at this time. For example, if you find you can respond affirmatively to most checklist questions but your Board of Directors does not feel that HIV/AIDS is a priority at this time, or that your organization does not have the capacity to procure additional funding for new programs, then your organization may not be ready to develop an HIV/AIDS program. Instead, you may want to keep your assessment results and re-assess your organization’s readiness to develop a program at a later time.

One thing to remember is that organizational readiness is not dependent on whether or not your organization can answer all of the checklist questions affirmatively. Your organization may discover that it has the basic components it needs to develop a program. However, identifying your organization’s weaknesses early on will allow you to anticipate difficulties your organization may face when planning a program, and allow you to develop a plan to address those weaknesses accordingly. It is important to note that because every health center has different staff capacities, resources, values, priorities, etc. that an exact formula or threshold for readiness simply doesn’t exist. Consulting your key players such as providers, health workers, management, board of directors, funders, clients and collaborating agencies, will allow you to incorporate the range of perspectives that is necessary to determine your organization’s ability to start or expand its HIV/AIDS services.

HIV AND THE AAPI COMMUNITY: CAN YOUR ORGANIZATION FILL THE COMMUNITY NEED?	NOTES
Clients	
Do you know the size of the AAPI populations in your target area? Do you know how many individuals of each ethnicity you currently serve?	
Are your clients satisfied with current programs and services, including HIV if applicable?	
Does your health center collect current data on the number of HIV, sexually transmitted disease and hepatitis cases it sees?	
Staff attitudes/values	
Do your staff and clinical providers feel comfortable working with people at risk for and living with HIV?	
Would staff and provider be comfortable talking with clients about their risk behaviors and safer sex/harm reduction techniques?	
Do your staff and providers feel comfortable working with people who have substance use issues, domestic violence issues and/or have mental health problems?	

<p>Would your staff be respectful of clients from the LGBT communities? How about commercial sex workers?</p>	
<p>Staff knowledge</p>	
<p>Does your staff have sufficient knowledge about HIV risk factors and alternative “lifestyles”? Would your staff be open to trainings?</p>	
<p>Does your clinical staff have time and willingness to participate in trainings on confidentiality, referral resources and HIV policies? Do they all need to participate?</p>	
<p>If providers are bilingual, do they have command of HIV vocabulary and can they anticipate cultural concerns that clients may want to address? Same question if they are not bilingual/ bicultural?</p>	
<p>Do providers have up-to-date knowledge regarding HIV risk factors, co-morbidities, testing protocols and current HAART treatments?</p>	
<p>Do providers have experience treating patients who have dual or multiple diagnoses?</p>	
<p>Executives and Managers</p>	
<p>Is the Board of Directors of your organization interested in working in HIV/AIDS and see it as a priority?</p>	

<p>Does your medical director feel that HIV/AIDS is a priority?</p>	
<p>Do other stakeholders such as head nurses, clinic managers, and or program directors feel that HIV/AIDS services are a priority?</p>	
<p>Are they comfortable having discussions about HIV risk factors such as sex and sexual orientation?</p>	
<p>Are the executives and managers knowledgeable about the current gaps in HIV/AIDS services in your community?</p>	
<p>Are they aware of prevention, testing, counseling and treatment services that are provided by similar organizations?</p>	
<p>Implementation</p>	
<p>Have you looked into a budget for the desired HIV/AIDS program and sources for funding?</p>	
<p>Are there staff, trainings and/or HIV services that would be better to contract out? If so, which ones?</p>	
<p>Has someone from your agency interviewed or done site visits with HIV specialty clinics or model AIDS service organizations in the area to gain insight into best practices/ operations?</p>	

Do clients already come to your centers for sensitive and confidential services such as pregnancy testing and STD screenings? Are clients' confidentiality safely protected at your center?	
Will you have enough at risk or HIV positive clients to justify starting HIV care? Do you know how many cases may be lost to follow-up?	
Would your health center provide or support harm reduction services such as needle exchange?	
Does your clinical and non-clinical staff possess the requisite certifications or credentials to provide the types of HIV/AIDS services you plan to offer?	
Is your center equipped to report any epidemiological surveillance data that is required by the county, state or federal government?	
Do you have a clear vision of what the roles & responsibilities of program and clinical staff would be? (e.g. outreach workers, testers/counselors, case management, treatment advocates, peer advocates, nurses, medical assistants, social workers, physicians, event planners)	

© BIBLIOGRAPHY

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Centers for Disease Control and Prevention - What Community-Based Organizations Say About Factors that Affect HIV Prevention Programs <http://www.cdc.gov/hiv/aboutdhap/perb/cbo.pdf>

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© **RECOMMENDED RESOURCES**

Carter McNamara – Free Management Library - “Capacity Building (Nonprofit)”
http://www.managementhelp.org/org_perf/capacity.htm

County of Los Angeles Department of Health Services Office of AIDS – Capacity Building Continuous Improvement Model www.lapublichealth.org/wwwfiles/ph/pho/aids/Capacity_Building-CDC0803.pptmaster.ppt

International AIDS Alliance – HIV/AIDS NGO/CBO Support Kit http://www.aidsalliance.org/ngosupport/index_eng.htm

National Center for Training, Support and Technical Assistance <http://www.proceedinc.com/nctsta.html>

National Minority AIDS Council – Capacity Building Assistance Program (CBA)
<http://www.nmac.org/>

National Native American AIDS Prevention Center <http://ngsc.nnaapc.org/research/tech.html>

