

**Students Bridging the Information Gap**

**Needs Assessment Tool  
for  
Orphanages and Schools**

**January 2008  
Accra, Ghana**

## Introduction

Students Bridging the Information Gap (SBIG) is a U.S.-based NGO that harnesses the humanitarian interest of students, corporate and faith-based partners and other civic groups to support fellow students in less-developed countries. SBIG is developing a pilot program in Ghana to select an orphanage or school that meets certain criteria each year to benefit from its assistance.

A particular area of interest to SBIG is provision of computers for learning labs and age appropriate reading material, although other forms of support may also be provided. Selection will be based on a formal needs assessment process that examines criteria such as physical plant/infrastructure, access to water and electricity, characteristics of the resident population and staff, reputation of the organization and other factors contained in this tool.

The purpose of the needs assessment process is to:

- Provide adequate and reliable information upon which a selection decision can be based,
- Specify in detail the needs of selected organizations to enable well-targeted provision of support that will address the most salient needs of the organization that fit within the goals of Students Bridging the Information Gap,
- Establish contacts with the managers and leaders of the organization, initiate relationship and obtain other information on the operations of the organization that enhance its operations and effective use of the support it receives if selected.

The tool is organized into three sections:

- Section A – Assessment of History, Management and Infrastructure
- Section B - Assessment of Student/Resident population, Staffing and Instructional Programs
- Section C – Summary Observations, Conclusions and Recommendations by the Needs Assessment Team

On arriving at the facility, the needs assessment team must first introduce themselves to the person in-charge, indicating the purpose of the visit. Plans for the visit should have been confirmed with the management of the facility in advance.

Date of Visit: (Month/Day/Year) \_\_\_\_\_

**Identification of the organization being assessed**

<b>Region</b>	
<b>District</b>	
<b>Organization/Facility Name</b>	
<b>Type of Facility</b>	Private orphanage = 1, Public orphanage = 2, Private school = 3, Public school = 4, Other = 5 (Specify _____)
<b>Name of organization/facility person in-charge</b>	
<b>Title of person in-charge</b>	
<b>Mailing address</b>	
<b>Title of person in-charge</b>	
<b>In-charge or facility contact information</b>	Phone(s):  E-mail:

**Identification of the SBIG Needs Assessment Team**

<b>Team Member Name(s) and Contacts</b>	1. Name:
	Mobile phone no.
	E-mail address
	1. Name:
	Mobile phone no.
	E-mail address

## SECTION A

### Basic Information on the Organization

**Instructions:** Combine interviews with key respondents, visual observation of facilities, and review of documents. If an item is not observed or not applicable indicate NA in the Comment column. If the team has access to a digital camera photographs should be taken of the facilities to give additional perspective beyond the written information. Photographs can subsequently be attached to the assessment report.

<i>History and Management</i>		<b>Comments</b>
1	How long has the organization been in existence?	
2	What is the stated purpose or mission of the organization?	
3	Is it controlled by any other organization (governmental, church, etc.)? <u>If YES</u> , please give the name of the parent organization and the name and contact information for the primary responsible official?	Yes / No (circle)
4	Does the organization have a Board of Directors or similar governing body? If YES, please describe - # of members, term of service, frequency of meetings, contact information for Chairperson)	Yes / No (circle)
5	What is the annual operating budget of the organization? (If given in local currency, provide exchange rate and USD equivalent)	
6	What has been the pattern of the organization's budget over the past 3 years?	
7	What are the most significant sources of support for the organization and what types of support are provided?	
8	Is the organization recognized/certified by the Department of Social Welfare or other relevant regulatory body? If Yes, ask to see copies of the documents and, if possible, obtain photocopies.	Yes / No (circle)
9	Has the organization ever received awards or recognitions for its programs? If YES, please describe.	Yes / No (circle)

<i>Infrastructure</i>		<b>Comments Counsel / Action</b>
1	What is the size of the land space on which the facility(ies) being assessed is located?	
2	Who owns the land on which the facility(ies) are located?	
3	What is the general condition or description of the site (urban, rural, wooded, cleared, fenced compound, etc.)	
4	How many buildings are located at the site? Please give details of the number, type, age and condition of the buildings.	No.:
		Types:
		Age/Condition:
5	What are the sources of water and electricity for the facilities? Circle Y/N at right and include COMMENTS in the space below	Piped water:                      Yes / No (circle)
		Well or borehole:                      Yes / No (circle)
		Storage tank available:    Yes / No (circle)
		On public electricity grid: Yes / No (circle)
		Generator:                                      Yes / No (circle) If YES, describe capacity/condition:
		What voltage is found in the country/at the facility?  What type of plugs are used?
6	Are any construction projects planned or in progress? If YES, please give details of type, estimated cost and timing.	Yes / No (circle)

**Section B**

**Assessment related to the Student/Resident population, Staffing, Living Conditions and Instructional Programs**

**Instructions:** Combine interviews with key respondents, including managers and teachers, visual observation of living and teaching areas, and review of documents. If an item is not observed or not applicable indicate NA in the Comment column.

<i>Students/Residents</i>		<b>Comments</b>		
1	How many students or residents are served by the organization? Please provide details as shown at right and any other COMMENTS below.	Age Group	# Male	# Female
		<or= 5 years		
		6-10 years		
		11-15 years		
		16-19 years		
		TOTALS BY SEX		
		OVERALL TOTAL		
2	Are all of the students residential or do additional ones commute? Please describe.			
3	What are the channels through which students/residents come to the facility?			
4	What are the non-academic and academic needs of the students? Please be as specific as possible for each category, e.g., which type of clothing, which sizes/ages, etc.	Clothing:		
		Toiletries:		
		Food:		

		Pencils and paper:
		Textbooks:
		OTHER:
5	What are the students' primary vocational plans? Please describe in some detail.	
6	Do any students plan to attend college? If YES, please describe what programs of study they intend to pursue.	Yes / No (circle)
7	What has been the record of your organization in placing students in college?	
<b>Staffing</b>		<b>Comments</b>
1	Describe the number and type of staff at the facility/organization?	Managers:  Teachers – Full-time:  Part-time:  Custodians/Drivers/Etc. :
2	What are the qualifications of the teachers?	
3	How are teachers compensated?	
4	What are the primary needs related to staffing?	

<b><i>Instructional Programs</i></b>		<b>Comments</b>
1	What instructional programs are offered by the facility/organization? Please provide details, e.g., regular academic programs, IT, vocational, etc.	
2	Does the facility have any computers available for instructional programs? If YES, please give details of number and condition.	Yes / No (circle)
3	If YES to previous question, please describe the facility where the computers are housed in terms of adequacy of space, power supply, security, etc.	
4	What is the computer instruction capacity of the organization? How many instructors? What qualifications?	
5	What software programs are used for instruction?	
6	What is the availability of printers?	
7	What is the availability of internet connections? If available, how is the use of internet by students/residents monitored?	
8	Does the facility have a space that could be used as a library to house books? If YES, please describe size, type of building, availability of electricity, shelving for books, general capacity to receive books and other learning materials.	Yes / No (circle)



**SECTION C**

**Summary Observations, Conclusions and Recommendations**

**Instructions:** Based on the responses to questions in Sections A and B, the team should determine whether it recommends further consideration of the organization to be a recipient of SBIG support.

		<b>Observations, Conclusions And Recommendations</b>
	<b>History and Management</b>	
	<b>Infrastructure</b>	
	<b>Students/Residents</b>	
	<b>Staffing</b>	
	<b>Instructional Programs</b>	
	<b>OVERALL</b>	

**Signature(s) of SBIG team:** \_\_\_\_\_  
Date

\_\_\_\_\_  
Date