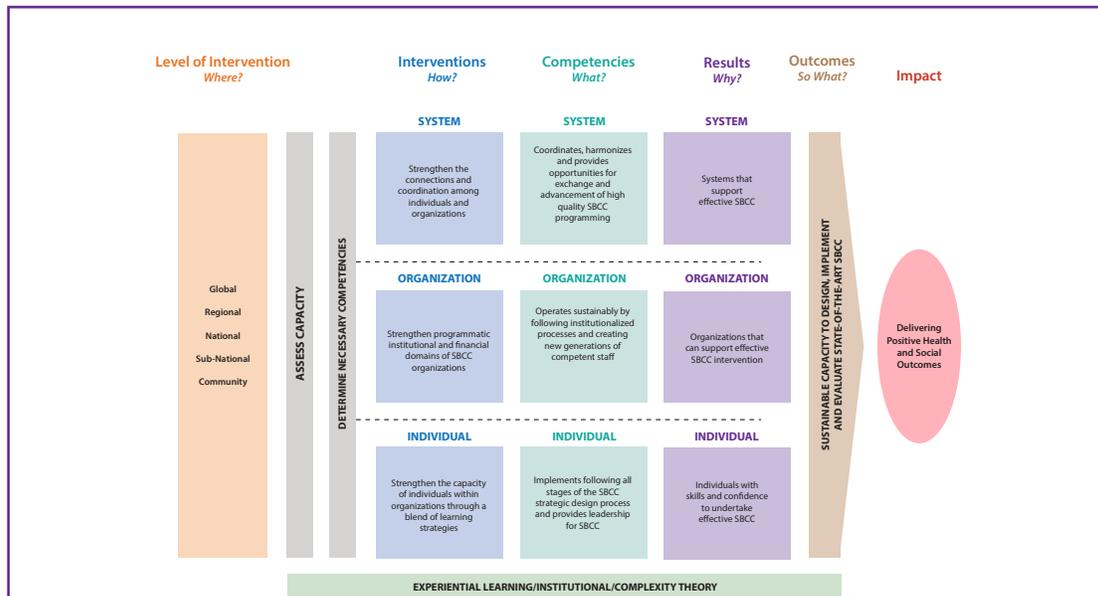




THE SBCC CAPACITY ECOSYSTEM™

A Model for Social and Behavior Change Communication Capacity Strengthening



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USAID
FROM THE AMERICAN PEOPLE

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INTRODUCTION

A NEW MODEL FOR SBCC CAPACITY STRENGTHENING

The Health Communication Capacity Collaborative (HC3) **SBCC Capacity Ecosystem™** is a model that reflects the systematic assessment, design and implementation of customized and strategic capacity strengthening for social and behavior change communication (SBCC). While arising from the work of HC3, it is a model that can be used by any project seeking to strengthen SBCC capacity at the local, regional or global level.

WHY AN “ECOSYSTEM”?

HC3 wants to disrupt the notion of linear or hierarchical change often associated with capacity strengthening initiatives. We know from experience that capacity strengthening is a dynamic process that involves many interacting agents. An “ecosystem” speaks to the inherently complex, interconnected and often unpredictable nature of capacity strengthening and to the dynamic human environments in which we work. It recognizes that one intervention is almost never enough to make change.

SYSTEMS, ORGANIZATIONS, INDIVIDUALS

At the heart of the ecosystem is the focus on the capacity strengthening of individuals, organizations and systems, which is also consistent with the [socio-ecological model](#) that guides SBCC program implementation. It is important to understand the interconnectedness of these three audiences: individuals function in organizations and organizations operate in systems. Systems are the “connective tissue” that link and support the organizations and the individuals.

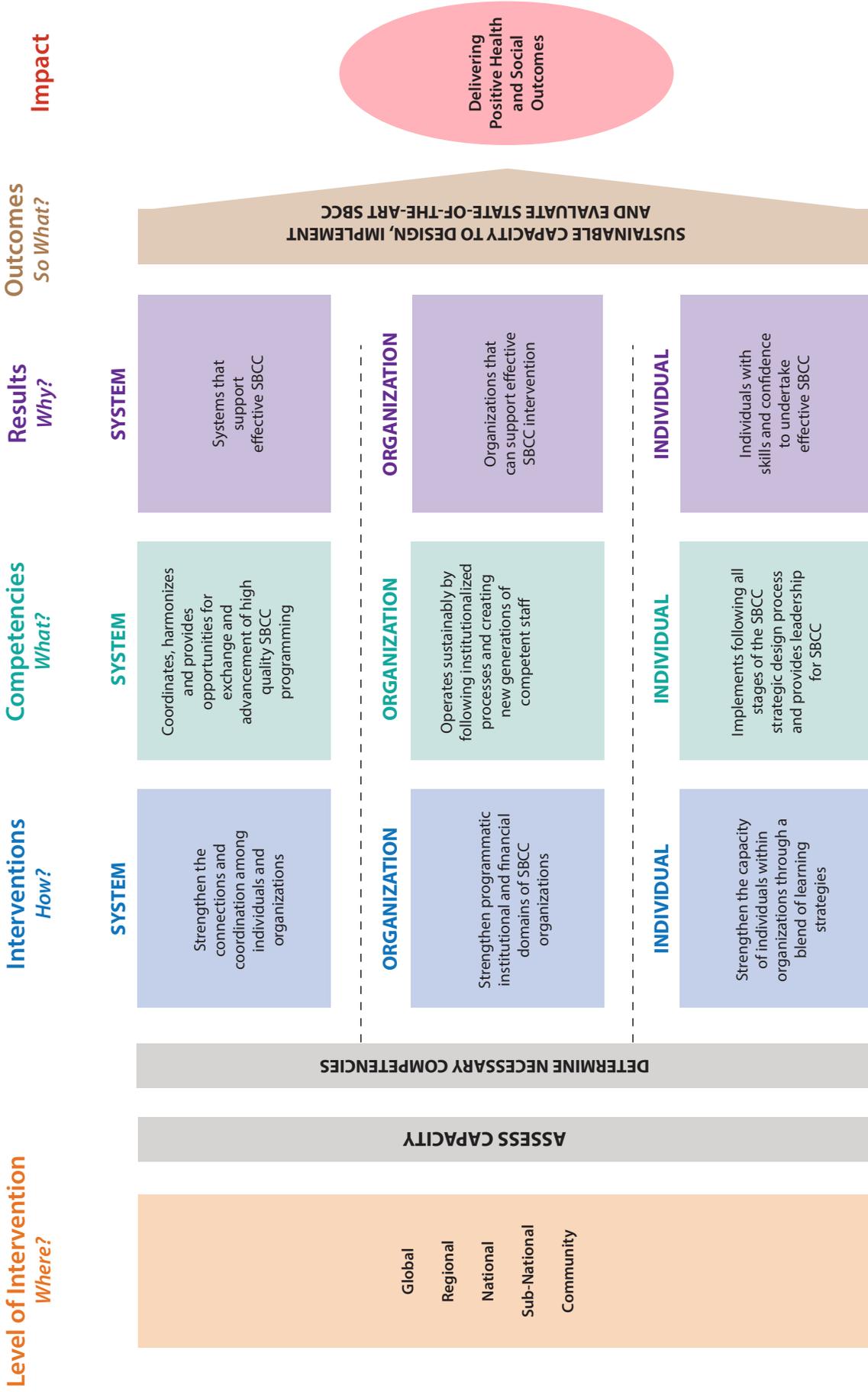
ITERATIVE AND SYSTEMATIC

SBCC capacity strengthening is a thoughtfully planned and iterative process. Just as SBCC implementation follows a strategic design process, capacity strengthening follows a similar process of inquiry, development, implementation, evaluation and re-planning. Capacity strengthening is not a “one-off” training, but a planned program of activities based on in-depth knowledge of the beneficiaries and their needs and goals.

FOCUS ON RELATIONSHIPS

Capacity strengthening is not just a technical process but also a social process. Building trusting collaborative relationships is critical in an SBCC capacity strengthening program. Given this reality, country-based partners are best situated to lead capacity strengthening initiatives given their deep understanding of the cultural, political and social context and of the networks of relationships in which SBCC practitioners and organizations are embedded. Moreover, the ideal scenario is one in which the recipient of the capacity strengthening is not only fully engaged as an equal partner in their own capacity strengthening but drives the capacity strengthening agenda.

SBCC Capacity Ecosystem™



EXPERIENTIAL LEARNING/INSTITUTIONAL/COMPLEXITY THEORY

EXPLORING THE ECOSYSTEM

THE ECOSYSTEM’S MAJOR ELEMENTS: A BRIEF OVERVIEW

The ecosystem rests on a foundation which draws from three distinct but interrelated **THEORIES**. Then, moving from the left to the right of the model, the design of a capacity strengthening program begins with the identification of the **LEVEL OF INTERVENTION (WHERE)** at which capacity strengthening will focus and subsequently a capacity **ASSESSMENT** is conducted at the levels identified.

That assessment will determine the competencies that the capacity strengthening should build. With that information, **INTERVENTIONS (HOW)** are planned at the systems, organizational and/or individual levels. Those interventions are designed to affect the identified **COMPETENCIES (WHAT)** to achieve desired **RESULTS (WHY)**. The collective effect of those achievements will lead to capacity building **OUTCOMES** which ultimately contribute to overall public health **IMPACT**.

WHERE ARE THE ARROWS IN THIS MODEL?

The ecosystem is deliberately non-directional – hence the absence of arrows. Experience shows that capacity strengthening does not always move in a forward linear progression. This can be true in advantageous or disadvantageous ways. For example, significant time may be spent building the technical skills of an NGO only to then witness high staff turnover. Major political upheaval in a country may disrupt systems-level capacity, sometimes for years at a time, taking existing capacity backwards.

Conversely, a dynamic and influential national or sub-national leader may emerge midway through a capacity program and expand its reach, causing it to be reevaluated for the better and to set sights higher than initially anticipated. Another donor may fund a complementary capacity strengthening program that could synergize with an existing program, resulting in a dramatic increase in capacity.

A non-linear ecosystem approach is a reminder to remain flexible so as to respond thoughtfully and strategically to the emergence of some of these threats/opportunities.

STEP BY STEP

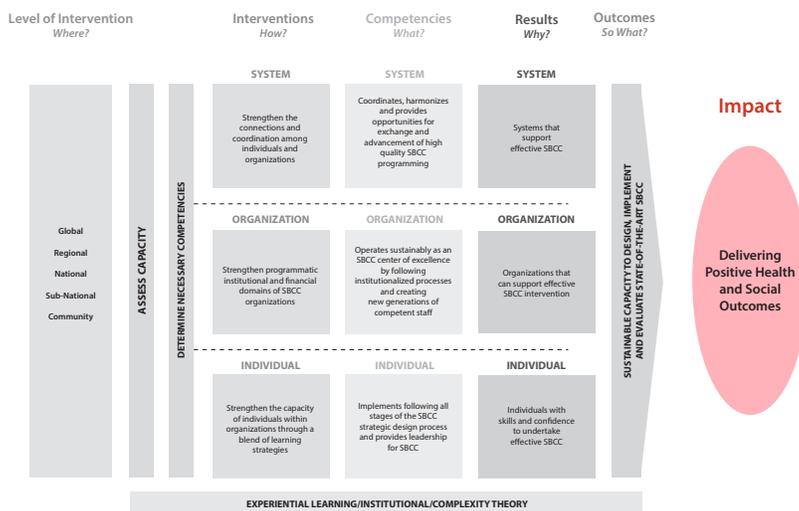
In a more detailed exploration of the model, it is useful to start at the far right. Knowing where a capacity strengthening program should go, it is easier to understand how to get there.

IMPACT

Before beginning an SBCC capacity strengthening program, it is critical to articulate the overall goal, or impact, of the project.

In HC3, impact is defined as "Delivering positive health and social outcomes."

Another SBCC capacity strengthening project may choose to refine this description or develop a new impact statement altogether.



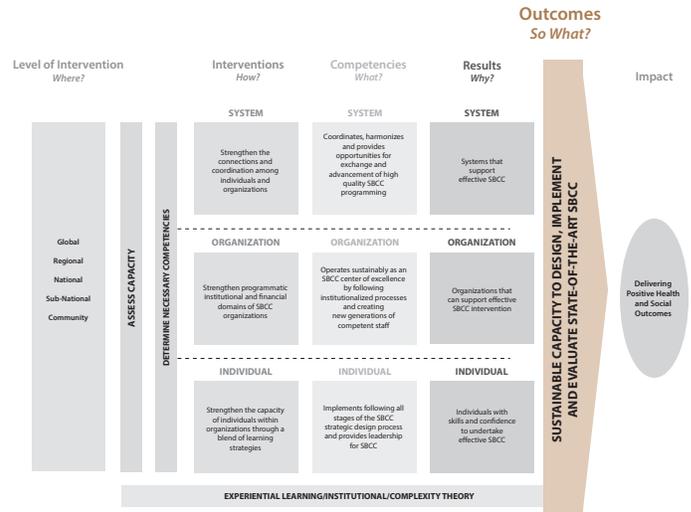
HOW DOES CAPACITY STRENGTHENING CONTRIBUTE TO THIS IMPACT?

From **Impact**, move one step to the left in the model to consider **Outcomes**:

OUTCOMES

High-quality SBCC programs are essential to achieve positive health and social impact. They can encourage couples to talk about family planning and birth spacing to increase the chances of a safe delivery and a healthy baby; create demand for voluntary medical male circumcision and condoms that help protect against the transmission of HIV; and increase the use of insecticide-treated bed nets, particularly by the most vulnerable members of the community, pregnant women and children under 5, to protect themselves against malaria. Yet for an SBCC program to succeed in contributing to these types of positive health and social outcomes, they must be *effective*.

Countries need the capacity to design, implement and evaluate state-of-the-art SBCC programs. It is also critical for sustainability and country ownership.



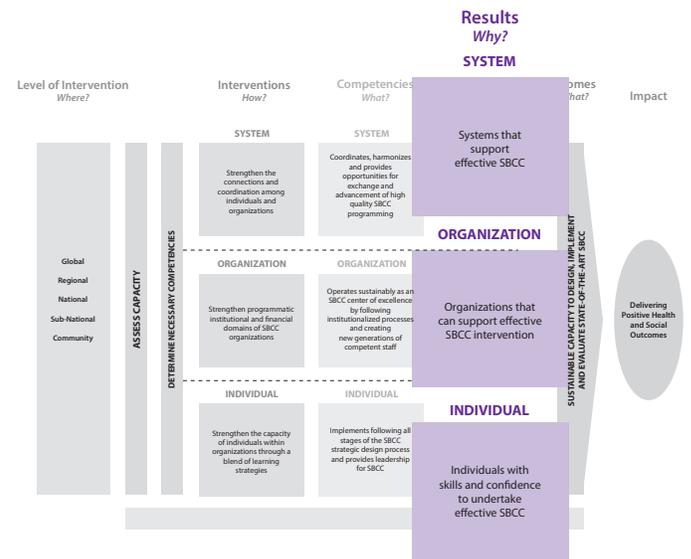
AND HOW DO WE REACH THAT OUTCOME?

From **Outcomes**, move another step to the left for **Results**.

RESULTS

Country capacity to design, implement and evaluate state-of-the-art SBCC programs requires a threshold of individuals with the skills and confidence to undertake SBCC.

These individuals should work in *organizations* that support effective SBCC interventions and those organizations should operate in *systems* that support effective SBCC.



SO IF THIS IS WHERE WE WANT TO GO, HOW DO WE GET THERE?

While there are many theories available, HC3 has selected three theories to help guide the conceptualization of capacity strengthening programs.

Experiential Learning Theory (ELT): ELT is a four-stage model that emphasizes the central role of concrete experience but also of reflection, conceptualization and adaptation or experimentation.

In other words, the learner not only actively engages in "doing" but is also systematically encouraged to reflect on the experience, to conceptualize what might be done differently and to adapt the learning to a new experience. This leads to a deeper integration of the learning.

ELT is reflected in the HC3 Project-Based Learning approach that includes experience, reflection and adaptation. This goes beyond simple engagement in a collaborative activity but emphasizes a *systematic and iterative plan* to reflect on and reinforce learning.

ELT puts the learner at the center of capacity strengthening and reminds us that capacity strengthening must be ongoing and blend methods.

Institutional Economic Theory (IET): Although associated with economics, IET draws largely from social science research. In this theoretical framework, an "institution" refers not to an organization, but rather to the formal or informal rules that structure human interaction.

In other words, institutions are the written laws but also the unwritten social rules that influence how people behave. In the overall application of these models to the SBCC capacity ecosystem, IET destabilizes the conceptualization of capacity strengthening as a simple transfer of technical skills.

Capacity strengthening is also both an inherently social and political process. IET thus highlights the need not only for technological innovation but social innovation such as the need for new types of leadership, collaborative processes and networks.

In addition IET theorizes the role of "transaction" costs, which are the costs of participation. In SBCC capacity strengthening, this concept can be applied to any obstacle practitioners or organizations face to fully engaging in the SBCC community whether as a result of lack of access to knowledge, resources or networks.

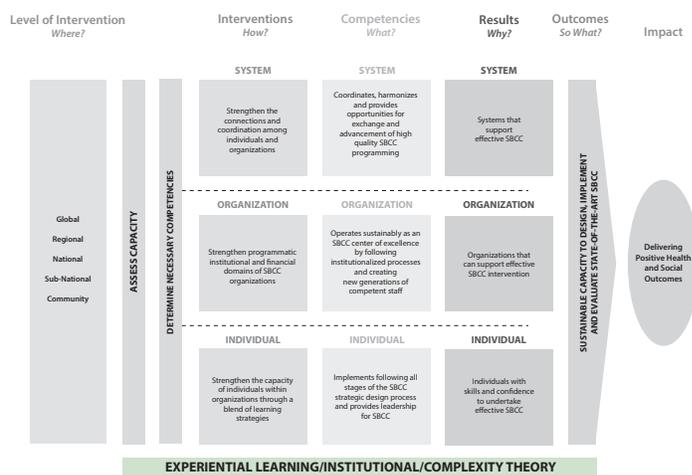
Complexity Theory (CT): A complex system is defined as one in which many independent agents interact with each other in multiple (sometimes infinite) ways. One of the defining characteristics of complex systems is the inability to predict the outcome of any given change to the system. Because a system depends on so many intricate interactions, the number of possible reactions to any given change is infinite. Minor events can have enormous consequences because of the chain of reactions they might incite.

Conversely, major changes may have an almost insignificant effect on the system as a whole. Because of this, strong control of any complex system may be impossible. While it may have order, no one absolutely governs a complex system. Moreover, change is not linear with direct cause and effect relationships, but non-linear and cannot be predicted ahead of time.

In terms of SBCC capacity strengthening, this implies adopting a different mindset when confronted with complex environments. Capacity strengthening programs should seek to influence rather than predict change and to experiment with multiple interventions to see what "takes" in a complex environment.

To increase chances of impact we should take a systems approach and operate at multiple levels simultaneously.

See [Appendix A](#) for a list of references related to these theories.



IET is reflected in a commitment to understanding local social norms and the political contexts in which teams work and the emphasis placed on relationship building as a prerequisite to effective capacity strengthening. It can also be seen in ongoing efforts to support social innovation by utilizing such platforms as [Springboard for Health Communication](#) to shift the locus of international leadership for SBCC to the countries themselves. IET underlies a commitment to lowering the transaction costs of participation in the SBCC community by developing resources such as the [Health COMPass](#) to facilitate learning, the [Communication Initiative's](#) commitment to sharing knowledge, and Springboard and the International SBCC Summit to facilitate networking and exchange.

Complexity theory is reflected in a willingness to respond with flexibility in uncertain and complex environments and to combine time-tested evidence-based approaches with experimental new ideas. Teams take advantage of new and unpredictable opportunities and work with donors and host country partners when unintended events arise that may obstruct intended programs and progress to redirect the program as necessary. Projects develop new methods to measure non-linear outcomes that could not have been predicted at the start of the project.

NOW THAT WE UNDERSTAND THE THEORIES, WHAT'S NEXT?

Move up from the Theory bar to Levels of Intervention in the far left of the model.

LEVELS OF INTERVENTION – WHERE?

A capacity strengthening program may work at one or multiple levels. That decision is generally made by the donor prior to the start of the project but may expand into additional levels during the life of a project. Capacity strengthening interventions may be implemented at the Global, Regional, National, Subnational and Community Levels.

Examples:

Global: Examples at the global level include building SBCC competencies of international bodies such as WHO, UNICEF or an international NGO; organizing a global SBCC conference; developing virtual platforms for learning and global exchange; and advocating for SBCC.

Regional: Some opportunities for strengthening capacity at the regional level include building the capacity of transnational organizations working in SBCC, such as AfriComNet, or a high capacity SBCC organization providing consulting in multiple countries in a geographic area, and supporting forums for regional networking and information sharing.

National: At the national level, capacity strengthening typically focuses on key national agencies in the public sectors, or occasionally the private sector. Opportunities include bolstering systems for coordination, creating sustainable teaching and training programs, creating policy and guidelines, and building skills among a select group of SBCC leaders to manage national integrated, multi-level, multi-layered efforts.

Sub-National: At the sub-national level, capacity can be built at the regional or district health bureaus or among NGOs working in a particular region. Opportunities for capacity strengthening include improving coordination and implementation management skills.

Community: At the community level, capacity strengthening focuses on skills to map intended audiences and vulnerable groups; ability to identify and build the skills of traditional, religious and political leaders; understanding of community entry and mobilization processes; community action planning and recognition system; and outreach workers.

ASSESSMENT

Once the level(s) at which the capacity strengthening project will work are determined, an assessment needs to be conducted. It is necessary to understand:

1. **The current level of capacity.**
2. **The kind of capacity needed for the individual, organization or system to carry out their SBCC function effectively.**

To assess means “to evaluate or estimate the nature, ability or quality of.” In other words, where are the intended recipients of the capacity strengthening now and where do they want to go? Depending on the objectives of the project or program, the assessment will vary. Assessments can be carried out at individual, organizational, and/or systems levels. For example, the assessment may focus on one or two identified partners, a diffuse network of community groups or the larger national system in which the project is working.

The assessment phase of a capacity strengthening program may begin even before the project has started. For example, the donor may have conducted its own assessment and that assessment will be reflected in the request for applications (RFA) or in guidance to the project.

For example, a USAID Mission in a particular country may identify the government agency responsible for national SBCC coordination as a critical beneficiary for capacity strengthening based on previous knowledge as well as the government's own assessment. A capacity strengthening project may then continue the assessment phase by implementing a capacity assessment tool to gain more detailed information about the specific strengths and weaknesses of that agency. The project may also scan or "map" the larger environment to determine what other partners in the country are doing or contributing, and what gaps exist in the overall capacity of the system.

In addition, before developing a capacity strengthening plan it is important to determine *what kind* of capacity strengthening is critical to the success of the recipient's work and what competencies they require to do their job. Not every person or partner needs the same SBCC competencies.

For example, a government partner such as the Ministry of Health (MOH) may need an introductory level of SBCC in order to coordinate national SBCC activities and to establish public-private partnerships. MOH staff, however, will generally not need detailed knowledge on such topics as materials development or research. The staff of a local SBCC organization, however, will likely need expertise in most if not all aspects of SBCC. While this may sound common sense, it is important to set expectations with partners to focus capacity strengthening efforts to be as efficient and as effective as possible. Moreover, capacity strengthening interventions can be structured to address these different audience segments such as in a sequential way or through parallel approaches.

Asking a few critical questions can help clarify the type of capacity strengthening and related competencies that need building for the system, organization or individual to perform their SBCC functions effectively.

KEY QUESTIONS TO HELP REFLECT ON CAPACITY STRENGTHENING NEEDS AND COMPETENCIES

- Is it an individual, organization or system that needs capacity strengthening?
- Do they operate at the community, sub-national, national, regional or global level?
- If an individual, is he or she directly involved in the design, implementation and evaluation of SBCC programs?
- Does the organization directly implement programs that either focus on SBCC or incorporate elements of SBCC?
- If the organization is not directly involved in SBCC implementation, what specifically is their unique role in the national network of SBCC organizations?
- What is the individual or organization's primary role – research or programs?
- What is the individual or organization's primary function – policy or administration?

An assessment may include the implementation of a structured in-depth participatory assessment tool such as the [HC3 SBCC Mapping Tool](#), the [C-Change SBCC-CAT](#), the [PROGRES-SBCC Tool](#) or the [USAID Organizational Capacity Assessment \(OCA\)](#) tool. These types of tools are often used when intensive SBCC or organizational capacity strengthening is planned for a particular organization.

The assessment process is tailored to a specific context and will depend on a number of factors: the amount of information already available about the system, organizations and individuals; the expected level of capacity strengthening funded under the program; and time.

A rapid survey tool, for example, may be implemented in a crisis or epidemic situation. In other situations, qualitative methods such as discussions with partners combined with a document review may be used when multiple organizations are involved, when the focus is on the system and links among partners, or when less intensive capacity strengthening has been requested by the donor to any specific organization.

Assessment is both an art and science and skilled program managers employ the ideal mix of methods in order to develop an effective capacity strengthening plan.

COMPETENCIES

Still working at the system, organizational and individual levels, consider the competencies or what the beneficiaries of capacity strengthening will be able to do as a result of the capacity strengthening efforts. For the ease of this narrative, the focus is on SBCC competencies rather than on institutional development competencies. To review examples of institutional development competencies, see the [PROGRES-SBCC](#) tool or [USAID OCA](#) tool. See the table below to review the anticipated SBCC competencies at each level.

<p>SYSTEM</p> <p>Coordinates, harmonizes and provides opportunities for exchange and advancement of high quality SBCC programming</p>	<ul style="list-style-type: none"> • Coordinating the activities of various actors at various levels • Providing strategic direction to partner organizations through well-articulated and disseminated policies, strategies and frameworks • Harmonizing messaging • Ensuring a network of organizations competent in all aspects of SBCC programming • Sustaining SBCC training 	<p>programs required to produce a critical mass of health communication professionals</p> <ul style="list-style-type: none"> • Funding SBCC adequately • Recognizing SBCC as a critical element in the health system • Providing both virtual and face-to-face networking opportunities for SBCC specialists • Cataloging strategies, media and materials
<p>ORGANIZATION</p> <p>Operates sustainably as an SBCC center of excellence by following institutionalized processes and creating new generations of competent staff</p>	<ul style="list-style-type: none"> • Using and mentoring others to use strategic design processes • Utilizing a quality suite of tools, resources and approaches • Drawing on a useful KM system • Managing technical assistance and outsources • Reproducing new generations of competent staff • Learning collaboratively. Using data to inform programming 	<ul style="list-style-type: none"> • Navigating complexity in the different stages of the SBCC process • Engaging politically and managing strategic partnerships • Being self-reflective. Identifying and correcting weaknesses in program quality • Managing sound operational systems. • Harmonizing messaging
<p>INDIVIDUAL</p> <p>Implements following all stages of the SBCC strategic design process and provides leadership for SBCC</p>	<p>SBCC</p> <ul style="list-style-type: none"> • Inquiring and analyzing • Designing strategy • Research/M&E • Creativity and developing materials and interventions • Implementing interventions • Managing programs • Mobilizing communities • Engaging stakeholders 	<p>Leadership</p> <ul style="list-style-type: none"> • Nurturing a shared vision • Inspiring teamwork • Analyzing environment • Prioritizing and focusing tasks • Networking and building relationships • Mentoring • Advocating • Mobilizing resources • Aligning programs with vision

INTERVENTIONS: HOW?

Finally consider the interventions, or *how*, to build SBCC capacity at each level, so as to be able to build *what* (the competencies), and for what purpose or *why* (the results) – which ultimately lead to outcomes and eventually impact.

Systems Level: At the systems level, any SBCC capacity strengthening program should ideally strengthen the support to, and the connections and coordination among, individuals and organizations practicing SBCC. Consider the interventions that will support both the practice of an array of SBCC organizations and individuals and the connections among them. Strategically choose those interventions that will have the greatest benefit to overall capacity of the system. Examples of these interventions include:

- Develop coordination structures and mechanisms, such as supporting national coordinating bodies and technical working groups, and assist them to function well
- Ensuring a network of organizations competent in all aspects of SBCC programming
- Institutionalize the SBCC profession and roles such as expanding the number and types of SBCC positions and developing courses and curricula to professionalize SBCC
- Advocate for SBCC's role in the health system and for SBCC resources
- Formulate SBCC policies, strategies and frameworks
- Establish virtual and face-to-face networking fora
- Create repository for strategies, media and materials

SYSTEM

Strengthen the connections and coordination among individuals and organizations

Organizational Level: At the organizational level, consider the processes and structures within the organization that support the practice of SBCC. SBCC capacity is not just individuals' knowledge and skills. Rather, strategic and design processes must be institutionalized within the organization both to support the individual staff and to assure sustainability of the organization's SBCC practice.

Capacity strengthening at the organizational level includes:

Programmatic

- Refine standard tools, resources and approaches
- Develop quality assurance program
- Create key programmatic partnerships
- Create functioning KM system
- Strengthen M&E capabilities

ORGANIZATION

Strengthen programmatic institutional and financial domains of SBCC organizations

As described in the systems discussion above, a national SBCC program requires a network of organizations competent in all aspects of SBCC programming. Organizational capacity development programs should be developed with an eye on what function(s) each organization plays in that national program – leadership and coordination, creative services, design and implementation of large-scale interventions, more focused SBCC approaches, or monitoring and evaluation.

In addition to programmatic capacity, to be sustainable, an organization also needs strong institutional and financial structures and processes. While the overall goal of HC3 is to strengthen local SBCC capacity, the project also integrates a critical focus on institutional development to ensure that SBCC capacity rests upon a strong organizational foundation. Although often the financial domain is considered a component of institutional development, under HC3 it is separated into its own domain to highlight its critical role in organizational sustainability.

PROGRAMMATIC INTERVENTIONS

An SBCC capacity strengthening project may partner with the MOH in a specific country to design and implement a national family planning campaign. As part of that collaboration, the project works with MOH staff to establish organizational processes within the MOH to enable the development of public-private partnerships which will, in the short term, lead to shifting a portion of the campaign costs to the private sector and, in the longer term, to ensure rich collaborative future partnerships to address other national health issues.

An SBCC project may partner on the collaborative implementation of programs, which is also a form of capacity strengthening. For example, an SBCC project may collaborate with a local network of NGOs to implement community-based HIV/AIDS prevention programs for young women and older men. To ensure consistency, the project trains the NGOs in technical messaging, facilitation and interpersonal communication skills, and monitoring and evaluation as well as project and financial management. The NGOs are responsible for implementing community-based activities, submitting monthly reports to the project, supervising field activities and participating in meetings to evaluate program activities.

Institutional

- Form or strengthen governing body
- Establish plan for succession
- Ensure quality of operations and administrative procedures
- Ensure quality of internal and external communications and structures
- Establish or strengthen platforms and mechanisms for coordination across stakeholders
- Strengthen networks for alliance building

Financial

- Strengthen financial management policies and procedures
- Strengthen asset management policies and procedures including procurement of assets
- Strengthen grants and sub-grants management policies and procedures
- Develop plan to monitor the intake and outflow of resources
- Strengthen internal control systems
- Improve capability to produce and analyze financial reports

Individual Level: When implementing SBCC capacity strengthening interventions to increase individual-level capacity. Two points are worth noting. First, as mentioned in the assessment section, it is critical to not only understand current capacity but also the level of capacity necessary for the individual in his or her role. This not only helps to focus the capacity strengthening by making the interventions more relevant, but also ensures the individual does not feel they are somehow failing to meet expectations that are not realistic.

For example, someone working in SBCC programming may need to increase their knowledge of research but not to the level of a formal research staff member. An MOH official likewise should not feel they are sub-standard if they possess only cursory understanding of materials development, given that their role is largely coordination and advocacy.

The second point is that capacity strengthening cannot be a "one-off" event. It is an emergent skill that grows over time with repeated strengthening and experience.

INSTITUTIONAL INTERVENTIONS

Under an SBCC capacity strengthening project, the donor may request help to establish a local SBCC NGO. Over time, this entity is expected to serve as a locally owned umbrella agency with the ability to build SBCC capacity, provide coordination of activities and materials, and facilitate the local ownership of SBCC programs. Activities under the SBCC project may include a market study to determine whether there is local demand for such an agency and developing a matrix comparing the design process for similar organizations to determine which model would be most appropriate for the country.

The SBCC project may enlist the services of an organizational development consultant or partner to work with local stakeholders and guide them through the registration process as well as the formation of the entity's vision and mission statements, bylaws and board of directors. Or conversely, an SBCC project may work to improve the procurement, financial management, resources mobilization and human resource management processes of an existing SBCC NGO with the goal of enabling them towards becoming qualified for direct USAID funding.

INDIVIDUAL

Strengthen the capacity of individuals within organizations through a blend of learning strategies

In addition, referring back to Experiential Learning Theory, capacity strengthening should blend a mix of methods to ensure that learning is integrated and reinforced.

One training does not equal capacity strengthening. However, a training that is complemented by on-the-job coaching, provision of self-directed learning resources, ongoing participation in a technical working group that includes follow-up in-service workshops and peer-to-peer mentoring through a platform such as Springboard, represents a blend of methodologies that will likely be much more effective.

INDIVIDUAL INTERVENTIONS

Provide face-to-face and virtual learning opportunities

- Develop experiential/workplace learning programs
- Mentor and coach: short or long term
- Embed seconded advisors
- Create peer-to-peer support relationships through online platforms (e.g., Springboard)
- Develop and deliver courses and training
- Design/facilitate distance learning opportunities
- Organize professional field trips
- Facilitate south to south assistance/exchange

Facilitate access to and encourage uptake and application of resources

- Provide job aids and resources
- Connect to external resources including consultants
- Develop SBCC resources, case studies, best practices

Facilitate participation in learning and exchange events

- Internships or professional exchange opportunities
- Technical working groups/SBCC communities of practice
- Formal learning programs including provision of scholarships
- Conferences and meetings

While interventions have been categorized for the ease of this model, it is important to note that specific interventions/activities do not always fit neatly under individual, organizational and system headings. e-Learning, for example, builds the knowledge and skills of individuals and may also be a long-term tool for organizations that face high staff turnover. An eToolkit for field workers is another example: it provides field workers with counseling materials and knowledge at their fingertips (individual); at the same time, it may be a coordination tool (system level) if it compiles/consolidates a broad array of SBCC materials from different governments, NGOs, and other stakeholders. The same eToolkit may additionally serve as a system-level activity if it is taken to scale and made available at the national level to any field worker or service provider with access to a computer, tablet or smartphone, and is linked to a national repository of tools for data collection/measurement and accountability for health.

Approaches at the different levels (individual, organizational, system) may also be interlinked. For example, senior communication specialists seconded to the Ministry of Health (MOH) for day-to-day technical assistance and hands-on mentoring focus heavily at the individual level. At the same time, they are the ones who may be best able to advocate for, introduce and institutionalize organizational-level tools and processes. In addition, they may facilitate communication among MOH units and their superiors at the MOH as well as with external SBCC entities, thus reinforcing the systems-level connections.

BLENDED LEARNING

[Blended learning](#) is the use of a variety of media and learning environments to achieve mastery and application of knowledge and skills.

[More on blended learning](#)

RESOURCES

- [Health COMpass](#)
- [Springboard](#)
- [HC3 Implementation Kits](#)
- [Global Health e-Learning](#)
- [C-Modules](#)

INDIVIDUAL INTERVENTIONS

To strengthen individual capacity in SBCC, a capacity strengthening project designs a fellowship program whereby mid-level professionals working in both local SBCC organizations and government agencies are placed in high-functioning local and INGO SBCC organizations for six months. Fellows are matched with mentors in those organizations and the project hosts monthly seminars to supplement the fellows' learning which are in turn followed up with discussions in a Springboard group. Fellows are provided with existing capacity strengthening tools as skills refreshers.

PROJECT-BASED LEARNING

In many instances, an SBCC project is asked to design, implement and evaluate SBCC projects in collaboration with local country-based partners. This collaborative implementation process offers tremendous opportunities to nurture SBCC knowledge and skills among local counterparts. However, merely engaging in collaborative implementation does not automatically increase capacity.

For example, simply inviting MOH staff to an SBCC strategy design workshop does not ensure staff will gain SBCC design skills. The collaborative implementation process must include a systematic plan for how capacity will be reinforced throughout the process. To encourage capacity building through the collaborative implementation process, HC3 developed a Project-Based Learning model, which includes experience, review and application.

Project-Based Learning takes advantage of collaborative implementation opportunities to reinforce learning. This experiential, interaction-based learning provides opportunities for professionals to immerse themselves in the process of gaining and applying knowledge directly to a relevant situation in the workplace, even in those cases where capacity strengthening may not be an explicit objective of the program as activities can be implemented at low or even no cost, such as facilitating discussion learning groups on Springboard.

Within a Project-Based Learning approach, professionals gain SBCC knowledge and skills as they are given time and space to practice an activity, reflect on it, and apply their learning alongside SBCC experts who can guide the process. The Project-Based Learning model follows three core steps:

1. Planning and Doing	2. Reviewing	3. Applying
<i>Perform. Do the activity. Plan for discovery. Create an experience.</i>	<i>Share results, reactions, observations. Process by discussing. Look at experience, analyze, reflect.</i>	<i>Generalize. Connect experience to real world. Apply learning to similar or different situation.</i>
<p>Utilize:</p> <ul style="list-style-type: none"> • Job aids • Formal training/ Short course • Workshops • Guided discovery • Structured discussion • Professional networks • Books/ Articles • Video/ Podcasts • Role-plays/ Drama activities • Personal stories/Case studies • Visualizations and imaginative activities • Team games/ Problem-solving 	<p>Utilize:</p> <ul style="list-style-type: none"> • After action reviews • Briefing sessions • Discussions/ Reflection in cooperative groups • Small face-to-face group work • Email/ Online discussion groups • Professional networks • Storytelling, sharing with others • Reflective personal essays • Thought questions • Personal journals, diaries • Portfolios • (Participant) Presentations 	<p>Utilize:</p> <ul style="list-style-type: none"> • Application sessions • Models, analogies and theory construction • Coaching/mentoring sessions • Portfolios • New SBCC campaign design and implementation
For example, a project might work with the MOH to conduct a situation analysis or design a national SBCC strategy. Before performing these activities, provide materials or trainings to help the MOH staff prepare and plan for the activity.	For example, a project might organize cooperative discussion groups or Springboard forums to discuss the implementation process and what was learned.	For example, a project might provide mentorship and coaching as the MOH applies their learning to a new campaign. Or, HC3 might facilitate an after-action review to discuss how to apply new skills.

This three-step model can be applied at each of the five stages of the program implementation process to encourage learning through practical experience.

An SBCC project can support and facilitate the Project-Based Learning process by providing opportunities to apply the model, developing materials that support learning, offering feedback and encouraging supervisors to create situations to apply newfound learning.



WHAT IS THE TIME HORIZON FOR CAPACITY STRENGTHENING ACTIVITIES?

The time needed for capacity strengthening activities to reach their intended goal(s) will depend on multiple variables. There is no easy formula. Variables include those conditions that are inherent in any capacity strengthening program: the base level of capacity of the intended recipient(s) of the capacity strengthening (whether an individual, organization or system); the level of capacity desired; the amount of resources available for capacity strengthening and thus the intensity of effort of the capacity strengthening; and the level of buy-in for the capacity strengthening, both on the part of the capacity strengthening recipient and also in the recipient's environment.

In addition, external factors that cannot be predicted at the outset may influence the time horizon: staff turnover, shifts in leadership, significant changes in the workload of the capacity strengthening recipients, political disruption, a crises that demands that capacity strengthening and human resources be diverted for some period of time (the earthquake in Nepal or avian influenza in Egypt), among others. Given all these variables, a capacity strengthening program can be as short as a few hours, or as long as several years.

Given that capacity strengthening is both science and art, it is critical that all stakeholders, including capacity strengthening recipients, capacity strengthening providers, donors, government and others have open communication and share clear expectations of the goals of the capacity strengthening and what is realistically needed to get there. When obstacles or opportunities arise that may shift the time horizon, all stakeholders should be made aware so as to manage expectations and agree on a revised time line or to reassess goals if necessary.

DEFINING AND MEASURING CAPACITY STRENGTHENING SUCCESS

Given the varied and complex nature of programs, success will look different in each case. The definition of success can highlight both the process as well the outcomes of the capacity strengthening efforts. At the most basic level, measuring success around process can center on the achievement of specific activities and outputs, at any of the levels. An even greater measure of success is achieved when a capacity strengthening program can demonstrate the link between its capacity strengthening efforts and certain outcomes, whether intended or unintended.

The challenge lies in measuring outcomes tied to the level at which the specific activity is intervening. For example, a training activity that aims to strengthen SBCC competencies at the individual level can measure success with pre- and post-tests conducted over different points in time. When looking to assess organizational or system-level change, however, readily available tools and traditional monitoring and evaluation approaches are not able to accurately measure success. Depending on the type and scope of the activity, measuring outcomes in these instances call for approaches such as program/organizational documentation review, expert assessment of work outputs, interviews with key stakeholders about observed changes, etc.

Defining outcomes and determining the most appropriate ways to measure success should be a negotiated process among stakeholders, including the recipient(s) of the capacity strengthening, the capacity strengthening provider and the donor. It is critical that a common understanding of success be established at the beginning of the project. For example, if a two-year program is developing the capacity of a fledgling SBCC organization with little experience, then the level of capacity achieved will be well below what might define success for an organization starting at a much higher level of capacity.

The capacity strengthening ecosystem framework illustrates the complex non-linear nature of SBCC capacity strengthening. There are multiple stakeholders at various levels of intervention. In addition, the context of the specific geographic location where capacity strengthening activities take place create unique environments with distinct challenges and realities. As a result, as mentioned above, the task of measuring outcomes resulting from SBCC capacity strengthening requires different approaches than traditional monitoring and evaluation.

One novel approach for monitoring and evaluation of SBCC capacity strengthening is Outcome Harvesting (OH) – a participatory method of assessing programmatic success by identifying both intended and unintended results of programs. OH is well-suited to capture project results in complex situations where the cause and effect of an intervention is unknown or agreement among many stakeholders must be reached in order to finalize and continually adapt an intervention's strategy. OH is ideal for considering multiple perspectives to decide who and what has changed since the start of an intervention, when and where change has occurred, and how the change came about.

APPENDIX A

Learn more about...

Socio-Ecological Model

- Storey, D. (2012). Toward a global theory of health behavior and social change. *The Handbook of Global Health Communication*, 70-94. http://www.thehealthcompass.org/sites/default/files/strengthening_tools/Social%20Ecological%20Model-Ch04%20Storey-Figueroa.pdf

Experiential Learning Theory

- <http://www.learning-theories.com/experiential-learning-kolb.html> for a brief summary
- Kolb, D.(1999) Experiential Learning Theory: Previous Research and New Directions. <http://www.d.umn.edu/~kgilbert/educ5165-731/Readings/experiential-learning-theory.pdf>
- Kolb, D. (1984). *Experiential Learning: experience as the source of learning and development*. Englewood Cliffs, NJ: Prentice Hall

Institutional Economic Theory

- Walter, Hettie, 2007. Capacity Development, Institutional Change and Theory of Change: What do we mean and where are the linkages http://portals.wi.wur.nl/files/docs/successfailuredevelopment/Walters_CapacityDevelopmentConceptPaperFIN.pdf
- North, D.C., 1990 *Institutions, institutional change, and economic performance*. Cambridge University Press, Cambridge.

Complexity Theory (as applied to capacity strengthening)

- Woodhill, J. 2010. Capacities for Institutional Innovation: A Complexity Perspective. <http://onlinelibrary.wiley.com/doi/10.1111/j.1759-5436.2010.00136.x/epdf>

Outcome Harvesting

- Wilson-Grau, R., & Britt, H. (2012). Outcome harvesting. Cairo, Egypt: Ford Foundation Middle East and North Africa Office. <http://usaidlearninglab.org/sites/default/files/resource/files/Outome%20Harvesting%20Brief%20FINAL%202012-05-2-1.pdf>
- Britt, H., & Patsalides, M. (2013). Complexity-aware monitoring. Discussion Note, Monitoring and Evaluation Series. Washington, DC: USAID, December. <http://usaidlearninglab.org/sites/default/files/resource/files/Complexity%20Aware%20Monitoring%202013-12-11%20FINAL.pdf>
- Cases in Outcome Harvesting, The World Bank (2014) http://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2014/08/27/000442464_20140827131715/Rendered/PDF/901720WP0Box380n0Outcome0Harvesting.pdf
- Outcome-Based Learning Field Guide, The World Bank (2014) http://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2014/08/27/000442464_20140827142457/Rendered/PDF/901760WP0Box380Learning0Field0Guide.pdf