



# **Why and how** to embark on **organizational** **strengthening?**



LESSONS LEARNED FOR ASSOCIATIONS BENEFITING  
FROM TECHNICAL ASSISTANCE FROM L'INITIATIVE

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Launched at the end of 2011, L'Initiative is a French mechanism that complements the Global Fund to fight Aids, tuberculosis and Malaria. It provides technical assistance and support to catalytic projects in 40 Global Fund recipient countries to improve the effectiveness of grants and strengthen the health impact of the programs funded. As such, it contributes to ensuring the effectiveness of the response to pandemics.

L'Initiative's recent evolution has demonstrated its catalytic effect by building the capacity of health stakeholders—including civil society and research organizations—improving institutional, political, and social frameworks, supporting innovative approaches to respond to pandemics, and strengthening health systems.

It is implemented by Expertise France, the international technical cooperation agency (French Agency for Development Group), and is fully funded by the French Ministry for Europe and Foreign Affairs, which is its supervising body.

**For more information:** <https://linitiative.expertisefrance.fr/en/>



# 1. Why this **lesson learning document**?

L'Initiative supports numerous civil society organizations<sup>1</sup> (CSOs) primarily through technical assistance (TA), helping them to strengthen their capacity or adapt to new challenges. The beneficiary CSOs are heterogeneous in terms of needs and profiles (community project, maturity, budget size, and human resources). Thus, L'Initiative, while co-constructing tailored solutions, aims to share the lessons learned and recommendations from previous experiences with organizations wishing to embark on this process.

This lesson learning process took place in October 2024, based on reflections from a working group composed of members of L'Initiative's team. It also drew on a documentary analysis of seven technical assistances provided to Cameroonian associations, as well as interviews with several beneficiary association teams. These associations received technical assistance between 2023 and 2024 which aimed at developing their organizational diagnosis (OD) and a capacity enhancement plan. Some also received support to revise their associative projects and develop their strategies, while others received assistance in implementing their capacity enhancement plans. In this context, they agreed to share their experience.

This document outlines the importance of an organizational diagnosis as the starting point for implementing more specific capacity enhancements (such as strategy development, resource mobilization, etc.), highlights the successes and challenges associations face when implementing this type of technical assistance, and offers advice and solutions provided.

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1. To learn more: <https://linitiative.expertisefrance.fr/en/our-documentary-resources/key-data-1-linitiativesupport-to-ngos/>

# THE CONTRIBUTING ASSOCIATIONS

**Association des Femmes Actives et Solidaires (AFASO)** AFASO is an association committed to the fight against HIV/AIDS and tuberculosis. It aims to promote women's empowerment, improve the quality of life for people living with HIV, orphans and vulnerable children, patients with tuberculosis and age-related comorbidities, and to prevent STIs and other comorbidities.

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**Affirmative Action (ACT)** Affirmative Action was created by a group of peer educators who work towards better access to healthcare for LGBT individuals and other key populations and vulnerable groups, through mobilization, information, HIV medical care, support for victims of violence, and advocacy actions.

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**For Impacts In Social Health (FIS)** FIS works for «a Cameroon without injustice in the field of health». Its mission is to put forward innovative approaches to health policies, complementing public services while taking into account the essential needs of disadvantaged populations.

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**Humanity First Cameroon + (HFC+)** HFC+ is a Community-Based Organization focused on HIV/AIDS prevention and the promotion and protection of the rights of marginalized and vulnerable populations.

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**Moto action Cameroun (MAC)** MAC aims to implement prevention, awareness, and screening activities for the most geographically isolated and/or socially vulnerable populations in Cameroon. It contributes to the professionalization of Community-Based Organizations responsible for HIV/AIDS prevention.

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**Positive Generation (PG)** PG is an organization that promotes health and human rights, originating from communities affected by HIV/AIDS and tuberculosis. Its mission is to support and implement community health initiatives (including HIV/AIDS, tuberculosis, hepatitis, malaria, sexual health, and more) as well as activities related to human rights.

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**Presse Jeune Développement (PJD)** PJD is an advocacy and capacity-building organization that implements development projects focused on children, youth, women, and the media. Its main mission is to improve living conditions for populations, with a particular focus on the rights of adolescents and young people in areas such as health, education, employment, and training.

## 2. Why conduct an organizational diagnosis?

The organizational diagnosis (OD) is the first step, the starting point for deploying more specific capacity enhancement: strategy, resource mobilization, communication, etc. The contexts and motivations behind associations' requests for support are diverse but often stem from a decrease in project funding and a changing or uncertain environment.

*“The projects were no longer funded by the donors, we needed to understand where the problem lay, what the causes were, and how to move forward”*

*“The association wished to strengthen its capacities, while projecting itself as a potential sub-recipient organization within the Global Fund system, to gain legitimacy, solidity, and readiness. The motivation was the need to adapt our strategy to align with the new national strategic plan and to improve the staff's capabilities”*

**A capacity-building objective:** some associations have a development or adaptation strategy, and the diagnosis serves as the first step in identifying areas for improvement to better align with the strategy. This may involve adapting to a new national strategic plan, enhancing the quality of services offered, or improving the visibility of their community-oriented expertise.

**A context of survival or sustainability:** some associations become aware of the need for a diagnosis when facing a crisis or funding cuts. They must then reassess their approach and, at times, adapt their associative project to remain relevant in light of context changes or new needs of beneficiaries. The association may also need to step back and gain an external perspective to question its model and reflect on its future.

*“Sometimes the associative project becomes outdated, the context has evolved, there is a risk of stagnation or even disappearance. We must know how to adapt the mission of the association”*



**In the face of a crisis, such as a significant loss of funding, it can be difficult to take the time for analysis. However, the associations involved recognize that without this support, they would have rushed into the search for funding without fully understanding or considering the evolving context.**



### 3. What is an **organizational diagnosis?**

An OD looks at the association from a 360° perspective because it involves reviewing all areas of the association: governance and strategy, communication and advocacy, program management, human resources management, financial management, resource mobilization, consideration of a gender and human rights approach, risk management.

It highlights the strengths and weaknesses, including its shortcomings, as well as the opportunities and threats. The support of an external perspective provides a mirror, allowing for awareness and a better understanding of where the association stands and its needs for evolution and improvement.

*“In a few words: it’s a mirror, a snapshot of the association, a re-evaluation. It’s about seeing what we didn’t see before. It’s a process of questioning to better adapt what is being done”*

*“You have to be very open to say what is wrong. Be ready for self-reflection!”*

This exercise helps to understand that some things may have worked for a while but no longer function as well as before, and it truly allows to understand the priority needs that must be addressed.

How are things currently being done? What explains whether they are done well or poorly? What is not being done? Where do the problems lie, and what are their causes? What improvements should be made?

If the organization has already conducted a diagnosis previously, the new exercise will also take into account the results of the previous diagnosis, the implementation of previous recommendations, and the improvements made.

*“At first, it feels like being laid bare”*

# FEEDBACK ON THE METHODOLOGY

The appropriation of the approach and the results is due to the fact that the TA responds to the needs expressed by the association making the request, it is not an audit but a support to improve things. This requires a methodology and a participatory approach, relying on the association's active involvement and, above all, on the clear expression of a request – a crucial point.

Each firm offers its own methodology, and various tools are available. Some tools are focused on the criteria to be met for external donors, such as those inspired by the framework used by the Global Fund (capacity assessment tool), while others are inspired by quality approaches based on the «European Foundation for Quality Management» (EFQM) model. L'Initiative has also developed its own diagnostic tool for its «Structuring Civil Society Organizations: Financing, Impact, and Support (SOFIA)» program, a new fund dedicated to Civil Society Organizations (CSOs). The key is to ensure that the scope of the diagnosis and the tool are suitable and relevant for the association.

The consultants' methodological approach, particularly their stance, enables the association's members (both central and regional offices, as applicable) to actively participate at every stage: the diagnosis, its results, the recommendations, and the prioritization of the capacity enhancement plan. This collaborative process makes it easier for them to take ownership of what has been built together. Additionally, this type of support requires a field mission with the association.

If necessary, depending on the size of the association and the number of people to be mobilized, it is possible to create teams by topic (governance, finance, monitoring and evaluation, and programs, etc.) and have focal points to facilitate progress. In that case the role of these focal points is to serve as an interface for the validation of the produced documents.

The diagnosis is a significant moment for an organization that agrees to reveal its weaknesses to outsiders. It is crucial that the entire team (staff, board of directors, and volunteers) feels confident ensuring that the diagnosis is as accurate as possible and that the results are both accepted and appropriate.

Overall, consultants know how to build trust and reassure, they demonstrate open-mindedness, listening skills, availability, and flexibility, all of which are key factors for the success of the TA. That being said, a consultancy may suit

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2. To learn more: <https://linitiative.expertisefrance.fr/en/cso-fund/>



one association but not necessarily another. Therefore, the association should consider whether it prefers to prioritize internal dialogue within the team or a more 'objective' external perspective. For example, one of the associations considered that the external, neutral, or even «cold» stance of the experts matched its needs, applying a domain-based rating based on the verification of available documents (or lack thereof). This assessment is thus perceived as an objective and neutral approach. However, this approach is not suitable for all associations. Therefore, in case of difficulty or misunderstanding regarding the approach, it is important to have an open discussion before moving forward with the consultancy, to communicate openly, in order to carry-on the work within a climate of trust.

*“It’s a key step because we need to accept the image of the association reflected by this exercise; we might feel like resisting the results, but we must be aware of our limits.”*

Note that L'Initiative's team provides support at every stage and offers continuous follow-up. Several associations have emphasized that these exchanges allow for taking the time to explain and ensure a clear understanding of the request, the terms of reference, the selection of consultants, etc. This allows for an assessment of the progress of the TA, the team's sentiments, and sharing any potential developments to consider for the TA.



## 4. What to expect?

# How to prepare?

### SOME ADVICE FROM THE ASSOCIATIONS THAT HAVE STARTED!

#### ① Be open and ready for questioning: honesty, humility, frankness !

*“It really requires a commitment from the association and willpower.*

*You need to be open to questioning, accept being challenged, expect a reassessment of habits and ways of working, you need an open mind, be open to discussions and debates”*

Associations must be ready to receive critical feedback and engage in uncensored discussions to identify real problems and find solutions. A sincere commitment and an openness to questioning are essential. Being frank about the organization's situation is crucial, as well as the freedom of speech, even if it can be difficult to hear.

*“To say things as they are because it allows things to come to light. It's an exercise that can hurt because everyone believes they are doing well, but one must accept recognizing weaknesses in order to move forward !”*

#### ② Be ready to invest your time/effort

The dialogue between all stakeholders (the association, the consultancy firm, and L'Initiative) is essential to meet the needs of the association. This requires a strong commitment from the entire team, as the time dedicated to it detracts from other activities. Numerous discussions are needed to foster understanding of the work being done, through interviews, focus groups, workshops, or working groups.

*“We had underestimated the energy it requires. Now that we know what to expect, we see that it takes a lot of motivation.*

*The amount of work required is a constraint, as it involves everyone. However, in the end, the team believes that the benefits of this participatory method outweigh the drawbacks or constraints.”*



### ③ Preparing

Several associations highlighted the importance of good preparation in advance with multiple online meetings with the consultants, allowing them to be ready for the field mission and progress more easily. It is worth noting that the consultants' transparency in clearly communicating the purpose of the TA, the approach, the method, and what is expected from the association allows everyone to know exactly what they need to do.

*“Taking ownership of the exercise and working on the reinforcement plan require real mobilization and the involvement of the members”*



**Analyze the need:** sufficient time is required for the TA, which implies a good analysis of the needs and seeking coherence between the content of the TA, the time, and the dedicated budget.

*For an association, “the availability of the participating staff was checked in advance, which helped avoid periods of reporting and high activity”*



**Define an adequate budget:** involving everyone requires an adequate budget (room fees, travel expenses) which is sometimes underestimated!



**Identify an appropriate schedule:** the schedule should be chosen in consultation with the team, taking into account periods

of high or medium activity, such as the period for submitting reports to donors. During the support period, the organization continues to operate, so it is necessary to take this context and these constraints into account.

*When this schedule was poorly anticipated: “it puts a lot of pressure on the workload to get everything done, it was a challenge to manage the time, we had to arrange to deliver the documents as the consultants requested them. We had to prioritize the TA over other tasks to be done”*

For example, one association agreed to work with the consultants until 4 PM at the latest, to allow the team to manage their other activities. Similarly, another association set a maximum of 4 hours per day for work with the consultants. It is also important to be mindful of conflicting schedules, with constraints imposed by different donors or partner visits!

#### **Integrating a self-diagnosis is a potential step in the process.**

It encourages ownership of the approach and helps identify any discrepancies between the CSO's self-perception and the diagnosis derived from the experts' analysis. However, this step requires a significant amount of time and effort, which the association must be mindful of.

## ④ Involve the different stakeholders

**Staff motivation is crucial**, as is the desire to progress and learn. The team's commitment and drive are built on a foundation of trust and openness to changing practices. It is beneficial to involve the Board of Directors and consult with the team before the training session to gain a comprehensive understanding of the needs and encourage the adoption of the approach. The team's buy-in is essential, and everyone's contribution is valuable.

*"The main leaders have positioned themselves as the most concerned in terms of commitment and in a learning posture. Being open to questioning is essential at all levels."*

### HOW TO MOBILIZE INTERNALLY?

Affirmative Action established a task distribution and schedule based on the areas of diagnosis, which facilitated the involvement and mobilization of everyone through individual and group interviews. The collective workshops then enabled broader sharing, consolidating the results and providing a comprehensive view of the diagnosis. This approach allowed everyone to express their thoughts on various topics, while valuing and incorporating specific expertise. As a result, everyone felt that they were contributing to something larger than themselves.

For Humanity First Cameroon +, the diagnosis was made with the entire team in a participatory manner. Note that not everyone recognized and embraced the changes happening during the support process at the same time. For some, this realization came early, right from the diagnosis stage, as the facilitation helped them understand what was at stake. For others, it was when they took action that they truly understood what they were doing and how it contributed to the better functioning of the organization. This also encouraged everyone to get involved in working groups, which were open to anyone interested, even those who were not experts in areas like resource mobilization.



For several associations, **the involvement of partners (national programs, technical and financial partners) in the diagnosis is essential**. This leads to a better understanding of how the association is perceived by the different actors (Global Fund, GF recipients, national coordination bodies, ministries, and other partners) and their perceptions of the activities. This helps refine the diagnosis and recommendations, improving the quality of interventions, and in some cases, may open the way to potential funding.

## ⑤ Prioritize strengthening needs

Once the diagnosis is complete, the focus shifts to developing the capacity-building plan by identifying priority actions—whether urgent, less urgent, or medium-term—that need to be implemented. For each area, prioritization can be done democratically, using a vote to assess urgency, followed by consolidation and synthesis of the results.

*“Of course, there are resistances to change, but showing the progress of the reinforcement helps the team to stay motivated and proves the validity of the approach or the risk of not doing things by maintaining bad practices”*

## ⑥ Follow the recommendations

The associations emphasized the importance of regularly monitoring the capacity-building plan and its recommendations to track the progress of the actions being implemented and highlight the improvements made.

This can imply setting up a steering or monitoring committee, a focal point, or even working groups. Practically speaking, the association must identify a few elements for its monitoring plan a few elements: what the priority actions are, the level of priority, the person responsible for each action, the expected deliverables, as well as the set deadlines and the required budget. It is also desirable to identify who can provide this support by including other resources beyond just technical assistance.

Additionally, it is necessary to periodically take a step back to implement the recommendations, assess their progress, and allow time to 'absorb' the reflection and changes.

Finally, the association sometimes has to seek additional resources to implement the recommendations.



## HOW TO DISTRIBUTE TASKS AND EMPOWER THE TEAM?

At For Impacts in Social Health (FIS), everyone brings their own field expertise and specialty. For each area, a leader has been designated, and three working groups have been established: 1) governance, advocacy, and resource mobilization; 2) financial management and HR; and 3) programs, training, and monitoring-evaluation. Everyone participates in the group work, with each team handling specific tasks. A global tracking table provides an overview of the planned activities, outlining the tasks for each area, the responsible person, deadlines, and delivery dates. A color code helps monitor the progress status (in progress/not started).

FIS also ensured global coordination of the follow-up of the capacity-building plan. Coordination and the overall vision are maintained by the coordinator, who plays a crucial role in ensuring coherence across the team. They act as the central point for internal coordination, ensuring that everyone follows through on agreements and that deliverables are completed on time. Reporting and sharing times are scheduled during coordination meetings held twice a month (or more frequently, depending on urgency) to review progress and address any difficulties encountered. This ensures coherence and avoids working in silos.

## 5. What are the first changes observed?

The first changes for the association are often visible as soon as the diagnosis is completed, particularly in terms of awareness of areas needing improvement. While all areas are affected, most associations observe initial, significant improvements in team cohesion and governance.

**Team cohesion:** several significant changes regarding team cohesion are identified by the associations.

*“Finding solutions together enriches practices and ways of thinking”*

- Strengthening bonds and mutual support: team members come closer together, better understand each other's constraints, and develop a stronger team spirit. This promotes mutual assistance and improves interpersonal relationships. For some, daily work is less burdensome and even more efficient.
- An improvement in involvement: the approach allows everyone to feel engaged and to contribute actively.
- Improved internal communication: this resulted in formalization of meetings (informing the team in advance, setting an agenda) and implementing an activity schedule, which enhanced the flow of information and reduced the risk of information loss.
- Collective reflection is richer, facilitated by the sharing of ideas and the search for solutions.
- Collaborative work fosters knowledge sharing and skill development among colleagues, enabling them to learn from one another and gain a broader understanding of the topics discussed.

*“Working together, in a collaborative manner, allows us to (re)share the associative project, the vision, to give meaning, to better know the association and our colleagues, and even to discover their qualities”*

**Governance:** several associations have reported changes within their Board of Directors, either through changes in composition due to new elections or through increased involvement of elected members in the organization's activities. The support provided has often clarified the expectations of Board members, particularly regarding the distribution of roles.



## 6. And then, some **examples of specific reinforcement**

Several associations benefit from support in revising their associative project and developing their strategy, as well as assistance in implementing their capacity-building plan. While these supports are still often ongoing, this sharing highlights the initial effects of these efforts.

### ① **Review of the associative project and strategy**

The associative project consists of several components that address different key questions:

- The vision: how does the association see the world? What is the association's dream?
- Its mission: what is the purpose of the association? How does it bring about change?
- Its values: what are the core values shared by everyone involved in the association (volunteers, employees, board members, and beneficiaries)? What is its history?
- Its profession: what is the association's area of expertise? In which region does it operate? Who is its target audience? How does it involve the beneficiaries? Etc.

Several of these associations have conducted a review of their associative project, which sometimes needs to be revised to align with changes in context and new needs for beneficiaries. It takes time to agree on the vision and its formulation. Sometimes the project is still relevant, but questioning it will have allowed for a common foundation to be reestablished and a shared vision of the association to be (re)shared.

**Moto action Cameroun (MAC)** has revised the mission of its associative project, which initially targeted prevention in the general population. The association already had strategies to target key populations, but they were not identified as such. Thus, MAC has evolved to open up to key populations and diversify its targets. It has also expanded its scope by integrating the monitoring of geographically mobile people living with HIV and by taking into account mental health and psychosocial aspects.



*“The team was working without direction. Now it has a clear vision and regularly checks if its actions align with the association’s overall vision and strategy.”*

For **Affirmative Action**, the association initially focused on HIV and vulnerable populations. However, it has expanded its perspective by recognizing the need for a more holistic approach to health, one that also considers mental health and environmental

factors, with a strong emphasis on putting people at the center. This broader vision opens the door to new areas and even new target groups. It’s a pivotal moment for strategic reflection, as the entire approach has been reassessed in light of this updated vision.

Next, these associations determined their strategy by considering what they envisioned for the future, with a timeline of 3 to 5 years, for examples. Before defining a new strategy, it’s essential to assess the previous one to understand what worked and what didn’t. This evaluation helps provide clarity on what was accomplished, and if certain actions were not taken, it sheds light on the reasons behind it.

The strategic plan thus translates the prioritized development of the association, taking into account the associative project. Setting a strategy allows the association to have a direction, but it also gives the team a global vision of the organization where everyone contributes to the structure’s vision.

*“Working with consultants and partners has enabled us to gain a fresh perspective, better understand our environment, and grasp the changes in context. It also allowed us to gather their insights on the directions we should take and align our actions with current priorities. This collaboration has opened the door to working with multiple partners, collecting their feedback on our new directions, and exploring potential partnership opportunities.”*

## ② Communication and demand creation

Before receiving support to strengthen its communication, **Humanity First Cameroon** + lacked a visual identity and graphic charter, and the team communicated in a global, generalist manner. However, after developing a communication strategy, the team now delivers clear and concise messages, tailored specifically to either beneficiaries or partners. As a result, its audiences now recognize the association’s unique identity, thanks to the use of its own photos (while protecting the beneficiaries’ privacy) and posters that highlight peer educators. This shift in communication approach has had a significant impact, generating increased demand and bringing in more than two hundred new beneficiaries.

### ③ Monitoring, evaluation, and learning

For **For Impacts In Social Health**, certain tools to monitor activities were lacking, and the consultants helped the team to develop standardized operating procedures in the form of guides. Prior to the technical assistance, nothing was formally documented, so FIS had to create guides and toolkits to streamline activity implementation, such as how to conduct a screening campaign or carry out a tuberculosis contact investigation.

For **Positive Generation**, reporting has improved. Previously, activities were carried out without being documented, and activity reports were not filled out consistently. PG has now adopted this good practice, and it observes that even volunteers are submitting reports, which are now more detailed and comprehensive in relaying information. This enables a thorough analysis of activities, and the team has become more responsive. If they identify an issue with an activity, they can quickly address it and take the necessary actions. Additionally, the analysis is enhanced as everyone has the opportunity to provide their input on the activity and actively participate.

## Conclusion

This lesson-learning document reflects the voices of CSOs and highlights their feelings, recommendations, and key takeaways based on their experiences receiving technical assistance for diagnosis and capacity-building plan development. It also provides concrete examples of the impact of this work on associations, showcasing both the desired outcomes and unintended effects. By reading this document, associations interested in embarking on this process will gain valuable insights and practical advice directly from their peers, enabling them to approach the work with a more informed perspective.

L'Initiative warmly thanks the associations that contributed to this document for their availability and for sharing their experience and analysis of the actions taken during the whole process:

**Association des Femmes Actives et Solidaires (AFASO),  
Affirmative Action (ACT), For Impacts In Social Health (FIS),  
Humanity First Cameroon+ (HFC+), Moto action Cameroun (MAC),  
Positive Generation (PG), Presse Jeune Développement (PJD)**



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