



Capacity Strengthening for Better Nutrition Outcomes

What Works with Local Partners?

Local organizations in low- and middle-income countries play a critical role in strengthening health systems, responding to humanitarian crises and food insecurity, and addressing the underlying causes of poor health and undernutrition (WHO 2019). Donors such as USAID are aligning their approaches with these promising findings and promoting locally-led development to effectively and sustainably address nutrition challenges (USAID 2021).

Since 2018, USAID Advancing Nutrition, USAID's flagship multi-sectoral nutrition project, has supported local organizations to deliver effective nutrition programming, including the provision of technical assistance (TA) and organizational development. This brief summarizes our experience and what we learned through that process. By sharing what we heard from partners about worked and what did not, we hope to provide others with practical insights for stronger local partnerships.

What Worked (and What Didn't)

Our capacity strengthening programs incorporate a range of approaches, including training, mentoring, document and policy reviews, peer learning, and networking. Some activities, such as our [New Partnerships Initiative program](#), combined technical assistance with funding for program implementation, encouraging partners to test new tools and approaches in areas such as social and behavior change. We aimed to make our work more relevant and useful to partners by: 1) using local experts as trainers, coaches, and mentors; 2) promoting peer learning at country, regional, and global levels; and 3) facilitating multi-sectoral collaboration.

We monitored the effectiveness of approaches and collected feedback from staff and partners. Some activities yielded encouraging results while others taught us useful lessons.

Keep Partner Priorities in Sharp Focus

Across USAID Advancing Nutrition's capacity strengthening programs, we began by identifying the intersection between partners' own priorities for growth and the focus of the program, as defined by the funder. Within our NPI program, we kept partner priorities in focus by interviewing and selecting TA providers together. The TA provider worked with the partner to design context-specific training and provide ongoing, in-person TA that reflected partners' preferred ways of learning and schedule.

In Nigeria, [our program](#) engaged in a similar process to select advisors, who were embedded within the state committees for food and nutrition (SCFNs), supported the committee's day-to-day priorities and reported to an SCFN supervisor. These advisors supported work across the SCFN, with a focus on transferring skills to others in key areas: advocacy for nutrition budget allocation; developing monitoring, evaluation and learning frameworks for food security and nutrition; and ensuring quality program activities.

In Kenya, we collaborated with the Ministry of Health to design a mentorship program where facility-based mentors guide health workers providing [counseling to pregnant and lactating mothers](#) on overcoming obstacles to breastfeeding, offering technical expertise and addressing barriers to quality counseling in ways that are aligned with health worker's immediate learning needs.

When local partner priorities are at the center of our work, we are likely to select TA providers with the right level of expertise *and* who understand the context. When TA providers are accountable to the partner, they deliver assistance at a pace and scale that is acceptable for that partner. This leads to better results: NPI partners improved their organizational efficiency, through focused coaching in financial reporting and grants management. SCFNs increased their ability to advocate and successfully influence nutrition policy at the state level with support of their embedded consultants. Kenyan facility-based mentors now provide ongoing guidance to strengthen their colleagues' competency in breastfeeding counseling.

Networking and Connecting Supports Longer Term Success

Fostering connections among people and organizations working in nutrition resulted in significant learning and new opportunities for partners, leading us to consider it both an effective and underutilized approach that deserves greater emphasis. For example, convening 10 civil society organizations (CSO) across three provinces in Kenya fostered greater coordination of advocacy efforts for increased government nutrition funding and accountability. Additionally, using government staff as trainers for CSOs on the National Nutrition Scorecard built trust and familiarity between the government officials and CSO representatives, thereby enhancing future collaboration.

The Learning Network for Nutrition Surveillance, known as LeNNS, brought together researchers, government officials and other stakeholders from eight countries to share learning within the region. Not only did this work promote collaboration across borders, but also strengthened national-level collaborations, as stakeholders working on policy and research rarely had time together to focus on nutrition surveillance. Quarterly in-person technical meetings featured both regional and global experts, while monthly online meetings supported collaboration in specific technical areas.

Similarly, stakeholders working to strengthen the nutrition components of pre-service training for nurses benefited from networking and exchange across six countries: Bangladesh, the Democratic Republic of Congo, Ghana, Malawi, Mozambique, and the Kyrgyz Republic. During the consultation, stakeholders learned from each other's challenges and achievements. A representative group then articulated a specific [call-to-action](#) for governments, medical review boards and others. These recommendations have already resulted in stronger processes for integrating nutrition content into pre-service training curricula in the Kyrgyz Republic.

Short-Term Training Alone Can Undermine Program Success

Short-term training (generally 3–5 days) is a familiar and overused approach for both implementers and participants, despite the availability of other, more effective learning methods. NPI partners reported that training alone did not change their performance in complex, adaptive subjects like reporting on program results. This type of skill building is more effectively achieved through expert feedback and repetition. Similar feedback came from participants in a five-day course on leadership skills conducted with the SCFNs in Nigeria, which was organized by USAID Advancing Nutrition consortium member [African Nutrition Learning Program](#) (ANLP). Attendees reported that their knowledge and understanding of key topics improved. However, follow up support would ensure that they could apply insights and sustain progress in their local contexts.

Across our programs, learning outcomes increased significantly when training was combined with weekly or monthly TA from in-country staff and consultants. This was especially true when cross-functional teams received the training and coaching. For example, in our NPI program, financial management training was delivered for all staff. In Kenya, our mentorship program for breastfeeding counseling also included sessions for facility leadership, who were engaged throughout the process. Training plus coaching is needed to support change within organizational systems.

Short Funding Cycles Can Undermine Growth

We heard from our partners that the most significant challenge to creating lasting change was time, particularly short project cycles. For our local partners with tight budgets, there was significant pressure on staff time, since teams always had competing priorities to manage and it was hard to focus on what they needed to learn. This quickly left several of our partners feeling overburdened by TA. For all programs that aim to change organizations or systems, it is essential to budget staff time for learning.

For smaller organizations, such as our NPI partners, there was the additional challenge that short project funding cycles make it difficult to retain committed, newly trained staff after the project ends. As we continue to reflect on practices for better partnerships, we should focus on strategies to support ongoing funding and growth for the organization.

Our programs underscored that local capacity strengthening requires commitment. A longer and more graduated approach would support partner success and strengthen results.

What is Important

Reflecting on these lessons from our nutrition work, our staff and partners identified five factors we consider crucial for effective and sustainable partnerships:

1. **Ownership is the cornerstone**—Local partners require the agency and confidence to navigate contextual challenges. Understanding partners' aspirations and barriers as the basis of our support was essential to achieving our shared interest of improving nutrition outcomes.
2. **Trusting relationships facilitate learning**—As we design programs, we often consider tools and knowledge to be most important. Yet, setting out to establish supportive relationships that encourage reflection and feedback are also essential. Over the course of implementing our programs, we noticed that partner TA requests initially focused on access to expertise, but later shifted toward requesting feedback on their processes and approaches. Giving feedback requires trust and the ability to thoughtfully observe, discuss and accompany partners through the learning process. We responded to that shift by building in time for reflection and working on co-created solutions. This trust-based process also supports partners to develop the adaptive skills and processes needed for continuous improvement over time.
3. **Support must match a partner's strengths, pace, and scale**—Local partners bring a unique set of strengths, constraints, and challenges to the work. Customized support builds upon partners' existing strengths, not overly focusing on weaknesses or setting a very high bar for performance. For example, recognizing that not every local partner desires direct donor funding as their next step, we focused on critical functions like leadership, reporting, financial management, and monitoring and evaluation, creating pathways toward sub-grant relationships rather than focusing only on the complex systems required for direct recipients of USAID funding.
4. **Peer and self-directed learning complement expert knowledge**—Advances in nutrition science, standards, and best practices are important. Yet nutrition service delivery involves unique, local approaches that account for context. When we encouraged peer learning by introducing partners to local contacts, resources available locally, such as programs through universities or government, their growth was more focused and could progress over time.
5. **The local nutrition context matters**—Local organizations are key to reaching communities and households where change can be most powerful, but they cannot do it alone. Effective health systems are composed of a complex web of stakeholder interactions and motivations, with specific entry points for nutrition. Our programs demonstrated that by reframing our role toward facilitating connections between local stakeholders, particularly government, we helped these stakeholders to work together and make a positive impact.

USAID Advancing Nutrition's five years' experience has taught us that effective and resilient nutrition service delivery infrastructure requires a long-term investment in local partnerships. Leveraging the resources and relationships already present in the local context is key to supporting positive change.

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USAID Advancing Nutrition is the Agency’s flagship multi-sectoral nutrition project, addressing the root causes of malnutrition to save lives and enhance long-term health and development.

This document is made possible by the generous support of the American people through the U. S. Agency for International Development. It was prepared under the terms of contract 7200AA18C00070 awarded to JSI Research & Training Institute, Inc. The contents are the responsibility of JSI and do not necessarily reflect