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CAPACITY STRENGTHENING MEASUREMENT BRIEF

# Capacity Strengthening to Improve Nutrition: Measuring the Impact of Your Approach



Credit: Global Communities/Juozas Cernius

## INTRODUCTION

With the release of the *USAID Local Capacity Strengthening Policy* in October 2022, USAID and its partners have committed to a strategic and intentional investment in the process of partnering with local actors—individuals, organizations, and networks—to jointly improve performance (USAID 2022). Effective local capacity strengthening is central to the *USAID Multi-Sectoral Nutrition Strategy* (2014).

Measuring capacity strengthening and changes in skills, behaviors, and attitudes over time (while understanding the challenges to capacity strengthening measurement) requires a solid background and knowledge of foundational capacity strengthening concepts.

To support implementers of nutrition programs that include capacity strengthening as a key component of their work, we have designed this series of capacity strengthening measurement briefs. This brief outlines essential principles for design and measurement. The [second brief](#) focuses on measurement of training. The [third brief](#) is a detailed case study that illustrates measurement tools and approaches at work.

### Purpose

This document outlines essential principles of capacity strengthening design and measurement that support the achievement of nutrition outcomes.

## CHALLENGES TO MEASURING CAPACITY STRENGTHENING ACTIVITIES WITHIN THE NUTRITION CONTEXT

While research on capacity strengthening approaches exists in other sectors, there is limited evidence on what works for nutrition. Additionally, the multi-sectoral nature of nutrition adds a layer of complexity (SUN 2016), requiring a larger body of stakeholders to understand and agree on the value of investing in rigorous capacity strengthening measurement. (See [box 1](#)).

Measurement of capacity strengthening outcomes is difficult. Many capacity measurement tools—

- rely on self-assessment
- tend to focus on existing but dormant capacity rather than performance
- seldom yield information on the underlying determinants of performance
- are frequently ill suited for environments characterized by a high degree of complexity (Levinger 2021).

## KEY ELEMENTS OF CAPACITY STRENGTHENING

Capacity strengthening can also be difficult to measure due to varying definitions of capacity. There are four key elements of capacity strengthening (Levinger 2021):

1. Practitioners can strengthen capacity at multiple levels: individual, community, organizational, and systemic.
2. These levels are nested and interconnected; capacity strengthening requires coordination across multiple levels.
3. Demonstrating capacity involves doing and achieving.
4. Capacity strengthening should be highly contextualized. Find the best fit for the circumstance by aligning with the unique environment; this is more important than following the universal best practice.

## OVERVIEW OF KEY CAPACITY DIMENSIONS

To assess and measure capacity strengthening, whether for nutrition or any other sector, practitioners must first determine which dimension to target for strengthening. Capacity strengthening is a layered approach that includes four dimensions: the individual, organizational, community, and systems.



### Individual

The innermost sphere (royal blue in figure 1) is the individual dimension where practitioners strengthen particular skills. Skill building includes the use of knowledge to increase an individuals' ability to perform a particular role more effectively.

Examples of approaches include—

- training (pre- and in-service)
- peer to peer learning
- mentoring
- coaching.

Training is one of the most commonly used skill-building methods. On-the-job training is useful when individuals repeat actions such as following specific guidelines or standards, and when an individual has limited previous knowledge or skills related to the role. Peer to peer learning encourages experienced practitioners to support continued knowledge and skill development of others. Mentoring and coaching improve skill building when incorporated with training programs in the nutrition sector (Monn et al. 2013).

### Considerations for Improving Nutrition

These approaches help implementers—

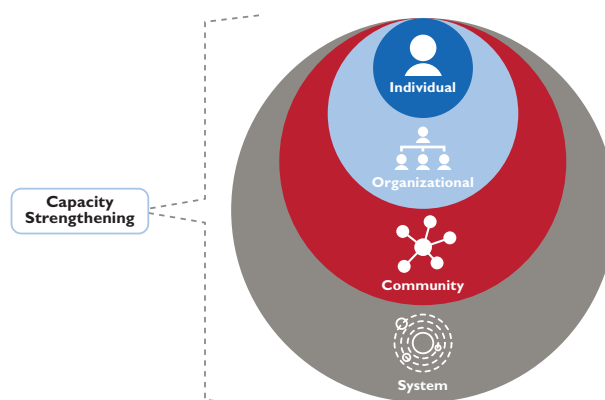
- Increase the capacity of frontline workers to plan, manage, and implement various nutrition interventions to improve health and nutrition outcomes in infants and young children (e.g., caregiver nutrition counseling, anthropometric measurement).



### Organizational

The second tier, the organizational dimension (light blue), focuses on structure, process, and management system improvement. Examples of tools and approaches include—

Figure 1. Key Capacity Dimensions



Source: Authors

- technical assistance/consulting
- strategic planning
- causal and performance analysis: identifying the desires/incentives for staff to accomplish tasks
- improving communication and feedback mechanisms.

### Considerations for Improving Nutrition

- Include appropriate nutrition indicators in health information and management systems to improve nutrition program effectiveness. Use the indicators in periodic review and decision-making at all levels. Strengthen organizational processes to improve feedback mechanisms, information systems, and data utilization.



### Community and Systems

The final two tiers, the community (red) and systems (gray) dimensions develop and improve relationships. Relationships bring local actors and organizations together to ensure sustainable service delivery coverage, access, and quality over time.

Examples of tools and approaches include—

- technical working groups and forums
- communities of practice memoranda of understanding
- private sector partnership development.

#### Considerations for Improving Nutrition

- Community-based initiatives typically link to an organizational structure, such as the village health committee or a mother-to mother peer group. An external service delivery worker facilitates the work of a community mobilizer who brings mothers (or community members) together for the pursuit of the agreed objectives (e.g., improved infant and young child feeding [IYCF] practices). Once counseling begins, monitor IYCF indicators related to breastfeeding and dietary diversity to determine whether implementation of these practices impacts a child's diet.

- Supportive supervision ensures nutrition and health professionals have the capacity to deliver quality services that improve health and nutrition outcomes.
- National committees create, implement, monitor, and adequately fund policies and legislation that support optimal nutrition outcomes, including investment in national fortification standards and antenatal and prenatal care counseling procedures.

See **ANNEX I** for additional information on the key components and focal areas within each dimension, illustrative assessment areas, and programmatic examples within the nutrition sector.

### BOX I. CAPACITY STRENGTHENING MEASUREMENT EVIDENCE AND POLICIES

A recent review (Levinger 2021) identified several important lessons about strengthening capacity and measuring performance. Emergent learning, the ongoing exploration of a locally defined competency/capacity area through intentional, iterative learning experiments, is critical in complex settings. In the early stages of a capacity assessment, it may not be clear what to measure or detect patterns, as initial learning and understanding of the capacities and environment are evolving.

USAID's Local Capacity Strengthening Policy (2022) outlines research backed approaches for developing local capacity across various sectors, contexts, countries, and actors. The policy describes seven guiding principles for effective local capacity development:

#### Principles for Effective Programming of Local Capacity Strengthening

1. Start with the local system.
2. Strengthen diverse capacities through diverse approaches.
3. Plan for and measure performance improvement in collaboration with local partners.

#### Principles for Equitable Partnerships in Local Capacity Strengthening

4. Align capacity strengthening with local priorities.
5. Appreciate and build on existing capacities.
6. Be mindful of and mitigate the unintended consequences of our support for local capacity strengthening.
7. Practice mutuality with local actors.

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## **USAID ADVANCING NUTRITION**

Implemented by:  
JSI Research & Training Institute, Inc.  
2733 Crystal Drive  
4th Floor  
Arlington, VA 22202

Phone: 703-528-7474  
Email: [info@advancingnutrition.org](mailto:info@advancingnutrition.org)  
Web: [advancingnutrition.org](http://advancingnutrition.org)

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