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ADVANCING HUMAN RIGHTS IN OUR REGION

# Capacity Assessment for National Human Rights Institutions



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AN EASY GUIDE

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The guide is based on the *Capacity Assessment Manual for National Human Rights Institutions* and reflects the capacity assessment process as at August 2014. The manual can be obtained online at [www.asiapacificforum.net/support/capacityassessment/](http://www.asiapacificforum.net/support/capacityassessment/).

## Abbreviations

<b>APF</b>	Asia Pacific Forum of National Human Rights Institutions
<b>APRC</b>	UNDP Asia-Pacific Regional Centre
<b>CA</b>	Capacity assessment
<b>CAP</b>	Capacity Assessment Partnership
<b>CD</b>	Capacity development
<b>MOU</b>	Memorandum of Understanding
<b>NHRI(s)</b>	National human rights institution(s)
<b>NIRMS</b>	National Institutions and Regional Mechanisms Section, OHCHR
<b>OHCHR</b>	Office of the High Commissioner for Human Rights
<b>RCC</b>	UNDP Regional Centre in Cairo
<b>UN</b>	United Nations
<b>UNCT</b>	United Nations Country Team
<b>UNDP</b>	United Nations Development Programme



# 1 Introduction

Capacity development (CD) is the process through which individuals, organisations and societies obtain, strengthen and maintain the capabilities to set and achieve their own development objectives over time. Supporting this process requires identifying what key capacities already exist and what additional capacities may be needed to reach these objectives. This is the purpose of a capacity assessment (CA). A CA provides a comprehensive perspective on the capacities critical to achieving development objectives. It is an analysis of required capacities against existing capacities and offers strategies and action to address capacity gaps.

In 2008 the Asia Pacific Forum of National Human Rights Institutions (APF), the United Nations Development Programme Asia Pacific Regional Centre in Bangkok (UNDP APRC) and the Office of the High Commissioner for Human Rights (OHCHR) National Institutions and Regional Mechanisms Section (NIRMS) began an initiative to strengthen national human rights institutions (NHRIs) through CA. That collaboration became known as the Capacity Assessment Partnership (CAP). Because the APF's members stretch from the Pacific to West Asia, the UNDP Regional Centre in Cairo was also involved.

Since 2008 the following APF members have undertaken a CA:

- Human Rights Commission of Malaysia (SUHAKAM) 2008–9
- Human Rights Commission of the Maldives 2009
- Jordan National Centre for Human Rights 2010
- National Human Rights Commission of Thailand 2010
- Palestinian Independent Human Rights Commission 2011
- Afghanistan Independent Human Rights Commission 2011
- Mongolian Human Rights Commission 2011
- Sri Lankan Human Rights Commission 2012
- Australian Human Rights Commission 2012
- New Zealand Human Rights Commission 2012
- Philippines Commission on Human Rights 2012
- Nepal National Human Rights Commission 2013
- Bangladesh National Human Rights Commission 2013
- Ombudsman's Office of Samoa 2014
- National Human Rights Commission of Oman 2014
- National Commission on Human Rights of Indonesia (Komnas HAM) 2014.





## 2

# The capacity assessment approach for national human rights institutions

The CA methodology for NHRIs offers a very useful approach to strengthening NHRIs and increasing their effectiveness in the promotion and protection of human rights. It provides NHRIs with a process of self-assessment assisted by external expert facilitators. It incorporates both qualitative and quantitative elements in assessing the current situation of the NHRI, identifying weaknesses, forecasting future capacity requirements and developing strategies to close the capacity gaps. It provides a comprehensive picture, from all perspectives, of the NHRI's current capacities, its future required capacities and the strategies and actions proposed to meet the gap.

Unlike many other forms of assessment the CA is participatory and inclusive. It seeks to involve everyone in an NHRI – leaders (commissioners or ombudsman), senior managers and all staff, including lawyers, investigators, administrative and finance staff, secretaries, drivers, everyone. All perspectives on the NHRI's capacity are sought and welcomed. In this way, unlike many other forms of assessment, the CA is able to reflect the full range of perspectives within the NHRI and to draw on the expertise of all the NHRI's leaders and staff.

A CA is not an evaluation – evaluation looks to the past. It is not a needs assessment – needs assessment looks merely to the present. A CA looks to the future: what skills and processes, or capacities, does the NHRI need to build if it is to be as effective as possible in the future?

Uniquely, the CA process is not an external exercise, undertaken by outsiders with no detailed, inside knowledge of the NHRI. It is a self-assessment, undertaken by the NHRI itself – the leaders, senior managers and all the staff – with the assistance and support of a team of CA facilitators. Because it is an internal self-assessment, the NHRI has full ownership over the process and the product.

The CA report proposes strategies and actions to address the identified core capacity challenges and to strengthen the NHRI as a whole, including developing the capacities of individual staff and making the internal processes and procedures of the NHRI more efficient and more effective. It tries to identify strategies and actions that are within the current or reasonably obtainable resources of the NHRI.

The CA complements the strategic planning, priority setting and work planning processes of the NHRI. It can be carried out in conjunction with the strategic planning process and is a valuable means of strengthening its implementation. The CA process also helps the NHRI review its organisational structure, operational functions and business processes as well as analysing stakeholder positions.



# 3

## The recommended steps in conducting a capacity assessment for national human rights institutions

### PRELIMINARY – ENGAGING WITH THE NHRI

- 1 Conduct an initial exchange with the head of the NHRI to introduce the CA methodology to the NHRI and invite an expression of interest
- 2 Provide the head of the NHRI with a short ‘concept note’ that introduces the CA process in simple terms, including the benefits in undertaking a CA
- 3 If the NHRI is interested, agree on a preparatory visit to brief NHRI leaders and staff more fully and to seek the necessary formal approval

### THE PREPARATORY VISIT

- 4 Brief NHRI leaders and staff on the CA objectives and process
- 5 Obtain the formal agreement of the NHRI
- 6 Discuss a draft memorandum of understanding between the NHRI and the APF
- 7 Have the NHRI appoint a senior person as its Liaison Officer with the CA team
- 8 With the Liaison Officer identify documents to be reviewed and outside stakeholders to be interviewed
- 9 With the Liaison Officer prepare an initial draft program for the assessment visit
- 10 With the Liaison Officer determine whether interpretation and translation will be required for the CA
- 11 Brief the UN Country Team, where relevant and appropriate



### BETWEEN THE PREPARATORY VISIT AND THE ASSESSMENT VISIT

- 12 Conclude a memorandum of understanding between the NHRI and the APF for the conduct of the CA, setting out the responsibilities of the NHRI, organisations assisting the CA and the CA team
- 13 Appoint members to the CA team
- 14 Obtain and read the relevant documents, supplied by the Liaison Officer
- 15 Finalise the program and schedule for the assessment visit
- 16 Arrange for the Liaison Officer to make appointments for the assessment team to interview the outside stakeholders during the assessment visit
- 17 If necessary, arrange the services of interpreters and translators for the assessment visit



### THE ASSESSMENT VISIT

- 18 Conduct separate focus group discussions with NHRI leaders (that is, the Commissioners or Ombudsman), with the senior managers and with the other staff to identify core capacity issues, required future capacities and possible strategies and actions to address capacity gaps
- 19 Interview external stakeholders to obtain their views on the NHRI's capacity, including on coordination, collaboration, and past and planned engagement with the NHRI
- 20 Identify the core capacity issues
- 21 Prepare the questionnaires on the core capacity issues
- 22 Administer the questionnaires to leaders, managers and staff
- 23 Analyse qualitative and quantitative information from the discussion groups and questionnaires
- 24 Develop strategies and actions
- 25 Prepare a 'first (rough) draft' report, with findings and proposed strategies and actions
- 26 Present the 'first (rough) draft' report to NHRI leaders and senior managers, brief them on it and obtain their initial views on its findings and proposed strategies and actions

### AFTER THE ASSESSMENT VISIT

- 27 Finalise the 'second (more refined) draft' report and submit it to the NHRI leaders and senior managers for comment
- 28 Following receipt of comments on the 'second (more refined) draft', incorporate comments and finalise the CA report and provide it to the NHRI
- 29 Obtain a formal response to the report from the NHRI, together with a schedule for the implementation of those proposed strategies and actions that the NHRI accepts
- 30 Obtain annual reports from the NHRI on implementation of accepted strategies and actions





## 4

## Preliminary – engaging with the national human rights institution

The essential first step is to ensure that the NHRI is fully committed to the CA. This begins by raising the awareness of the NHRI that a CA is the best way to identify its needs for capacity building and to develop strategies and actions to meet those needs. Upon initial interest, the head of the NHRI should be provided with a short explanatory paper or concept note to explain clearly what is offered and why it is beneficial to the NHRI.

## 5

## The preparatory visit

The preparatory visit enables the CA to be explained to the NHRI's leaders, senior managers and other staff. They must understand clearly what is involved – the process and the results – and, if the CA is to proceed, they should agree to undertake the exercise on that basis. A preparatory visit of one or two days, about two months before the actual assessment visit, is important for this.

During the preparatory visit the preparatory team briefs the NHRI's leaders, senior managers and other staff. It explains the objectives of the CA, the process by which it will be conducted, the time it will take and any other demands it will place on the leaders, managers and staff, and the report they will receive when it is over. The briefing is an opportunity to clarify objectives and process, answer questions and resolve doubts and anxieties. The important message is that the actual CA is a process undertaken by the NHRI as a whole, for the NHRI, and that it is intended to be of direct and immediate benefit.

NHRI leaders should be assured of their ownership of the final report. They should be aware that the CA can produce surprising and even unwelcome results as it provides a vehicle by which the various views of all NHRI leaders and staff are articulated and presented. It should be stressed that the NHRI alone will decide what response to make to the final report but that the leaders should be committed to giving its proposed strategies and actions full and careful consideration. NHRI leaders should understand that one of their responsibilities will be making a formal response to the report and then reporting annually on the implementation of accepted strategies.

During the preparatory visit, the NHRI should decide whether to proceed with the CA and, if so, it should provide its formal agreement. The preparatory team will provide the NHRI with a draft Memorandum of Understanding (MOU) between the NHRI and the APF, setting out the responsibilities of the NHRI, the organisations assisting the CA and the CA team.



Once the NHRI formally agrees to the CA, the NHRI appoints a senior person to be Liaison Officer for the CA team. The Liaison Officer works with the preparatory team during the remainder of the preparatory visit. The Liaison Officer and the preparatory team

- identify key background documents that the CA team should read and analyse before the assessment visit
- identify outside stakeholders to be interviewed during the assessment visit, usually no more than eight interviews of about an hour each
- discuss the logistics for the assessment visit, including whether the CA team will need to travel to regional centres and some staff will need to travel to meet the team
- develop a draft program for the assessment visit
- determine whether interpretation and translation will be required.

During the preparatory visit the preparatory team also makes contact, where relevant and appropriate, with the local UN Country Team (UNCT), generally UNDP and any local office of OHCHR, usually through the UNDP Resident Representative.

## 6

## Between the preparatory visit and the assessment visit

The MOU between the NHRI and the APF, setting out the responsibilities of the NHRI, the organisations assisting the CA and the CA team, should be concluded as soon as possible after the preparatory visit. In the MOU the NHRI makes commitments

- to give serious and careful consideration to the report's findings and proposals
- to make the report available in full to all staff
- to respond formally to the report, indicating which proposed strategies and actions it accepts and will implement and with what timetable, which proposed strategies and actions it does not accept and why, and including an implementation plan for accepted strategies and actions
- to report annually to the APF on the implementation of agreed strategies and actions.

Once agreement has been reached that the CA will proceed, the members of the CA team are appointed by and drawn from the sponsoring organisations. In the Asia Pacific region, all CAs of NHRIs to date have been undertaken by APF, UNDP and OHCHR and this has proved to be very effective. UNDP and OHCHR may continue to join APF in this in the future. In addition a senior officer of an NHRI that has already undertaken a CA joins the team, providing valuable experience from both the perspective of an NHRI staff member and as a subject of a CA. A CA team of four or five members is usually adequate for most CAs.

The Liaison Officer should collect the documents identified in the preparatory visit and provide them to the CA team electronically as soon as possible after the preparatory visit. The documents provide a basic understanding of the NHRI's mandate, legal framework and authority, and give a sense of the technical and functional capacities the NHRI needs to operate effectively. Team members can make provisional lists of possible core issues to be addressed during the assessment visit based on these documents.

The schedule for the assessment visit should be finalised and confirmed between the Liaison Officer and the CA team leader before the assessment visit. The Liaison Officer takes responsibility for the in-country logistics of the assessment visit, including arranging the schedule of discussion groups and the appointments for interviews with the identified external stakeholders.



# 7

## The assessment visit

The assessment visit is very intensive. It is the focal period of the whole CA. Typically the assessment visit is conducted over two weeks but in a very large NHRI it may extend to three weeks.

The assessment visit begins with the focus group discussions. These discussions seek to identify core capacity issues for the NHRI, required capacities and possible strategies and actions to address capacity gaps. They provide qualitative data for the CA. The groups address three questions:

- what does the NHRI do well?
- what does the NHRI need to do better to be more effective in undertaking its mandate?
- what strategies and actions can be taken to build the required additional capacity?

There should be around 12 people in each discussion group but certainly no more than 15. Where required, the discussions should be interpreted to ensure that participants and team members all understand what is being said and all are free to speak and say what they wish. Each discussion will take about 90 minutes or about two hours if interpretation is required.

The interviews with the external stakeholders ask the same three questions. The purpose of the external stakeholder interviews is to validate the findings from the focus group discussions with the NHRI leaders and staff and from the documentation previously provided to the CA team. It is not to obtain a performance evaluation of the NHRI.

Following the completion of the focus group discussions, the NHRI's core capacity issues are identified. These issues will be the basis of the questionnaires that provide the quantitative component of the CA process, in addition to providing another opportunity for individual qualitative comments. The CA team prepares a list of the most significant capacity issues to emerge from the discussions and finalises the list collectively, in consultation with the NHRI's Liaison Officer.





In conducting the focus group discussions and identifying the core capacity issues the CA team should ensure that internal and external gender issues are addressed. Integrating gender elements into the CA process helps the NHRI to translate and instil key gender concepts into its mandate, functions and programs. It provides important opportunities to identify and implement long term strategies to strengthen the way gender issues are approached within the institution.

The issues identified for the questionnaires should be the most important issues raised in the discussions. The CA team should ensure that the number of issues is strictly limited so that the task of completing the questionnaire is not excessively onerous or time-consuming. Generally the CA team will identify about 10 to 12 critical capacity issues but the number should never exceed 15.

The CA questionnaire contributes further to the qualitative component of the CA and provides the quantitative component. One page of the questionnaire is prepared for each core capacity issue identified for the NHRI. For each issue respondents are asked to provide

- a rating between zero and five for the current capacity of the NHRI on that issue
- evidence to support that current rating of the NHRI's capacity
- another rating between zero and five for the capacity on that issue that the NHRI must have in five years' time if it is to do its work effectively
- recommendations for action to increase the capacity on that issue from the current capacity to the required capacity.

All NHRI leaders and staff are asked to complete a questionnaire. The questionnaire can be completed in hardcopy form or, where possible, electronically or even online, using an online survey site. The questionnaire can be filled out in English or in the local language for those with insufficient English. The completion of the questionnaire generally takes 30 to 60 minutes.

Once collected, the qualitative data from the focus group discussions and the questionnaires and the quantitative data from the questionnaires are analysed and crosschecked.

The quantitative data are the ratings of current and required future capacity given by respondents to the questionnaires for each core capacity issue. The difference between the current capacity and the required future capacity is the capacity gap, that is, the additional capacity the leaders and staff consider is required for the NHRI to function effectively and efficiently. CD strategies and actions are needed, particularly where the capacity gap is large, to help the NHRI reach the required future capacity in the timeframe identified.





The data can reveal ways to help the NHRI prioritise its CD needs: issues in which the capacity gap between 'current' and 'required' is greatest can be the issues where the NHRI chooses to focus first and most intensively. Alternatively, smaller gaps can be identified as potential 'quick wins' for the NHRI.

The responses to the questionnaire should be able to be analysed, as required and relevant,

- for each core capacity issue, comparing the ratings for current and future required capacity and showing the capacity gap, that is, the difference between the two ratings
- by individual, anonymously as the questionnaires contain no identifying information
- by group, for example, by gender, ethnicity, NHRI section or unit, office location, type of position (manager or policy or administration)
- for the NHRI as a whole.

This kind of analysis enables differences of perspective to be identified and understood and highlights specific challenges and priority capacity areas based on the NHRI's structure.

Throughout the CA process, the CA team seeks to identify strategies and actions to address the NHRI's capacity gaps – to build the NHRI's capacity from its current level to the level identified by the leaders and staff for the NHRI to be fully effective in five years' time. The strategies and actions proposed should be

- relevant to the capacity issues identified as priorities
- practical and capable of being implemented
- achievable within the five year timeframe following the CA
- within the NHRI's mandate
- within the NHRI's existing resources or reasonably obtainable additional resources.

The CA team spends the last days of the assessment visit preparing the 'first rough draft' of the report. The findings section of the report must accurately reflect the perspectives of the NHRI's leaders, senior managers and staff expressed in the focus group discussions and the questionnaires. These perspectives will be diverse, coming as they do from people at all levels of the organisation and located in all areas. The nature and extent of the differences may come as a surprise to the leaders and may be difficult for the leaders to accept. The CA team needs to prepare for this and assist the NHRI leaders to understand the varying perspectives.

The 'first rough draft' is done quickly so that it can be discussed with the NHRI leaders and senior managers before the team finishes the assessment visit. This enables the leaders and the team to discuss the CA findings and proposed strategies and actions and the envisaged contents of the final report. The CA team should be clear about the document's status. It should emphasise that the document provided at this stage is very 'rough' in style and content and requires much more work before it could be considered a proper draft.

The team's meeting with NHRI leaders on the final day of the assessment visit should not be rushed. The team introduces the 'first rough draft', presenting the analysis of the qualitative and quantitative information and explaining the strategies and actions proposed in response to the capacity gaps. The team should take the leaders and senior managers through the proposed strategies and actions one by one and discuss them with them. The team will want to ensure that, before it completes the assessment visit, it appreciates the likely responses from the NHRI leaders to the proposals so that it can develop them further or adjust them in response to the leaders' views.

At the final meeting the CA team also explains the process after the visit and the anticipated timetable.

## 8

## After the assessment visit

Promptly after the assessment visit the CA team refines the ‘first rough draft’ report into a ‘second, more refined draft’ and forwards it formally to the NHRI’s leaders and senior managers for their consideration and comment. After receiving the comments, the team finalises the report. The team should attempt to incorporate the comments received into the final report but it cannot and must not misrepresent the views expressed by those who participated in the CA. All views should be accurately represented in the report. When the report is finalised the CA team formally presents it to the NHRI and requests an official response, including an implementation plan, within the agreed timetable.

The NHRI is not expected to commit itself in advance to accepting and implementing whatever the CA report proposes. In the MOU it has committed to give serious and careful consideration to the report’s findings and proposals and to respond formally to the report, indicating which proposed strategies and actions it accepts and will implement and with what timetable, which proposed strategies and actions it does not accept and why, and including an implementation plan for accepted strategies and actions.

After the final report is completed, submitted and formally responded to, the CA is over but the process of CD continues. The APF, UNDP and OHCHR retain their commitment to supporting the NHRI. They explore with the NHRI ways in which they can be of assistance in implementing the CA’s strategies and actions and building capacity, as well as by offering and providing technical assistance and monitoring implementation. The NHRI retains its commitment to reporting on its implementation of the agreed strategies and actions arising from the CA.



# 9

## From capacity challenges to strategies and actions

The strategies and actions in the final CA report seek to address the NHRI's core capacity issues. Generally, the core capacity issues are related and inter-dependent. A CD response will be more effective if it combines actions for improvement across more than one of the issues. So, one strategy or action may address several capacity issues, building on existing strengths and on additional ones over time.

Strategies and actions can be directed towards **strengthening the NHRI's independence and legitimacy**. The CA must consider how the NHRI can do its work as effectively as possible in spite of any legislative deficiencies and also what, if anything, the NHRI itself can do to encourage the enactment of better and stronger legislation. The CA report is addressed to the NHRI and so should not propose strategies and actions that are beyond the power of the NHRI. The CA can propose that the NHRI examine its legislative mandate more closely and, through interpretation, adopt realistic but creative ways to overcome perceived deficiencies within the context of the existing law.

Strategies and actions can be directed towards **strengthening the NHRI's institutional arrangements**. Institutional arrangements have emerged as a critical core capacity issue in many CAs. Strategies and actions to review the NHRI's organisational structure, internal policies, processes, strategic and annual work plans, and standard operating procedures are common in CA reports.







Strategies and actions can be directed towards **strengthening leadership and management functions**. Leadership is a function and responsibility shared by all those who have decision making and supervisory authority within the NHRI. Depending on the NHRI, it may include the commission members or ombudsman, the executive director (or secretary-general) and directors and senior managers. The development of NHRI leadership capacities is a critical component to the full and effective functioning of an NHRI.

Strategies and actions can be directed towards **strengthening human resource management**. For any organisation, human resource capacities include

- individual expertise, skills and experience – technical and functional capacities – relevant to the position
- institutional personnel policies and procedures, including recruitment and promotional procedures, incentive systems, performance management, training and development plans and programs, and team relations.

The NHRI CAs to date have highlighted the need to strengthen and implement mechanisms that allow for a fair, transparent and merit-based human resource management system that motivates and supports staff to carry out their functions.

Strategies and actions can be directed towards **strengthening knowledge and knowledge management**. NHRIs require staff with expertise and experience in international human rights law, the domestic human rights situation, and ways to increase the promotion and protection of human rights. CD strategies and actions have also been recommended to build technical and functional capacities and skill sets of the staff. A properly running and adequate information technology infrastructure within the NHRI is essential in strengthening knowledge and knowledge management.

Strategies and actions can be directed towards **strengthening partnerships and external relations**. NHRIs do extensive human rights awareness raising work. They do human rights advocacy towards government ministries, the parliament, and the judiciary. Engagement with civil society organisations, non-governmental organisations, the media, and human rights defenders has also emerged as an area of significance for the NHRI.

# 10

## Conclusion – the benefits of capacity assessments to national human rights institutions

NHRIs that have undertaken CAs have said that they benefit greatly from the process. They have ranked their participation in the CA process as relevant, effective and efficient with very high impact.

They have listed the benefits of participation in a CA:

- better understanding of current organisational and programming capacities
- rigorous assessment of capacity needs
- sound strategies and clear priorities for capacity building
- more effective and evidence-based strategic planning
- better understanding of the link between internal processes and externally oriented activities
- better identification of the similarities and differences in perceptions of capacities and functioning across different units and levels of the NHRI
- a focus on leadership and management, precipitating a review of decision making processes and on internal relationships
- a new focus on training programmes
- the development or review of standard operating procedures, manuals and guidelines
- changes in human resources policies, including revisiting and clarifying roles and responsibilities
- a strong analytical report that can assist in securing the support needed to implement the strategies
- a baseline assessment of capacity that can be used to measure improvement and achievement over time
- an additional means to improve its effectiveness
- training for key NHRI personnel in CA and CD
- the opportunity to lead CD for other NHRIs in the Asia Pacific region
- a firm basis for international cooperation to assist NHRIs when they undertake institutional strengthening through CD.









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