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<td>CA</td>
<td>Capacity Assessment</td>
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<td>CD</td>
<td>Capacity Development</td>
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<tr>
<td>CFSVA</td>
<td>Comprehensive Food Security and Vulnerability Analysis</td>
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<td>CSO</td>
<td>Civil Society Organization</td>
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<td>DHS</td>
<td>Demographic Health Survey</td>
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<td>FAO</td>
<td>Food and Agriculture Organization</td>
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<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
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<td>SUN</td>
<td>Scaling Up Nutrition Movement</td>
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<td>TOR</td>
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<td>UNDP</td>
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Executive Summary

Malnutrition in all its forms continues to hamper the lives and opportunities of millions of people worldwide. National governments are increasingly recognizing the importance of nutrition for development, and are taking responsibility for addressing nutrition challenges in their countries. However, while commitments to good policy and adequate resources have grown, capacities to deliver on those commitments and invest effectively have often not kept pace due to capacity challenges. The 2030 Agenda for Sustainable Development places strong emphasis on integrated approaches and has a particular relevance for addressing the determinants of malnutrition. The UN system is among key players supporting governments to realise national nutrition targets and goals.

Capacity development is the process of creating and building capacities and their (subsequent) use, management and retention. It is a long-term gradual and incremental process that should be designed with iterative approaches that allow for continuous diagnosis and adjustments along the way. It should be planned with a long-term perspective and with inbuilt sustained commitment and resourcing. Sustainable capacity development processes should seek to institutionalise results and processes as this provides anchorage and stability while the long-term focus provides the time for people, organisations and society to absorb and institutionalise change. Sustainable capacity development actions seek to ensure that national and local actors find their own way of solving problems and adapting to change. This enhances ownership and ensures that national actors take control and command over capacity development activities, and are able to translate commitment into effective actions.

This guidance package has been developed by the United Nations (FAO, UNICEF, WFP, WHO) in consultation with country stakeholders and is intended to support countries to comprehensively assess capacity needs for effective scale up of nutrition actions. It provides a holistic multi-sectoral, multi-stakeholder, multi-dimensional and multi-level model for assessing capacity with the objective of sustainable capacity development in nutrition. It responds to the need for a basic standardized approach which recognises governments as the primary stakeholders and provides a framework that helps define and operationalise capacity assessment as part of broader capacity development initiatives. It is a practical resource for country-level stakeholders, in particular Scaling-Up Nutrition focal points, sector focal points, national nutrition coordinators, UN, civil society organizations, academia staff and consultants involved in facilitating, coordinating and/or conducting capacity assessments for nutrition.

Section 2 provides an overview of the five steps of the capacity development process, which include: engagement with stakeholders, assessment of capacity needs, formulation of a capacity development response, implementation of a capacity development response, and evaluation of capacity development. Capacity assessments can effectively link country capacity assets and needs to development and nutrition goals, and create or sustain momentum to support action.

Capacity development in nutrition is complex due to the multi-faceted causes of malnutrition. Section 2 outlines principles that can guide a holistic capacity assessment process in nutrition:

- Multi-dimensional view
- Multi-sectoral approach
- Multi-stakeholder participation
- Multi-level focus
- Focus on functional and technical capacities

Section 3 details the framework for nutrition capacity assessment, including the definition of its various elements. It builds on other models such as those of FAO, UNDP and WFP and attempts to simplify a multi-dimensional presentation for better visualization. The framework is flexible and can be adapted to different needs to suit specific contexts, based on the objectives of each assessment. Its elements include: multi-sectoral capacities where efforts of all sectors in nutrition converge and align towards a common purpose within a shared platform and sectoral capacities that are unique to the mandate of each sector. The framework includes four capacity areas to be considered for each dimension for multi-sectoral and sectoral capacities: (i) Policies, programmes and frameworks (ii) Resources and infrastructure (iii) Coordination and partnerships (iv) Evidence-based decision-making.
Section 3 also provides an analytical framework with indicators that help track progress of capacity development over time. The analytical framework for nutrition capacity assessment contains key indicators that help to measure capacity development against each of the four capacity areas, further divided into a number of themes.

**Section 4** describes the following three phases of a capacity assessment process:

- **Phase 1 - Preparation**: The preparatory phase is one of the most important phases and it builds a foundation for a successful capacity assessment. This is the phase that sees the initiation of dialogue with stakeholders and building consensus on a common vision on the capacity assessment and its added value.

- **Phase 2 - Execution**: This phase builds on activities initiated during the preparatory phase, while moving into the actual data collection, analysis and reporting.

- **Phase 3 - Formulation of capacity development response**: The capacity development design phase aims to identify innovative ways in which the capacity gaps can be sustainably developed.

This section also provides practical tips on how to plan and execute each of the three phases for a comprehensive capacity assessment exercise that links directly into a broader national process.

In addition to the guidance note, a complementary selection of **Tools & Resources** is available as a separate document. This part of the guidance package should be used alongside Section 4.
1 Introduction

1.1 Nutrition Context – A Brief Overview

Malnutrition in all its forms continues to hamper the lives and opportunities of millions of people worldwide. Globally, stunting rates are dropping, but 159 million children around the world are still affected; 41 million are overweight while wasting still threatens the lives of 50 million children across the globe (UNICEF/WHO/World Bank 2015). Improvements in nutrition will contribute significantly to reducing poverty, and to achieving health, education, and employment goals (IFPRI, 2014; UN Network/UNSCN, 2015). Many countries have made significant progress towards reducing hunger and malnutrition, but much remains to be done to achieve global and national nutrition targets.

The 2030 Agenda for Sustainable Development places strong emphasis on integrated approaches and has a particular relevance for addressing the determinants of malnutrition. To galvanize global, regional and country efforts and support the achievement of global nutrition targets, there have been important alliances, movements, initiatives and calls to action launched by the international community. These include but are not limited to; the Scaling Up Nutrition (SUN) Movement1; the World Health Assembly (WHA) global nutrition targets2; diet related non-communicable diseases (NCD) targets3; the Zero Hunger Challenge4; the Second International Conference on Nutrition (ICN2)’s Rome Declaration on Nutrition5 and Framework for Action and the United Nations Decade of Action on Nutrition6.

The active participation of countries within the SUN Movement (launched in 2010 to support intensified multi-sectoral action to achieve global nutrition goals) demonstrates that national governments are increasingly recognizing the importance of nutrition for development, and are taking responsibility for addressing nutrition challenges in their countries. This momentum is building on global and country efforts that started following the 1992 International Conference on Nutrition. However, while commitments to good policy and adequate resources have grown, capacities to deliver on those commitments and invest effectively have often not kept pace due to capacity challenges.7

The United Nations system is among the key players supporting governments to realise national nutrition targets and goals. Several of the largest United Nations agencies’ mandates are strongly centred on nutrition, including Food and Agriculture Organisation (FAO), International Fund for Agricultural Development (IFAD), United Nations Children’s Fund (UNICEF), World Food Programme (WFP) and World Health Organisation (WHO). The comparative advantage of the UN system in nutrition is its presence in all countries, convening power, multi-sectoral nature and specialised expertise in a range of areas including evidence generation, nutrition policy development, planning, programme implementation, and evaluation. The UN is well placed as a key partner to strengthen national capacities for nutrition and makes available critical skills, resources and tools that countries can utilise to facilitate transformative changes to effectively and sustainably address malnutrition while strengthening national capacities.

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1 The SUN Movement was launched in 2010 to support intensified multi-sectoral action to achieve global nutrition goals, and has been influential in keeping nutrition on the international agenda and in encouraging and reinforcing country-level efforts in advocacy and social mobilization to address undernutrition. (SUN, 2014)

2 The World Health Assembly Resolution 65.6 endorsed a Comprehensive implementation plan on maternal, infant and young child nutrition, which specified a set of six global nutrition targets. (WHO, 2012)

3 Following the Political Declaration on Non-communicable Diseases (NCDs) adopted by the UN General Assembly in 2011, WHO developed a global monitoring framework to enable global tracking of progress in preventing and controlling major non-communicable diseases and their key risk factors. (WHO, 2011)

4 The 2012 Zero Hunger Challenge is a call to action by the United Nations Secretary-General to all member countries to work towards a unified goal to end hunger and malnutrition within a generation. It serves to mobilize high-level commitment to ending hunger and undernutrition, including stunting, and it recognizes existing efforts to combat malnutrition and hunger. (Zero Hunger Challenge, 2012)

5 The Second International Conference on Nutrition’s (ICN2) Rome Declaration on Nutrition 2014, endorsed by 162 Member States, is a commitment to eradicate hunger and prevent all forms of malnutrition worldwide. (FAO/WHO, 2014 RDN)

6 The Framework for Action on Nutrition 2014 sets out sixty possible policy and programme options that governments may incorporate into their national policy and planning frameworks for nutrition, health, agriculture, social protection and development. (FAO/WHO, 2014 FAN)

7 The Global Nutrition Report 2016 states that only properly resourced commitments (in terms of both human and financial capacity) will drive implemented action.
1.2 Why Capacity Development Matters

1.2.1 Capacity Development

Capacity development (CD) is the process of creating and building capacities and their (subsequent) use, management and retention (UNDP, 2008). It can also be defined as the process whereby individuals, organisations and societies as a whole unleash, strengthen, create, adapt and maintain capacity over time (OECD, 2011). Capacity development is a perpetually evolving process of growth and positive change. It is a gradual and incremental process, should be designed with iterative approaches that allow for continuous diagnosis and adjustments along the way. It should be planned with a long-term perspective and with inbuilt sustained commitment and resourcing.

Sustainable CD processes should seek to institutionalise results and processes. The formulation and upgrading of policies creates a conducive environment for change and is an opportunity to enhance uptake, upscale and sustainability of CD actions. Capacities can also be institutionalised by incorporating new knowledge into national curricula or systems, ensuring that new skills are utilised regularly in relevant tasks or ensuring that procedural changes are embedded in existing structures and institutions. This provides anchorage and stability while the long-term focus provides the time for people, organisations and society to absorb and institutionalise change.

Sustainable CD actions also have the objectives of ensuring that national and local actors (government, civil society organisations (CSOs), academia, business, communities, etc.) develop the capacity to find their own way of solving problems and adapting to change. Subsequently, CD has more to do with the quality of engagement with national and local actors rather than the quantity of outputs being produced; integrating longer-term interventions rather than standalone training; and in general promoting learning and change “from within” rather than providing inputs from the “outside” (FAO, 2015 LM1). This enhances ownership and ensures that national actors take control and command over CD activities, and are able to translate commitment into effective actions.

1.3 Purpose of the Guidance Package

This guidance package is intended to support countries to comprehensively assess multi-sectoral and sectoral capacity needs for effective scale up of nutrition actions and subsequent design of a capacity development response that is integrated into a broader national capacity development agenda for nutrition. It provides a framework that helps define and operationalise a capacity assessment (CA) as part of broader CD initiatives. This package responds to the need for a basic standardized approach which recognises the government as the primary stakeholders with the expectations that partners should align to national priorities. It therefore ensures that the capacities of all key sectors, stakeholders, and levels are routinely addressed.

Specifically, the guidance package will support stakeholders to:

(i) Integrate capacity assessments into a broader long term nutrition capacity development agenda with sustained commitments to support implementation.
(ii) Comprehensively identify capacity needs at national, subnational and local levels to achieve national nutrition targets.
(iii) Promote a shared understanding of the priority CD actions to address existing capacity gaps and identify opportunities for CD support.
(iv) Define the Monitoring and Evaluation (M&E) system to track capacity development outcomes over time and promote continuous learning among stakeholders.

This guidance package provides a holistic multi-sectoral, multi-stakeholder, multi-dimensional and multi-level model for assessing capacity with the objective of sustainable capacity development in nutrition. It puts emphasis on functional capacities that are applicable for good nutrition governance from a multi-sectoral and sectoral perspective. It can also be adapted and applied to assess various technical disciplines relevant to nutrition such as Health, Education, Agriculture, Social Protection, WASH, etc.

The guidance package focuses on government bodies that are instrumental in supporting nutrition scale-up at national and sub-national levels. This includes various ministries, agencies and departments involved in policy
development, implementation, coordination, financing, research and evidence generation, etc. The package can also be used to assess the capacity of other actors, as it recognizes the crucial roles played by other key stakeholders in nutrition governance (in particular CSO, but also the media, the private sector, etc.). The focus of the CA for these other actors will be based on their main role and support to nutrition priorities in the country.

This guidance package provides a comprehensive guide on CA and includes a selected number of complementary tools and resources that are flexible and adaptable to different country contexts. In terms of process, it emphasizes the need to use multi-disciplinary teams which have highly specialized knowledge of CD and other relevant areas of expertise. The process and methodology applied takes into account the importance of embedding learning. It is designed as a living document, and just as CD is a process, it is anticipated that it will evolve over time to be continually strengthened based upon experience.

Intended audience

The guidance package is a resource for country-level stakeholders, in particular SUN focal points, sector focal points, national nutrition coordinators, UN, CSO, academia staff and consultants who will be facilitating, coordinating and/or conducting capacity assessments for nutrition. Country level decision-makers and managers should be familiar with the key principles and concepts to guide the adaptation of the methodology to the country needs. They should find this resource useful for promoting dialogue around capacity development.

1.4 Development of this Guidance Package

This guidance package is a product of UN interagency efforts to support national capacities to scale-up nutrition. It was developed by the main UN agencies working in nutrition (FAO, UNICEF, WFP, WHO) through an interagency process that led to a decision to harmonize all existing UN agency CA tools and methodologies for nutrition (see Annex 5.2). The process was coordinated and supported by the UN Network for SUN/REACH\(^8\) Secretariat, and took its preliminary shape with the following three parts:

(i) Firstly, an analysis of the various CA tools implemented by the UN agencies which revealed significant areas of overlap as a number of the tools are greatly influenced by one another.

(ii) Secondly, a case study involving several countries was conducted in October 2015 in order to gather country-level experiences and lessons based on previous UN supported CAs (see Box 1-1 for key lessons). Both UN nutrition focal points and government personnel from six countries (Bangladesh, Ghana, Malawi, Niger, Tanzania and Uganda) participated in the case study.

(iii) Thirdly, a two day interagency workshop took place on 4-5 November 2015 to deliberate on the findings and to establish the next steps. A joint UN Network decision was made to harmonise the UN CA approaches and devise a guidance package for use at the country level. Additionally, a framework for capacity assessment for nutrition took its initial shape (see more details in chapter 3).

Box 1-1: Key Lessons from Case Study

- Aligning the assessment with national priorities and planning processes facilitates adoption of the recommendations and their integration into government planning cycles including resource mobilization.
- Putting in place a national capacity development response plan that clearly designates stakeholders’ roles and responsibilities and which is preferably coordinated through a supra-ministerial body to facilitate implementation.
- Best results can be achieved if the development partners harmonize their CA and CD approaches and efforts.
- Capacity assessment should be an on-going process that is adaptive and constantly reviewed as country situations are often evolving (social, policies, economic, environmental changes).
- The capacity response plan should include both medium and long term CD strategies, which should be re-assessed on a continuous basis.
- Multi-agency collaboration enables a broad scope to the assessment.
- Competencies and quality of consultants/facilitators should be an important consideration in CA and CD processes.
- Ensuring sufficient government leadership is key while also including all relevant sectors and actors.
- Post-assessment advocacy facilitates adoption, funding and implementation of recommendations.

\(^8\) REACH – Renewed Efforts Against Child Hunger and Undernutrition
1.5 Structure of the Guidance Package

This guidance package is organized into the following main chapters:

**Section 2**: Describes capacity development as a long-term perspective, its five steps, including the principles of a comprehensive CD. Also included is a description of capacity assessment as a precondition of achieving CD.

**Section 3**: Describes the framework for nutrition capacity assessment, including the definition of its various elements. It also provides an analytical framework with indicators that help track progress of capacity development over time.

**Section 4**: Describes the three phases of a capacity assessment process and provides practical tips on how to navigate successfully through each of the phases. These phases are: preparation, execution and formulation of CD response.

**Section 5**: Provides an annex with additional useful resources, and references

**Tools & Resource Package**: In addition to the guidance note, a complementary selection of Tools & Resources is available as a separate document. This part of the guidance package should be used alongside section 4 on the capacity assessment phases.
2  Capacity Development Process

2.1  Capacity Development Steps

Capacity development is made up of the following five steps, engagement, assessment, formulation, implementation and evaluation, all embedded into a programming process (see figure 2-1):

(i)  **Engagement of stakeholders on capacity development:** This step helps to embed CD into a political context of institutional reform. It requires stakeholders to show commitment and sponsorship of the CD agenda and integrate the agenda in national priorities and plans.

(ii) **Assessment of capacity assets and needs:** Helps to establish which capacities to prioritise and how to incorporate them into national and local strategies, sector thematic programmes and budgets.

(iii) **Formulation of capacity development response:** Findings of a CA are a starting point to developing a capacity development response to address capacity gaps that need to be strengthened.

(iv) **Implementation of a capacity development response:** This should be an integral part of the implementation of a plan or programme in which the response is embedded.

(v)  **Evaluation of capacity development:** Promotes accountability, performance management and learning.

While this guidance package has the main focus on Step 2- Capacity Assessment, each of the five steps have a crucial bearing on the CD approach. This package therefore builds on step 1 (engaging stakeholders) and creates linkages with step 3 by embedding the capacity development response into a national plan or programme. Implementation of CD (step 4) and evaluation of CD (step 5) are both beyond the scope of this guidance package.

*Figure 2-1: The Capacity Development Process (UNDP, 2009)*
2.2 Principles for Comprehensive Capacity Development

Capacity development in nutrition is complex due to the multi-faceted causes of malnutrition. Defining capacity development actions therefore requires an understanding of the landscape of actors involved or required to address the determinants of malnutrition, based on country context. Below is a set of principles that can guide a holistic CD as well as CA processes in nutrition:

- Multi-dimensional view
- Multi-sectoral approach
- Multi-stakeholder participation
- Multi-level focus
- Focus on functional and technical capacities

2.3.1. Multi-Dimensional View

For a comprehensive CA in nutrition, a systemic multi-dimensional approach that assesses the enabling environment, organisational and individual level capacities should be adopted. The three dimensions of capacity are interdependent, if one or the other is pursued on its own, development becomes skewed and inefficient. Many capacity development initiatives traditionally focus on strengthening the skills and knowledge of individuals through training; however, through extensive evaluations and reviews, it has been shown that this is not enough to create the necessary desired changes. (UNDP, 2009) This means that any CD will be inadequate if it does not take into account conditions and dynamics that reside across all dimensions of capacity.

Box 2-1: The Three Dimensions of Capacity

The enabling environment or system level relates to the socio-economic and political context and the legislative and regulatory environment in which organizations and individuals operate.

The organizational level relates to the nature and functioning of public or private agencies (CSO, tertiary education and training institutions and networks). Organizations provide the framework for individual capacities to connect and deliver nutrition actions efficiently and effectively, beyond the capability of one or a few people. This level also includes community-based initiatives linked to village structures, such as village health committees. Capacity at the organizational level analyses how organizations work and highlights entry-points for possible change.

The individual level relates to the skills, knowledge and attitudes (competencies) of individuals such as public servants and staff of organizations, producers, local service providers, technicians, food inspectors etc. Access to resources and experiences that can develop individual capacity are largely shaped by the organizational and environmental factors described above. Detailed capacity assessments at the individual level are generally conducted within the context of an organizational assessment or through performance management systems and are the responsibility of the organizations concerned.

Adapted from UNDP 2009

2.3.2. Multi-Sectoral Approach

This package pays specific attention to assessing capacity needs, to prioritize, plan, implement and manage the scale-up of nutrition actions in a multi-sectoral way. The causes of malnutrition are multi-faceted. According to the widely-accepted UNICEF conceptual framework, good nutritional status in a child is a result of three necessary conditions: 1) household food security; 2) access to good curative and preventative health care and sanitary environment, including access to clean water and proper sanitation; and 3) the knowledge and the capacity to provide the appropriate care for the child. (UNICEF, 1990) Subsequently, governments need to be capable of coordinating policy interventions across a number of sectors to deal with the multiple causes of undernutrition. (Acosta/Fanzo, 2012) This provides overall convergence of all sectoral efforts and accountability in nutrition.

Adapted from FAO, UNDP and PHN paper.

This refers to the complete body of legal texts including laws, regulations and standards.

This refers to the subsidiary legal instruments, normally used by Ministers and not by Parliament which prescribe mandatory requirements and provide supplementary details that are left open in the main legislation.

For instance, central and decentralized government agencies and ministries, social protection services, laboratories, national agricultural research systems, enterprises, cooperatives, chambers of Agriculture, consumer groups, community-based organizations, NGOs, and formal and non-formal education and training institutes.
The arrangements to govern a multi-sectoral approach in nutrition may vary from country to country. Countries have established multi-sectoral platforms at different levels with participation of different stakeholders. In the context of the SUN Movement, nutrition at the country level is coordinated by the Multi-stakeholder Platform (MSP) at national and sub-national levels. The SUN Focal Point works to support the government to ensure participation of all relevant sectors and stakeholders. These multi-sectoral efforts may be led by a supra-ministerial government body or by a line ministry and may have a supporting coordination unit. It is recommended that each country have a common results framework around which all sectors align.

2.3.3. Multi-stakeholder Participation

It is important to recognise that CD activities are joint efforts between government and other actors, both national and international. Key government stakeholders include business, academia, research, donors, UN, CSOs, etc. Depending on functions and roles, stakeholders work in collaboration and/or partnerships and are brought together through coordination mechanisms at different levels, some led by government and some led by other actors. The roles and responsibilities of these stakeholders vary according to their comparative advantage, country context, geographic presence, etc. The capacity development roles may range from technical assistance to funding, implementation, and advocacy, among other areas. However, to deliver on these, each of the actors requires to have in place the relevant capacities. For example, CSOs will require the capacity to hold the government accountable.

Within the SUN Movement, the stakeholders are organised in the form of networks (CSO, government, donors, business and UN). These networks provide opportunities for coordinating CD support to the government as well as for strengthening capacity development efforts within each network.

2.3.4. Multi-level Focus

Capacity development for nutrition is needed at both the central (national) and local levels (regions, districts, counties, etc.) to ensure coherence in translating commitments and policy decisions into meaningful actions. For example in the health sector, commitments to nutrition expressed in a national development plan are translated into sector plans which are then translated into operational plans at district levels and updated protocols in health facilities. Key factors to consider are countries’ characteristics regarding decentralisation structure and administrative make-up as these affect leadership, decision-making, power relations, resource allocation and planning. The roles and responsibilities of each level help to define capacity needs for scaling up nutrition. For example, in countries with a more centralised system of governance, resource allocation, planning and implementation decisions take place at the central level. On the other hand, in countries with devolved governance structures, the central level may have the dominant role in regulation, policy and legislation, while the local level will be responsible for implementation and resource allocation.

2.3.5. Focus on Functional and Technical Capacities

A comprehensive CD usually involves strengthening both technical and functional capacities. These two types of capacities are inherently related while at the same time distinct and cut across different disciplines.

Technical capacities are associated with particular areas of professional expertise, such as infant and young child feeding, disease prevention and control, agriculture, food security, education, nutrition, etc. They vary and are closely related to the sector or organizational context in focus. Assessment of technical capacities is the responsibility of line ministries with support of relevant partners. The challenge in CA is to go beyond assessing conventional technical capacities, and ensuring that these capabilities enhance the nutrition sensitivity of a particular sector and work to strengthen synergies with other sectors.

Functional capacities are essential management skills that enable national, regional and district actors to plan, manage, change and sustain the technical capacities (FAO Corporate Strategy on Capacity Building), regardless of the sector or organization. They are cross-cutting, relevant across various levels and are not associated with

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13 The coordination units are established to manage nutrition multi-sectoral and multi-stakeholder coordination at national and sub-national levels. They help convene High-level Nutrition Coordination Mechanisms (convened at the political level), Technical Nutrition Coordination Mechanisms and support the operations of the Sub-national Nutrition Coordination Mechanisms.
one particular sector or theme (UNDP, 2008). They represent the modalities of engagement and the process. These include capacities to lead, manage, communicate, coordinate, adapt and sustain change.

2.3 Capacity Assessment as a Means to Achieving Capacity Development

Capacity Assessments identify capacity gaps, and highlight the institutional dynamics, that cause a development challenge to persist (FAO, 2015 LM1). They are a useful way to systematically focus dialogue with national and local actors about meaningful interventions to strengthen CD processes, thereby enhancing national ownership of the CD agenda. Capacity assessments can effectively link country capacity assets and needs to development and nutrition goals, and create or sustain momentum to support action. They involve systematic assessments of capacities through structured interviews with key national stakeholders on major nutrition issues, perceptions and suggestions at different levels. CAs also rely on supplementary data to make concrete decisions regarding next steps and strengthen support from development partners as appropriate. These kinds of assessments and discussions can also create champions for change (FAO, 2015 LM2). (See Box 2-2 for CA success factors).

The reason to carry out assessments is not necessarily “to know everything about everything” but to conduct an appropriate level of analysis to support decisions regarding CD (FAO, 2015 LM2). In this way, CAs can be a powerful way to inform capacity development response. Indeed, the risk of not doing a CA is that underlying causes of a problem and associated capacity gaps might be overlooked, and there may be a differing sense of priorities among stakeholders. Effective CD begins by assessing three fundamental questions. It is the answers to these questions that shape the design of each capacity response, according to the specific priorities and issues at stake. These questions are (UNDP, 2009):

- **Where are we now?** This defines the present capacity level, its existing strengths and weaknesses.
- **Where do we want to go?** This defines the vision of what capacity is required for the future. It involves identifying objectives and goals, e.g. as outlined in the national nutrition policy framework and action plan.
- **What is the best way to get there?** This will compare the future with the present situation, and identify the needs to get from the current capacity to the desired future capacity (FAO, 2015 LM2).

A CA can be conducted at any time in the scaling up nutrition policy and programme management cycle. The need may arise during the preparation of a country multi-sectoral, sectoral or sub-national level strategy, plan or programme; following bottlenecks in implementation; following recommendations from an evaluation, among others. In other cases, the need for capacity assessment is initiated by a development partner for various reasons, e.g. to inform a new programme.

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**Box 2-2: CA Success Factors**

- **Clear Purpose:** Be clear about the broader CD or reform issue that the CA is contributing to. For example, policy/plan development, annual multi-sectoral review, setting up a multi-sectoral coordination architecture, among others. Careful planning of a CA will ensure success. It is critical to plan precisely how information on capacities will be used at the completion of the assessment.

- **Country Ownership:** Assessments are much stronger, more legitimate and have more validity if nationally driven by local partners. It is important to remember that national/local actors are both change catalysts and important resources for their countries. Capacity assessments should use participatory approaches that strive to build both national and local ownership. Internally driven assessments are stronger than externally led assessments. Hence, identifying and establishing partnerships with national leaders and high level sponsors is essential.

- **Political Support and Commitment:** Engaging a high level sponsor for the CA from the beginning can help rally support for the exercise. This is likely to be a political leader (e.g. Minister, Permanent Secretary, SUN Focal Point), decision-maker (Permanent Secretary, Director) or any other influential personality. A sponsor who has the ability to mobilize political support can be an asset, especially in CAs with a likelihood of shifting power (e.g. establishing high level coordination mechanisms for nutrition) or if there will be a need to advocate for additional resources from the government to support CD initiatives. The leader can be very useful in (UNDP, 2008):

- Rallying support for the initiative
- Ensuring that the assessment and broader CD agenda receives adequate attention and leads to actionable results
- Ensuring that results feed into national planning and budgeting processes, policy dialogue and programming processes

**Timing:** Capitalize on opportunities for sustained support by aligning the CA with ongoing or planned national processes, changes in leadership, resource availability, and key stakeholder availability, among others. In terms of frequency, broad multi-sectoral assessments should be aligned with national planning processes and could be repeated every five years while the more specific/targeted assessments emerging as follow-up recommendations of the broad assessment can be conducted more frequently.

**Promoting Inclusiveness:** Stakeholders play key roles in data collection, analysis and designing of CD actions. Being fully involved in the entire process leads to ownership of outputs and outcomes. Engaging stakeholders in every step of a CA can also help in building long-term commitments for sustained CD initiatives that emerge. It also provides room for dialogue and collective learning. Important entry points for engagement are existing platforms (e.g. parliamentary committee, the MSP, CSO network, Development Partner Groups, business network). If effectively engaged, stakeholders can contribute to the exercise by supporting any of the following roles:
- Provide political leadership and management oversight
- Mobilize resources
- Help mobilize support from participating organizations
- Support assessment design, methodology, and analysis
- Provide insights on local contexts as well as information on previous studies conducted
- Disseminate the results
- Providing information and key insights during interviews

**Resource Availability:** Availability of resources to support capacity assessments and ensuing capacity development activities should ideally be ensured. Financial sustainability, provisions should be made in the national budget or with development partners to sustain the outcomes.
3 Framework for nutrition capacity assessment

3.1 Main Elements of the Framework for Nutrition Capacity Assessment

A clear framework for nutrition CA becomes a starting point for stakeholders to appreciate the breadth and depth of considerations to be factored in when designing a CA for nutrition. The framework for nutrition CA (see figure 3-1) is designed to help users conceptualize the various components of CD in nutrition and be able to determine a specific CA scope that meets country needs. The framework builds on other models such as those of FAO, UNDP and WFP and attempts to simplify a multi-dimensional presentation for better visualization.

The elements presented by the framework include multi-sectoral capacities - where efforts of all sectors in nutrition converge and align towards a common purpose within a shared platform - and sectoral capacities that are unique to the mandate of each sector. For the multi-sectoral and sectoral capacities, the framework considers three dimensions of capacities (the enabling environment, organizational and individual). While not included in the illustration, the framework can also be applied at different levels of government (national and sub-national) as well as among non-government stakeholders in nutrition (see chapter 2). The framework is flexible and can be adapted to different needs to suit specific contexts, also putting into consideration the objectives of the assessments. It is therefore not mandatory that the entire framework be used in any given assessment.

The framework includes four capacity areas to be considered for each dimension for both multi-sectoral and sectoral capacities. These capacity areas cover generic elements in the policy and programme cycle at the country level. The four capacity areas are: (i) Policies, programmes and frameworks, (ii) Resources and infrastructure, (iii) Coordination and partnerships, and (iv) Evidence-based decision-making. Issues of human rights, gender, leadership and accountability can be integrated across all the capacity areas or be considered as standalone capacity areas if needed.

Figure 3-1: Framework for Nutrition Capacity

3.1.1. Policies, Programmes and Frameworks

This capacity area represents the political will and commitments to nutrition. It includes the “policy and normative capacity” or the capacity to formulate and operationalize evidence-based multi-sectoral and sectoral legislation, policies, plans, strategies of relevance to nutrition (see figure 3-2 for definitions of different frameworks). The assessment identifies the gaps at all levels as well as compliance with international law (UNHCHR 1979) and helps to establish how these policies and laws are formulated, implemented and monitored in practice, such as the

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14 The UN Network for SUN/REACH Secretariat is developing, in collaboration with United Nations partner agencies, a Compendium of Actions for Nutrition (CAN). The compendium is a facilitation tool, encompassing both nutrition-specific and nutrition-sensitive actions, to help foster multi-sectoral dialogue at the country level, particularly on nutrition-related policy formulation and planning. The actions are classified into evidence categories based on the type of evidence available for them. The CAN includes a matrix of potential multi-sectoral nutrition actions and an accompanying narrative and bibliography.
internal capacity of regulatory agencies in terms of mandates, strategies, processes and systems, knowledge and information management, skill levels and learning needs. It includes the capacity of CSOs in terms of policy consultative processes. The process for updating policies should be analysed in order to best seize opportunities to promote nutrition-related policy reform and integrate multi-sector approaches. The governments are expected to ratify and ensure compliance to relevant international law of relevance to nutrition and to align to global targets and frameworks agreed upon in international fora (e.g. Second International Conference on Nutrition, World Health Assembly).

Equally important are the capacities to implement the policies and strategies through relevant nutrition programmes. This will include all stages of a programme cycle from design to implementation and evaluation and should factor in all bodies with a responsibility for various components of the multi-sectoral national nutrition plan. This capacity area also includes ensuring that the delivery mechanisms (e.g. health facilities, storage, schools, and cooperatives) are able to support service delivery.

Figure 3-2: Making Distinction between Legal/Regulatory, Policy, Strategy & Planning Frameworks

<table>
<thead>
<tr>
<th>Legislation &amp; regulations</th>
<th>Policies</th>
<th>Strategies</th>
<th>Plans (e.g. Action Plans)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Main characteristics:</strong></td>
<td>Serve as a commitment to a gov’t goal</td>
<td>Seek to implement a given policy</td>
<td>Seek to operationalize a given policy &amp; strategy</td>
</tr>
<tr>
<td>- Transform policies into legally defined rights &amp; obligations</td>
<td>- Provide a general guide/ framework for action</td>
<td>- Enable broad actions to be prioritized &amp; resources to be allocated</td>
<td>- Serve as a detailed plan to guide specific action &amp; activities</td>
</tr>
<tr>
<td>- Stipulate measures/ arrangements designed to ensure the observance of rights &amp; obligations</td>
<td>- Reflect medium- to long-term goals set by gov’t</td>
<td>- Identify strategies for achieving gov’t goals</td>
<td>- Identify roles, responsibilities &amp; timeframes for actions</td>
</tr>
<tr>
<td><strong>Specific characteristics:</strong></td>
<td>Include objectives, priorities &amp; broad indicators</td>
<td>Include indicators &amp; targets</td>
<td>Include indicators &amp; targets</td>
</tr>
<tr>
<td>- Include policy statements &amp; objectives</td>
<td>- Identify strategies for achieving gov’t goals</td>
<td>- Identify a start date &amp; duration</td>
<td></td>
</tr>
<tr>
<td>- Stipulate procedures to be followed &amp; means of enforcement</td>
<td>- Describe method through which each objective will be achieved</td>
<td>- Include indicators &amp; targets</td>
<td></td>
</tr>
<tr>
<td>- IDs the exec. authority to govern implementation/ application of laws &amp; regulations</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Primary aspects to consider in human resource capacity is the presence of adequate, well skilled and motivated staff, distributed to cover areas with highest needs. Skills will include both technical and functional areas. The assessment will therefore evaluate the ability to institute effective management systems and procedures for

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3.1.2. Resources (Human, Financial) and Infrastructure

This capacity area covers adequacy of human and financial resources and availability of relevant infrastructure to support scaling up of nutrition efforts. This is a very broad area and CA should be carefully designed to remain within a manageable scope relevant to nutrition. In the public sector, some of these capacities may apply to all sectors and may not necessarily be specific to nutrition and could be addressed through a broader reform agenda, e.g. human resources issues addressed through civil service reforms. This area cannot be overlooked if the absence of these capacities is a critical issue for addressing nutrition related challenges.

A key aspect to be considered in human resource capacity is the presence of adequate, well skilled and motivated staff, distributed to cover areas with highest needs. Skills will include both technical and functional areas. The assessment will therefore evaluate the ability to institute effective management systems and procedures for

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*These are for example, the Convention of the Rights of the Child, Right to Food, Right to Health, International Covenant on Economic, Social, and Cultural Rights (ICESCR), Convention to Eliminate Discrimination against Women (CEDAW)*
personnel. This includes staff recruitment, incentives, performance management, and career development issues related to nutrition. The assessment should include both state and non-state actors including communities (e.g. CSOs, producer organisations).

Regarding financial resources, this capacity area is related to the development of costed plans for both nutrition specific and nutrition sensitive actions and mobilisation of resources from government and development partners. It also includes mechanisms to track expenditures for transparency and accountability. Investments in nutrition from government and development partners are projected to increase over time to cover nutrition scale-up needs in the country. Similarly, it is expected that each implementing organisation has adequate resources to implement planned nutrition actions.

Implementation of nutrition actions is supported by relevant infrastructure such as computers, internet, telephones, stationery, transportation and tools, among others. Availability of necessary infrastructure provides the organisations and individuals the ability to utilise technologies that improve service delivery.

### 3.1.3. Coordination and Partnerships

This capacity area covers the ability to engage and build consensus among all stakeholders (e.g. relevant public, private, civil society, UN and development partners). It includes the skills to mobilize stakeholders across sectors; create partnerships and networks that manage conflicts of interest; advocate and raise awareness around nutrition issues; develop an enabling environment that engages all partners; mediate divergent interests; build consensus; and establish collaborative mechanisms.

Government capacity can be supported by formal partnerships and joint projects with learning and training institutions (e.g. universities), the private sector, NGOs, international organizations and communities. Communities are often instrumental to scaling up nutrition interventions and meeting objectives through a ‘community-based’ component.

Strong leadership, quality communication, transparency and advocacy, as well as participatory mechanisms are required to establish and maintain stakeholders’ commitment and support to nutrition. Partners’ engagement can also unintentionally undermine capacity. It is important to identify who leads existing collaboration mechanisms (e.g. government - if so, which ministry - donors, UN agency?).

Stakeholder engagement is facilitated through effective information sharing that promotes sharing of best practices among actors. While the MSP is a primary platform for information sharing, many countries are also establishing information portals or other mechanisms of sharing information with broader stakeholders. This capacity area also includes skills to manage and exchange relevant knowledge to facilitate continuous learning and adaptation to strengthen resilience to unexpected crises.

### 3.1.4. Evidence-Based Decision-Making

This capacity area includes having in place effective nutrition information systems, linked to M&E systems across sectors and within organisations. This facilitates tracking of implementation as well as impact and requires countries to have in place Specific, Measurable, Attainable, Realistic and Time-bound (SMART) national nutrition targets and commitments. The objective is to use evidence to strengthen capacities to understand and respond to issues holistically, to design evidence-based policies and programmes and to anticipate long-term needs as well as risks through effective synthesis of information.

In many countries, sectors have in place information systems (e.g. Education Management Information Systems, Food Security Information Systems, and Health Management Information Systems). Some sectors have been known to leverage on information systems from other sectors, e.g. the District Health Information System (DHIS2) has been used in the education sector. However, not all sectors have integrated nutrition indicators in the information systems. Additionally, while this is happening at the sector level, there are less often mechanisms of bringing the whole picture together through a multi-sectoral information platform (e.g. in the form of a dashboard). Since the idea is that data is valuable to inform decision-making, the capacity to generate and disseminate up-to-date reports for nutrition is key. It is also important that the countries put in place a mechanism to generate and collate feedback from stakeholders.
Effective M&E systems (tools and mechanisms) help to coordinate, monitor and evaluate the implementation and impact of nutrition actions for learning and accountability, and to influence decision-making in a transparent way. It naturally links back to policy dialogue, planning and improved management of implementation by drawing lessons from experience. It is supported by the capacity to effectively produce, access, gather and analyse data and information, and translate it into knowledge which is then disseminated. Programmatic data collected across sectors should be harmonized and consolidated to effectively track implementation and impact. This capacity area also includes generating new data with a nutrition lens through research.

### 3.2 Analytical Framework for Nutrition CA

The analytical framework for nutrition CA contains key indicators that help to measure CD against each of the four capacity areas, further divided into a number of themes. The indicators are generic and applicable for multi-sectoral and sectoral capacities, national and sub-national levels. The indicators also cover each of the three dimensions of capacity; the enabling environment, organisational and individual capacities (see table 3-1).

**Table 3-1: Analytical Framework for the Nutrition CAs**

<table>
<thead>
<tr>
<th>Theme</th>
<th>Indicators by Capacity Area</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Policies, Programmes and Frameworks</td>
</tr>
</tbody>
</table>
| **Political commitments** | ▪ Commitments to global development agenda (e.g. Second International Conference on Nutrition (ICN2), World Health Assembly (WHA), UN Sustainable Development Goals (SDGs), Convention of the Rights of the Child, International Covenant on Economic, Social, and Cultural Rights (ICESCR), Convention to Eliminate Discrimination against Women (CEDAW), Right to Food, Right to Health)  
▪ Nutrition is part of the Poverty Reduction Strategic Plan/National Development Plan  
▪ Public statements by senior politicians and high-level stakeholders in support of nutrition  
▪ Willingness of stakeholders to contribute to scaling-up nutrition |
| **Focused policies/strategies, plans** | ▪ Existence of evidence-based multi-sectoral and sectoral nutrition policies and plans at central level  
▪ Nutrition is integrated into relevant sub-national policies and strategies  
▪ Adequate regulatory framework in place, monitored and enforced (e.g. food fortification regulations, International Code of Marketing Breastmilk Substitutes, maternity protection, tax laws)  
▪ Existence of institutional processes and procedures for policy development and planning that engage broader stakeholder participation (e.g. CSO and private sector)  
▪ Awareness of and commitments to existing legislation and policy frameworks among key actors at all levels (e.g. government, CSO, private sector) |
| **Supportive operational plans, programmes and protocols for implementation** | ▪ Existence of operational plans and programmes with budgets to support nutrition activities (national and sub-national)  
▪ Availability and adherence to guidance, protocols and procedures for use in service delivery (e.g. dietary guidelines)  
▪ Evidence of clear roles and responsibilities of implementation  
▪ Distribution and quality of service delivery facilities (e.g. hospitals, schools)  
▪ Availability of relevant supplies for service delivery (e.g. drugs, seeds)  
▪ Coverage and access by most excluded/vulnerable populations |
| **Resources (human, financial) and infrastructure** | ▪ Adequacy of pre-service and in-service trainings that include nutrition, gender and other relevant diversity factors in curricula (e.g. health workers, agriculture extension workers, teachers)  
▪ Availability of adequate skills to support expansion of services  
▪ Existence of motivated human resource (e.g. promotion, benefits and performance-based incentives)  
▪ Existence and distribution of skilled staff to cover different levels of administrations and service delivery in hard to reach areas  
▪ Existence of staff development plans, including training opportunities for functional and technical capacities  
▪ Existence of clear HR management, supervision and reporting structure  
▪ Clear organizational structure that provides prominence to nutrition |
### Resource mobilisation at central level and budget provision at sub-national level
- Trends in amount of resources going towards nutrition
- Proportion of total budget going to nutrition (e.g. in a sector)
- Share of resources from external assistance that goes to nutrition
- Availability of adequate financial resources to implement nutrition actions
- Existence of budget line for nutrition covered by government and partners at the national and sub-national level
- Existence of a mechanism to track budget allocation and expenditures
- Evidence of innovative means of increasing funding where funds are insufficient (national and sub-national)

### Infrastructure
- Evidence that staff are adequately equipped to perform their duties (e.g. computer, telephone, equipment, transport)

### Coordination and Partnerships
#### Coordination of nutrition actions at all levels
- Existence of an institutional set-up to coordinate multi-sectoral nutrition actions with relevant stakeholders at all levels (e.g. MSP)
- Evidence that there is coordination around nutrition at sector level
- Evidence that coordination mechanisms are functional, strategic and effective
- Adequate representation and participation in relevant nutrition coordination meetings at all levels
- Adequate government-led secretariat functions supporting multi-sectoral and multi-stakeholder coordination at all levels
- Internal stakeholder networks coordination (e.g. government, CSO, UN, academia, donor, business)
- Mechanisms in place to foster information-sharing between partners (e.g. good practices)
- Establishment of procedures for preventing and managing conflicts of interest to safeguard public health and nutrition in the engagement with stakeholders

#### Partnerships, collaborations and alliances
- Existence of a culture of formal and informal consultations and incentives for collaborative actions
- Partnerships, collaborations and alliances developed with key actors (including the media)
- Relevant personnel in place with networking skills to support collaborations and partnership building at all levels

### Evidence-Based Decision-Making
#### Information systems and M&E
- Existence of national nutrition targets taking into consideration agreed global targets and monitoring frameworks
- National nutrition targets and SMART indicators reflected in sectoral plans
- Operational multi-sectoral information system for nutrition (e.g. dashboards), which link indicators at different levels (e.g. program inputs to coverage to impact)
- Mechanism of generating nutrition data on a regular basis (e.g. Demographic Health Survey (DHS), Multiple Indicator Cluster Surveys (MICS), Comprehensive Food Security and Vulnerability Analysis (CFSVA), nutrition surveillance)
- Evidence that nutrition data is being used for decision-making

#### Effective reporting and dissemination
- Evidence that results are appropriately disseminated and effectively utilized by all stakeholders, including at the community level
- Evidence that reports are adequately debated and agreed upon and changes implemented
4 Capacity Assessment Process

The CA process described in this guidance note consists of three phases: Phase 1: Preparation; Phase 2: Execution; Phase 3: Formulation of CD response (see Figure 4-1). This section will provide practical tips on how to plan and execute each of the three phases for a comprehensive capacity assessment exercise that links directly into a broader national process. Tools and resources referred to throughout this section, will be found in a supplementary tools and resources document.

Figure 4-1: Phases of the Capacity Assessment Process

### 4.1 Phase 1: Preparation

**Suggested Timing: 1-3 months**

At the end of this stage, the following should be clarified and documented:

- Purpose and objectives
- Scope of the CA
- Capacity Assessment team - membership and TORs
- Methodology and approach
- Length and timing of CA

<table>
<thead>
<tr>
<th>Deliverable/Achievement</th>
</tr>
</thead>
<tbody>
<tr>
<td>CA TORs – includes purpose, objectives, scope</td>
</tr>
<tr>
<td>TORs of assessment team</td>
</tr>
<tr>
<td>CA work plan - roles and responsibilities, timelines, cost</td>
</tr>
<tr>
<td>CA team in place and trained</td>
</tr>
<tr>
<td>CA design, methodology and tools</td>
</tr>
</tbody>
</table>

The preparatory phase is one of the most important phases and it builds a foundation for a successful CA. This is the phase that sees the initiation of dialogue with stakeholders and building of consensus of a common vision on the CA and its added value. This phase can take several months depending on the complexity of the CA and the number of stakeholders that must be consulted.

The initial dialogue on the need for a CA from the government may be channelled through various mechanisms based on country context, working relationships with partners and existing mechanisms, e.g. a SUN MSP, country SUN networks, sectoral coordination platforms or directly to a partner organisation. The organisation to which a request is directed is also most likely a major partner of the sector or ministry that requests support. For example, a request from the Ministry of Agriculture is more likely to be directed to FAO, while a request from the Ministry of Health to WHO and/or UNICEF. Regardless of the mechanism of channelling the request, it is important that these
requests are shared with other relevant stakeholders at the earliest opportunity to garner their buy-in, support and collaboration. Dialogue in this stage also facilitates discussion about how to secure funding both for capacity assessment and development. It is important to discuss the funding with several partners as some may only be interested in supporting specific areas of the CD.

4.1.1. Purpose and Objectives

The purpose of the CA should be clear and very specific from the beginning. The CA should be an input into CD efforts and not a one off action that ends with a published report. For example, the eighteen countries that have undertaken landscape analysis country assessments\textsuperscript{16} have used the results as inputs to various planning processes at national and district levels, such as revision of national nutrition policy or development of funding proposals (WHO Landscape Analysis). In Senegal, an on-going CA commissioned in 2016 was designed as a key input into the development of the national nutrition multi-sectoral plan following the endorsement of the national nutrition policy in 2015.

Important questions to be considered when framing the purpose and objectives are:
- Why is the capacity assessment needed?
- How will the findings and recommendations be used?
- What capacity needs does the capacity assessment seek to document?
- What wider processes does the CA contribute to? Which strategic decisions and which tactical/operational decisions will the CA inform?
- What are the opportunities to link the capacity assessment recommendations to on-going processes? For example planning and budgeting, programme development, policy review?

4.1.2. Scope of the CA

The scope of an assessment is determined by the capacity areas being covered, the sectors or the organisations being assessed, and the level at which the assessment is carried out (national, district). While the best case scenario is to conduct a comprehensive assessment that provides a holistic picture of the capacity needs, this may not be the case for all CAs.

Availability of resources to cover the CA and subsequent CD actions in future is an important consideration in setting the scope. It is not recommended that a CA is conducted without prior considerations of how the CD actions will be implemented as this may raise unnecessary expectations. The scope of the exercise may therefore be limited to areas where commitments have been secured or to areas prioritised in national plans, which may trigger resource mobilisation. Through advocacy, it would be possible to broker political or partner’s commitments for long term CD support. Additionally, through stakeholder consultations, the scope of a CA can be broadened through partnering with other agencies, mobilising additional resources or leveraging on existing and/or planned assessments. For example in the CA in Senegal, partnership between REACH and the World Bank provided an opportunity to broaden the scope of the CA from only focusing on multi-sectoral nutrition governance to also covering the implementation of reforms and actions within relevant sectors. In addition, some donors already indicated their commitments to support the outcome of the CD.

The second consideration is the importance to build on what has already been done at the country level. In most situations, some capacity areas are already covered through previous assessments. Consultations at an early stage with partners will help clarify what areas have already been covered. It is however important to assess the relevance and/or quality of previously conducted assessments, which may be outdated and/or reflect sectoral bias, etc.

Defining capacity for “what”

To define the capacity for “what”, the first step is to agree on the capacity areas that the CA will focus on. While the capacity area may be clear from the outset, going through the four capacity areas in the CA analytical

\textsuperscript{16} The Landscape Analysis in-depth Country Assessment was initially undertaken in the five countries of Burkina Faso, Ghana, Guatemala, Madagascar and Peru in 2008. Following these country assessments, were Comoros, South Africa and Timor-Leste in 2009, Côte d’Ivoire, Ethiopia, Indonesia and Mozambique in 2010, Mali, Nambia, Sri Lanka, United Republic of Tanzania and Egypt in 2011 and Guinea in 2012.
framework (see table 3-1) provides clarity and an opportunity to refine the initial ideas. It also helps to anchor the CA within a broader nutrition CD framework. Tool 1 can provide additional support to prioritise the scope. A quick scan of existing literature can also further inform and/or confirm areas covered by previous CAs.

The following questions can aide the decision:

- Should the CA cover all the four or a selection of the capacity areas - Policies, programmes and frameworks; resources and infrastructure; coordination and partnerships; evidence-based decision-making?
- Should the CA constitute an analysis of a specific theme or a specific nutrition programme area across one or the four capacity areas (for example multi-sectoral nutrition governance, school feeding, food fortification, Infant and Young Child Feeding)?
- Are the capacity areas identified documented in existing literature (e.g. previous capacity assessment reports)?
- Are there any on-going or planned capacity assessments? Do they cover a similar scope? If so, how can the CA leverage these on-going efforts (e.g. partnerships)?

Defining the capacity “for what” requires dialogue with key stakeholders of the context within which capacity development will be needed. This includes political, policy and programmatic context as well as an understanding of needs, e.g. nutrition situation, immediate, underlying and basic causes by regions, rural/urban, gender, vulnerability groups. This information can be found in key surveys (e.g. DHS, MICS, CFSVA), any recent nutrition problem analysis such as bottleneck analysis\(^{17}\) or problem tree analysis\(^{18}\). Countries that have conducted a REACH multi-sectoral nutrition overview\(^{19}\) and other analytical work are also likely to have this information documented.

Discussion on the other contextual issues such as food crisis, conflicts, epidemics, influx of refugees, including their impacts, most affected population groups and their coping actions and strategies should also be considered. A broader understanding of the CA context helps to frame the analysis, and it can be achieved by a quick scan of existing literature to further inform and/or confirm areas covered by previous CAs.

**Defining capacity for “whom”**

The second question is a “capacity for whom”? This question tries to establish whose capacity is being assessed and is also closely related to the capacity area that is selected. These should be the main actors closely related with service delivery/outputs of the capacity area to be assessed. Since nutrition is multi-sectoral, depending on the scope of the capacity area targeted organisations could be made up of a number of actors. Gathering information on organizations at national and sub-national level involved in implementation, policy/regulation, coordination, research, funding, technical assistance etc. can be a good start to understanding the capacity for “whom”. The exercise can also help to generate a list of key informants. At this stage a list of organisations can be generated through a quick brainstorm, to be refined in the next phase. Alternatively Tool 4 can help to conduct a quick stakeholder mapping. The following questions will assist in the discussion:

- Who are the main actors most closely associated with scaling up nutrition or with the specific capacity area being assessed (consider government, communities, CSO, business and other partners)? What are their main roles and responsibilities? Who should be more involved?
- Should the capacity assessment cover all sectors closely related to nutrition, or focus on a specific sector (e.g. health, agriculture, education, social protection)?
- Should the assessment include all the government ministries, agencies, and departments that contribute to a multi-sectoral or sectoral process in nutrition? Should it also include other key stakeholders (e.g. CSOs, UN, Donors, Business, and Academia)? Should the capacity assessment be confined to a single department within a single ministry (e.g. nutrition department within the Ministry of Health)?
- Should the capacity assessment cover both national as well as sub-national level organisations/institutions?

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\(^{17}\) Bottleneck analysis brings focus to critical, priority issues to address, by examining the multiple constraints that make it difficult to explain the lack of progress in an area.

\(^{18}\) Problem tree analysis (also called Situational analysis or just Problem analysis) helps to find solutions by mapping out the anatomy of cause and effect around an issue in a similar way to a Mind map, but with more structure.

\(^{19}\) The Multi-sectoral Nutrition Overview is comprised of visual slides and the Situation Analysis Dashboard(s), which bring together and repackage existing nutrition-related data across sectors, in order to establish a common understanding of the nutrition situation in a given country.
Stakeholder Analysis

Stakeholder analysis helps in understanding the interests and power dynamics among key stakeholders. The analysis should provide a clear picture of stakeholders likely to support or oppose the CA. This will also be helpful in building commitments, mobilising interest and resources and managing potential opposition. It also provides information on whose awareness of the issue needs to be raised; or whose capacity should be strengthened. Tool 5, looks at stakeholders in terms of whether they support or oppose the issue at hand, as well as their power to influence the outcome.

The following questions may guide the analysis:

- Who are the stakeholders and institutions that are of relevance to the CA and future CD interventions?
- What are their interests in the issue? What aims do they seek to achieve? Are the interests in support or in conflict with the CD issue? Which stakeholders are likely to gain and lose from the CA proposed changes?
- What power do they have to influence the CA process and CD response? What networks does the stakeholder belong to? Do they have political influence? Do they have power to mobilise key actors?
- Of what importance is the CD issue to these stakeholders? What are their current tasks and roles? Are there potential donors to address the CD issue? Do they stand to be negatively affected by any changes that may be proposed?
- Which stakeholders need more engagement for more support in mainstreaming nutrition?

Capacity development is a change process which needs to be managed well in order to reach a consensus on the final conclusion. Engaging stakeholders in every step of a CA helps in building long-term commitments for sustained CD initiatives emerging from the CA. It also provides room for dialogue and collective learning. Roles and responsibilities can be assigned, based on interests and functions, to individuals or existing groups. When roles are assigned to existing groups, care should be taken to identify a responsible individual for the purpose of accountability and follow-up. Tool 2 provides a checklist of suggested roles and responsibilities to be considered in a CA.

4.1.3. Capacity Assessment Team

The capacity assessment team is responsible for undertaking the CA, including the design of the CD response. Assembling a multi-stakeholder assessment team could help in spurriing information exchange and collaboration among different involved institutions and build ownership for follow-up actions (FAO, 2010). It is always important to remember that assessment by others can be a sensitive and delicate issue. The CA team should include representatives of the institutions concerned with the specific capacity area being assessed and their availability and commitment will be critically necessary. Membership can be decided based on the roles and responsibilities of the stakeholders (see Tool 2). The team may be composed of an existing multi-stakeholder working committee, made up of actors interested in the outcome of the assessment (for example the MSP). In such cases the team will be made up of members with vested interests in the outcome and this has the potential of creating ownership of the CA results. From experience in the landscape analysis country assessments, it is important to have the head of nutrition departments and teams from different sectors actively involved in the CA team. The team should also have a solid understanding of nutrition (both specific and sensitive) and should undergo any necessary training needed to successfully undertake the design, methodology, etc. based on the specific context. A team leader should be assigned the role to facilitate the process and move the CA forward. He/she could be a staff of the lead agency or nutrition coordinating body.

In some circumstances, experts may be needed to support a capacity assessment. This may be the case where more objectivity is desired, or if stakeholders’ availability throughout the process cannot be guaranteed, among other reasons. The consultants should include expertise to provide technical support (e.g. certain issue areas) as well as assistance with process facilitation (which in most cases is of a particular advantage). They should have experience in capacity assessment, development and nutrition policy and programme management. Where possible, expertise to conduct the assessment should be sought in-country and may constitute one or more national consultant(s). In cases where local capacity is inadequate, an international consultant(s) can be paired with the national consultant(s).
The capacity assessment team should be composed of individuals with the qualities listed below. Individuals within
the team must have specialized knowledge in at least one of the qualities, and efforts should be made to ensure
that all the three qualities are present among the team members.

(i) **Familiarity of context** (e.g. political and socio-economic landscape): local knowledge is critical for
understanding the complex systems and dynamics behind the current challenges as well as for identifying
appropriate solutions;

(ii) **Content**: knowledge of the functional and technical capacity or sector/institution to be assessed and;

(iii) **Process**: familiarity with the framework; research methodology; data collection, analysis and
interpretation. This role is defined as the methodology facilitator and the individual can be appointed from
the team. The main role of the facilitator is to maintain momentum; champion the process; and manage
discussions regarding the assessment scope and scale, and adaptation of the CA framework for nutrition.

**NB:** Facilitators should specifically have solid CD expertise as an essential pre-requisite for the exercise. A
facilitator is a neutral third party, acceptable to the participants in an initiative, who may have little or no knowledge
of the technical area and who has no substantive decision-making authority. His/her role is to help a group increase
its effectiveness by diagnosing and intervening in group processes and structures (FAO, 2015 LM2).

In the preparatory phase, the main roles and responsibilities of the CA team will include confirming the scope of
the CA, informants, sample size, enumerators, locations, dates, adapting the methodology to the country context,
adapting or developing tools, and developing a work plan detailing what needs to be done, by whom, by when and
the required resources.

### 4.1.4. Methodology and Approach

The CA methodology is to a large extent informed by its purpose and objectives. The methodology and approach
should describe how stakeholders will participate, data collection methods, tools and overall sequencing of the
events. Since the idea is to reach consensus and ensure buy-in of the outcomes, a more participatory process will
be needed to ensure political buy-in and broad stakeholder involvement. Also to be determined at this stage is how
the data will be collected, analysed, interpreted and reported. Tools used (questionnaires and other data collection
tools, analysis sheets, scoring and ranking algorithms) should be agreed upon and prepared in advance or be
adapted from existing ones.

The CA should adopt an approach which integrates both quantitative and qualitative methods. The methodology
can include surveys, desk reviews, focus groups, etc. Data collection can be through, one-to-one interviews, self-
administered questionnaires, focus group, workshops, and case studies as may be deemed appropriate.

Data collection tools should be aligned to the scope of the CA and defined in close reference to the analytical sheet
(see table 3-1). Questions should be customized for specific stakeholders, sub-national level and sectors, e.g.
senior decision makers/managers, technical staff, frontline staff (e.g. health workers at the facility level, agricultural
extension workers, and social workers), and community groups. The questionnaire should explore strengths and
weaknesses; the existing situation; the desired situation; and what needs to be done to achieve it. In cases where
changes have been made to the indicators of the analytical framework, care should be taken to ensure that the
order is reflected in the questionnaire. Countries can adapt existing landscape analysis questionnaire as an
alternative to developing new tools.

The tools and resources document of the guidance package provides an example of a data analysis sheet (see
Resource 1) that can be adapted to fit the country context, scope and objectives of the assessment. The questions
for each indicator are designed to guide aggregation of data collected from different sources (key informants and
desk reviews) to draw conclusions on main capacity gaps.

Care should be taken to ensure that the numbering of the questionnaires is closely linked to the analytical sheet
to avoid challenges during the analysis. The analytical sheet contains a qualitative score (1-5) where (1) is the
least and (5) the most developed capacity.

Key informants should be selected from among the stakeholders. Since different perspectives are necessary to
obtain a balanced view, various approaches can be adopted. For example, varying key informant levels in an
organisation by including policy makers, technical and field staff is one approach. Another approach would be to
gather perspectives from the organisations’ stakeholders. For example, if the CA focuses on the nutrition
coordination unit, then participants should be drawn from the staff (management to technical staff), hosting ministry/agency, a governing board if one exists, all sectors and stakeholders coordinated by the unit (from the decision-makers to the technical staff) local authorities, other partners and/or donors.

A decision should also be made on the administrative levels from which data should be collected. Based on the scope it may be desirable to include key informants from the national to the community level. Selection criteria should be agreed upon to help come up with the appropriate sample of sub-national units to participate in the assessment. Key considerations could be levels of malnutrition, accessibility, on-going programmes, local champions, partners and facilitative local authority leadership, among others.

### 4.1.5. Length and Timing of CA

Timing is a key factor of success both for the CA as well as the ensuing CD actions. The timing should be aligned with other broader processes (e.g. national planning processes) as this provides the opportunity to integrate the recommendations. Another important consideration is the availability of key stakeholders. Check if the proposed timeline coincides with major international, national, religious, traditional events or seasonal activities.

The other consideration is the length of time that the CA should take in terms of days, weeks or months. This will depend on the purpose, scope, availability of the team, funding and the number of stakeholders to be interviewed. The timeline by activity should be summarised in a work plan. The timelines should define:

- Time in each phase of the CA, allow adequate time for preparation and execution. This will include time required to put together the CA team, mobilise stakeholders, collect data, perform analysis and reporting, etc.
- Deadlines for specific deliverables and activities, e.g. dates for field visits, inception/validation workshop, and deadline for reports including stakeholder's inputs.

**Inception meeting**

An inception workshop may be organised to launch a CA exercise. The inception meeting seeks to inform stakeholders and obtain buy-in, consensus and participation. Key areas tabled for discussion and consensus building are: the objectives, scope, key stakeholders, expected outputs, work plan and timing, data collection methodology, and expected roles and responsibilities of the stakeholders.

### 4.2 Phase 2: Execution Phase

The execution should be conducted within a few weeks (2-3) after the preparatory phase to maintain energy and momentum generated in phase 1. This phase builds on activities initiated during the preparatory phase, while moving into the actual data collection, analysis and reporting.

Key elements of this phase include:

- Desk Review
- Stakeholder interviews
- Participatory analysis
- Validation of the findings

| Deliverable/Achievement | CA report with key findings and conclusions |

#### 4.2.1. Desk Review

The desk review provides contextual information for the CA. This stage may include a literature review and initial stakeholder consultations. It is also important to note that while a desk review can serve as an initial step in the CA process, it should also be continuous, as additional information becomes available and/or pertinent in the context of stakeholder dialogue. The desk review provides the following insights:
**Political context:** Conduct a political and context scanning analysis across sectors that may influence the prospects for successful CA and CD. Describe the wider context of importance to the CA, influencing policy making, sector resources, budget allocation mechanism and public financial management, factors influencing organisational capacity and the wider framework for accountability and monitoring, etc. This information can be provided by the CA team and may incorporate other members, if need be (see Tool 3).

**Coordination mechanisms:** Describe if mandates of all stakeholders in scaling up nutrition have been clearly identified and documented. Define the coordination architecture for nutrition from national to sub-national level. For each of the mechanisms identified (national high level/technical, subnational and secretariat(s)), analyse the hosting arrangements (supra-ministerial/line ministry), chair, members (sectors and stakeholders), TORs, roles and responsibilities, and minutes of meetings. Also review any legislation or procedures defining their operations. In addition, review existing sector coordination mechanisms at high level, technical and sub-national level and determine if nutrition is tabled as an agenda item. Describe how the stakeholder groups are organised in the country (e.g. UN, Donor, CSO, Business, and Academia) and how they engage in the multi-sectoral as well as sectoral mechanisms at national and sub-national levels. Summarise key findings and gaps.

**Nutrition related policies, legal and institutional frameworks, on-going programmes:** Review how the country has adapted global development agendas (e.g. the SDGs, and the various conventions). Review the national development plans/Poverty Reduction Strategy Plans, nutrition policies, legislation and plans and describe how they have integrated nutrition. Review existing causal analysis informing sectoral priorities. Reference can be made to the WHO Global database on the Implementation of Nutrition Action (GINA), policy analysis or policy and plan overview report if available. Compile information on all nutrition related programmes across sectors and stakeholders and define the beneficiaries and delivery mechanisms. This information can be obtained from literature or by contacting stakeholders. This information will be available in countries that already have completed a nutrition stakeholder and action mapping. Review the relevant protocols and guidelines as per the scope of the CA. Describe existing capacity development programmes and who is providing capacity building support (for example, if there is a significant public administration reform initiative/project underway with important implications to nutrition). Assess national, regional institutions / resources specialising in nutrition CD so as to make good use of what is there (refer to Tools 6 and 7).

**Nutrition budgets:** Describe any budgets available for nutrition programmes and activities in different sectors as well as the main source of funding. Describe how the funds are spent and the main recipients at national and subnational level. Describe trends and funding from government and development partners in the past few years.

**Human resource capacity in nutrition:** Describe the human resource needs to support scaling-up of nutrition among key sectors and stakeholders at national and sub-national level; consider needs related to nutrition sensitive, nutrition specific and nutrition governance functions. Describe any academic training programme for pre-service and in-service training.

**Information systems and M&E:** Describe existing information systems relevant to nutrition by sector, and how various capacities are currently being monitored/assessed. Is a multi-sectoral nutrition information system in place? If so, how is it linked to sectoral information systems? How is nutrition information collected? How often are nutrition surveys conducted and data on key nutrition indicators collected? Who conducts these surveys? Describe how nutrition information is used and disseminated and by whom? Who receives the information? What feedback mechanisms are in place and how is feedback utilised?

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**4.2.2. Stakeholder Interviews**

Data collection should be led by the country nationals as much as possible. Translate and print the questionnaires as needed. Depending on the size of the data collection teams, they can divide themselves into smaller teams for data collection, while making sure that they retain the key competencies within each team. The quality of the questioning and inquiry of the assessment team must be high. It is important to listen very attentively to the

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20 A policy analysis report defines the problem and the goals, examines the arguments, and analyses implementation of a policy.

21 The policy and plan overview reviews relevant legal, regulatory, policy and strategy frameworks (multi-sectoral, sectoral and sub-sectoral) in an effort to determine the extent to which they reflect nutrition.
stakeholders to capture the true essence of their contributions. Appreciative inquiry and active listening techniques are suggested. Where needed, the members of the CA team should be trained on how to conduct the assessment with the support of a facilitator.

Key steps in this stage:
- Schedule interviews with key informants (organised in advance)
- Ensure venues of meetings have been organised (in advance) in cases of group interviews
- Ensure the team has the appropriate level and areas of expertise to conduct the assessment
- Meet daily to review the questionnaires and complete data gaps
- Organise logistics for field visits including translation of materials

4.2.3. Participatory Analysis

Once data collection is complete, the CA team should meet as soon as possible to analyse the interviews and information collected from the different levels, using the data analysis sheet provided in Resource 1. Data collected should be organized according to the analytical framework’s set of indicators. The purpose of the analysis is to identify strengths and weaknesses in relation to these indicators, which in turn will form the basis for formulating recommendations for action. The analysis also seeks to establish a baseline for each of the indicators assessed. The analysis process should be participatory; that is, the full CA team should agree on the strengths, weaknesses and recommendations. The CA team should also consider whether the analysis would benefit from the participation of stakeholders other than the members of the CA team, especially for the formulation of recommendations.

The length of time taken to complete the analysis and compile a report will vary from 1-6 weeks depending on the amount of data collected.

Upon completion of the compilation of the report, consensus should be reached on the findings and recommendations.

4.2.4. Validation of the Findings

Organizing a final workshop or a structured consultation is a useful way to arrive at a common vision and to start deriving future interventions and modalities. It is important that such workshops or consultations are led by a professional facilitator who can guide the groups during the discussions by asking probing questions.

The final report should be produced and disseminated to all stakeholders at all levels.

4.3 Phase 3: Formulation of Capacity Development Response

A CA helps to identify capacity strengths and weaknesses as well as available opportunities to support CD processes. The CD design phase, aims to identify innovative ways in which the capacity gaps can be sustainably developed.

The key steps in this phase are:
- Prioritization of capacity issues
- Definition of CD M&E
- Costing of CD actions
- Integration of CD actions into plans and programmes

<table>
<thead>
<tr>
<th>Deliverable/Achievement</th>
</tr>
</thead>
<tbody>
<tr>
<td>CD actions indicators integrated into broader M&amp;E framework</td>
</tr>
<tr>
<td>Data collection methodologies and reporting agreed upon</td>
</tr>
<tr>
<td>Capacity development actions integrated into a national plan and/or programme</td>
</tr>
</tbody>
</table>
4.3.1. Prioritization of Capacity Issues

As there are rarely enough resources to address all capacity gaps, identifying a few priorities is a good way forward. Out of the main capacity gaps and strengths revealed by the CA, determine which issues should be addressed as a priority. This step should produce a framework of CD actions with clear timeframes and the pros and cons of each. In addition, it is recommended that a common road map with priority actions is compiled, around which stakeholders can coordinate (e.g. effective use of donor resources as they become available). Figure 4-2 below shows a selection of capacity development activities, while table 4-1 provides additional guidance on how to derive capacity development activities. Further considerations to be made when prioritizing CD actions are:

**Key opportunities:** Based on the key findings determine the incentive, momentum and demand for CD among country actors. Building on a country’s own motivation and readiness for change is key to smart CD design.

**Order and sequence CD actions:** Determine the CD activities that are prerequisites for the effectiveness of others. Identify short-term activities or quick-wins (low hanging fruits) that could set the stage for longer-term support (more structural problems). Remember that CD is a process and so initially small results can create momentum, and give way to new opportunities. Capacity development planning will therefore need to be continually adjusted, in accordance with emerging opportunities.

**Realistic actions:** Determine the most realistic activities, given the financial and human resources available and the country context. Remember when choosing your activities, to consider both technical and functional capacities, within all three dimensions of capacity development: individuals, organizations and the enabling environment.

Figure 4-2: Capacity Development Activities

*Extracted from FAO, 2015 LM1 (p.21).*
<table>
<thead>
<tr>
<th>Activities</th>
<th>Appropriate when</th>
<th>Remember that</th>
</tr>
</thead>
<tbody>
<tr>
<td>High-level advocacy</td>
<td>Buy-in and commitment at highest level needs to be reinforced</td>
<td>Lobbying, media campaigns, public events, etc. to influence both public opinion on the demand side and the highest level decision makers</td>
</tr>
<tr>
<td>Policy support and dialogue</td>
<td>Policy and/or legislative framework are not conducive to effective results and need revision/upgrade</td>
<td>Successfully formulating or revising policy requires the creation of inclusive multi-stakeholder processes</td>
</tr>
<tr>
<td>Creation of multi-stakeholder processes and support to knowledge sharing</td>
<td>Lack of dialogue, coordination and consultation amongst key actors appear to be the main challenge (e.g. between different types of actors or between central and decentralized governmental authorities)</td>
<td>The types of processes depend on the objectives to be pursued: expressing needs? Identifying common concerns? Decision-making? Overcoming mistrust? Influencing policy? The options include: Consultations, consultative forums, stakeholder platforms, alliances, partnerships</td>
</tr>
<tr>
<td>Organizational development support: advisory support for more effective processes and systems</td>
<td>The institutional set-up and/or business processes and workflow are not conducive to effective work, i.e. insufficient delegated authority to actors, no clear accountability lines, no clear support/commitment from highest levels The organizational mandates of main actors are not conducive to effective results</td>
<td>Assessing organizational structure, reporting lines, roles and responsibilities to match organizational function</td>
</tr>
<tr>
<td>Training of trainers and institutionalizing training in national institutes</td>
<td>Training contents do not require frequent updates Appropriate institutes and national trainers are identified</td>
<td>New trainers require follow-up support and coaching Content requires adaptation to national context</td>
</tr>
<tr>
<td>Creation of networks, twinning arrangements (e.g. between research institutes) and South-South cooperation</td>
<td>Some actors have technical knowledge/experience that could be beneficial to other similarly positioned players Organizations and institutions have similar mandates despite different capacity levels</td>
<td>Requires facilitation brokering actions Networks and twinning arrangements might be developed in the context of South to South cooperation You might start with supporting a network mapping exercise (e.g. identifying who might benefit from connecting with whom</td>
</tr>
<tr>
<td>Process/methodological support (e.g. for prioritization exercises)</td>
<td>Actors have all required knowledge but have difficulties in organizing the work, prioritizing, reaching conclusions, identifying inclusive agreements, etc.</td>
<td>CD facilitators have a double-role to play: providing content and assist with process. It is important to identify when to play which role, and when they should simply “observe” and get “out of the way”</td>
</tr>
<tr>
<td>Exposure/study visits (e.g. from one farmers organization to another)</td>
<td>A good level of capacities is already in place Funds are available Exposure to other practices is considered useful Regional linkages need to be consolidated</td>
<td>Study tours should be used to complement and enrich a learning process; they work best when combined with other modalities It takes preparation time Participants should be expected to define and implement an action plan as a result of the visit</td>
</tr>
<tr>
<td>Technical advisory support</td>
<td>Actors lack some technical knowledge in the subject matter and/or require advice for decision making</td>
<td>On the job training on the subject matter should be considered</td>
</tr>
</tbody>
</table>
### Activities | Appropriate when | Remember that
--- | --- | ---
Financial and non-financial incentives | Capacities are in place, but motivation appears to be seriously hindering the process | Depending on how they are used, incentives can either reinforce or discourage ownership of recipients
|  |  | They should be used carefully to avoid becoming dysfunctional and disruptive to the process
|  |  | A mix of non-financial incentives should be pursued in-lieu of salary supplements. These might include: public recognition and awards, professional development opportunities, participation in decision-making processes, attendance to conferences and training, prestige and reputation, improved working conditions

- On-the job learning (including leadership coaching) | Little time is available
|  | Knowledge/skill input is needed “on the spot”
|  | Small groups (2-4 people) require different kind of learning/advisory support at different points in the process | On the job learning needs careful questioning techniques and non-directive attitudes

- Formal face to face training sessions | Large groups have the same learning need(s)
|  | Time and infrastructure is available (room space, projector, flipchart) | Training requires preparation such as learning needs assessments
|  |  | It needs to be participatory (e.g. small group work is preferred to long PowerPoint presentations)
|  |  | It is more costly
|  |  | Learning results should be evaluated

- Coaching | New skills need to be integrated and assimilated
|  | New employees join a team | Coaching can be established formally as a structured process, or can happen informally to build relationships or follow up on other CD activities

Adapted from the FAO Capacity Assessment Learning Module 2.

### 4.3.2. Definition of CD M&E

When CD is tracked and accounted for, it increases the visibility of CD outcomes, could attract new funding, motivates staff and builds corporate pride. It is important that stakeholders identify the root causes and effects of prioritised capacity gaps and through that create relevant capacity development actions (see Tool 8, problem tree CD analysis). Through this process, the stakeholders achieve better clarity of the outputs that will be monitored and it facilitates the development and/or revision of a CD logframe (see Table 4-2). When developing a CD logframe, it is important to bear in mind that in most cases the goals and specific objectives may already have been defined in an existing programme or plan in which case all that will be needed is the definition of outcomes, outputs and indicators (see Box 4-1).

When defining a CD M&E plan, the CA team should define results at various levels, each indicator, data collection (source, method, frequency and schedule) and how the information will be used. Also to be defined is those responsible for data collection and resources needed to implement the monitoring activity. Tool 9 provides an example of an M&E template.

The analytical framework (see table 3-1) contains indicators grouped by the four capacity areas. These indicators can be adapted to form the basis of the M&E. The baseline data will be collected during the CA and subsequent progress can be tracked over time.
Box 4-1: Logframe

The CD goal is the key issue or problem that needs to be addressed in the longer term and should be stated as a learning process or transformation process and should combine both technical and functional capacities. CD is generally described as a learning process when dealing with individuals, and as a change and transformation process when dealing with the enabling environment and organizations (FAO, 2015 LM1).

The specific objectives are the changes to be achieved through a CD programme in the medium term. These are the changes at the outcome level.

Outcomes describe a specific change for individuals and organizations and are linked to outputs. Outcomes should be thought of not only in terms of new products and services but also in terms of facilitated processes (e.g. participatory process initiated/activated/expanded, collaboration increased among different organizations).

Focusing outputs on CD creates the foundation for sustainability of the intended results. To formulate CD focused outputs, the following questions can provide guidance: Whose capacity is developed? What capacity is developed? How do activities ensure that capacities are developed?

Activities are the modalities of the interventions, e.g. training and technical assistance (see Figure 4-2 for examples).

Indicators are targets that show progress of achieving determined objectives. When defining indicators for CD, a distinction should be made between:

- Process indicators: Measure processes that have been facilitated so that dynamic changes are encouraged through implementation of participatory approaches (e.g. process through which stakeholders have been engaged in a process).
- Product indicators: Measure concrete results that have been achieved (e.g. development of a multi-sectoral plan).

4.3.3. Costing of CD actions

The CD activities identified should involve different costing options to estimate the funding requirements for implementation. In this step, further prioritization of the actions will also take place. For each activity, roles and responsibilities should be assigned.

4.3.4. Integration of CD actions into plans and programmes

To make sure that CD actions are implemented, they should be integrated into a national plan or programme into which CD is embedded and resources mobilized to facilitate implementation. It is also important to integrate the actions into budget structures to ensure continued funding especially for the long-term initiatives. Additionally, the indicators should also be integrated into an existing M&E framework to ensure that CD is monitored, evaluated and reported as part of an existing plan or programme and not as a separate activity. For example in a CA of the Tanzania Food and Nutrition Centre (TFNC) supported by the United States Agency for International Development (USAID) in 2012, TFNC took leadership of the follow-up recommendations resulting in both donors and the government committing to fund the implementation of the recommended CD actions. The CD actions as per the CA are being implemented and the government has been increasing its budget dedicated to nutrition and to the TFNC.

The high level sponsors will be instrumental in mobilizing resources as well as advocating for the actions to be integrated into existing plans. Additionally, stakeholders supporting CD for nutrition may advocate for the integration of actions into their own plans as a means of mobilizing resources for sustained support. For example, the UN could integrate the CD actions into the United Nations Development Assistance Framework (UNDAF), UN Network work plan or agency specific plans and either provide direct or broker technical assistance from partners.

The next step is the implementation of CD actions and the actual M&E, which should be built into the overall capacity development process. These two are beyond the scope of this guidance package.
### Table 4-2: Capacity Development Monitoring and Evaluation

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Objectives</th>
<th>Outcomes</th>
<th>Outputs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Individual learning</strong></td>
<td><strong>Purpose</strong>: Promote individual learning, self-reflection and skills development</td>
<td>→ New skills and knowledge used/applied by policy-makers</td>
<td>→ New skills and knowledge acquired</td>
</tr>
<tr>
<td><strong>Actors</strong>: Individuals and small groups</td>
<td>→ Technical trainings and learning initiatives</td>
<td>→ Increased awareness and proven ability to share information</td>
<td>→ Participant understanding of an issue improved</td>
</tr>
<tr>
<td></td>
<td>→ Communication and awareness raising initiatives on technical issues</td>
<td>→ Improved individual motivation for partnering</td>
<td>→ Awareness of local/national leaders on important topics increased</td>
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<tr>
<td></td>
<td>→ Coaching and facilitation</td>
<td>→ Strengthened cooperation and networking capacity</td>
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</tr>
<tr>
<td></td>
<td>→ Abilities and skills in negotiation and mediation</td>
<td>→ New skills and knowledge used in project/programme management, financial management, M&amp;E, project design</td>
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</tr>
<tr>
<td></td>
<td><strong>Outcomes</strong></td>
<td>→ Staff follow standards of good practices</td>
<td></td>
</tr>
<tr>
<td></td>
<td>→ New skills and knowledge acquired</td>
<td>→ Participant attitude changed</td>
<td></td>
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<tr>
<td></td>
<td>→ Participant confidence improved</td>
<td></td>
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<tr>
<td><strong>Organizational change</strong></td>
<td><strong>Purpose</strong>: Promote organizational development and learning to increase performance</td>
<td>→ Clear definition of roles and responsibilities within and among different agencies or organizations</td>
<td></td>
</tr>
<tr>
<td><strong>Actors</strong>: Governmental bodies, community-based organizations, CSO, private sectors</td>
<td>→ Technical expert services</td>
<td>→ Visions, mandates and priorities improved</td>
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<tr>
<td></td>
<td>→ Technical support for organizational development</td>
<td>→ Planning processes improved</td>
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<td></td>
<td>→ Change management</td>
<td>→ Consensus to use knowledge-sharing mechanisms among national ministries reached</td>
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<tr>
<td></td>
<td>→ Changes of systems, processes, mandates, procedures and regulations</td>
<td>→ Linkages between research and extension bodies established</td>
<td></td>
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<tr>
<td></td>
<td>→ Knowledge management and facilitation of knowledge exchanges</td>
<td>→ Collaboration increased</td>
<td></td>
</tr>
<tr>
<td></td>
<td>→ Creation of networks and coordination mechanisms</td>
<td>→ Coordination mechanism established at all levels among relevant organizations</td>
<td></td>
</tr>
<tr>
<td><strong>Change in the enabling environment</strong></td>
<td><strong>Purpose</strong>: Build legal, political and socio-economic frameworks that are conducive to CD</td>
<td>→ Policy discussions initiated</td>
<td></td>
</tr>
<tr>
<td><strong>Actors</strong>: Those who participate in negotiation of rules at all levels</td>
<td>→ Expert services for policy development and review</td>
<td>→ Participatory processes put in place to advance the policy agenda</td>
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<tr>
<td></td>
<td>→ Technical support to national planning processes</td>
<td>→ Stakeholders involved in sector planning processes</td>
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<td></td>
<td>→ Technical consultations</td>
<td>→ Policy needs assessment jointly designed</td>
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<td></td>
<td>→ Policy advisory services</td>
<td>→ Policy legislative framework reviewed</td>
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<td></td>
<td>→ Agenda analysis, round tables</td>
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<tr>
<td></td>
<td>→ Other forms of participation to negotiate rules policies and their implementation</td>
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<tr>
<td></td>
<td>→ In-process facilitation of negotiations</td>
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<tr>
<td></td>
<td>→ Policy/law strategy proposed to decision makers</td>
<td></td>
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<tr>
<td></td>
<td>→ Adopted policy and strategies address relevant nutrition issues</td>
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<td>→ Consensus reached on policy reform</td>
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<td>→ Good practices are nationally/locally adopted</td>
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<td>→ Functioning networks for advocacy of policy measures established</td>
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<td>→ Degree to which policy decisions are implemented</td>
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<td>→ Decision makers support publicly the nutrition strategy</td>
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<td>→ An operating budget is allocated for the strategy</td>
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*Adapted from ‘Enhancing FAO’s Practices for Supporting Capacity Development of Member Countries: Learning Module 1’, FAO, 2015.*
5 Annexes

5.1 SUN Movement

The SUN Movement is made up of 57 member countries committed to achieving nutrition justice and an end to malnutrition in all its forms. As of September 2016, over 50 SUN Countries\(^{22}\) have nominated SUN Government Focal Points who are responsible for ensuring that the country’s efforts engage the whole of government and for coordinating external support. The SUN Movement encourages countries to establish multi-stakeholder platforms, a shared space where different sectors and stakeholders are engaged to facilitate alignment of their activities and to take joint responsibility for scaling up nutrition. In some countries, coordination of partners is supported through secretariats that are either hosted by a supra-ministerial body or a line ministry.

The SUN Movement has developed a Strategy for 2016-2020 which identifies four strategic objectives:

(i) Expand and sustain an enabling political environment
(ii) Prioritize and institutionalize effective actions that contribute to good nutrition
(iii) Implement effective actions aligned with Common Results Frameworks
(iv) Effectively use, and significantly increase, financial resources for nutrition

To achieve these strategic objectives, the SUN Movement strategy roadmap identifies four key capabilities to be strengthened across countries. The capabilities mirror three themes of the SUN Communities of Practice that were initiated in 2014 as a response to most common requests for support from SUN Countries. The capabilities are all related to strengthening capacities at country level. These capability areas cover:

Capability 1: Continuously improve country planning and implementation to end malnutrition;

Capability 2: Mobilize, advocate and communicate for impact

Capability 3: Strengthen capacity for multi-sectoral and multi-stakeholder collaboration at all levels

Capability 4: Ensure equity, equality and non-discrimination for all, with women and girls at the center of efforts

The SUN Networks (Business, CSO, Country, Donor, United Nations) work collaboratively within the SUN Movement, to support the attainment of its Strategic Objectives and the implementation of the roadmap.\(^{23}\) (SUN 2016) The UN Network for SUN contributes to the goal of ending malnutrition in all its forms and represents the collective actions of UN agencies in nutrition through two main outcomes (i) strengthened national capacity for nutrition governance and scale-up of nutrition actions (ii) increased UN Network effectiveness in support of national nutrition efforts.

5.2 List of Tools and Methodologies

1. **FAO food security and nutrition commitment and capacity profile (FSCCP)**. The tool assesses and tracks countries’ commitment and institutional capacity related to food security and nutrition governance.

2. **FAO Nutrition Capacity Assessment** (technical and functional capacities) to identify critical gaps and develop an in-depth capacity development plan (could be in particular in the agriculture sector).

3. **WFP/FAO Capacity Assessment Food Security and Nutrition Information (FSIN) System**

4. **FAO Capacity Development Learning Modules**. The four modules provide useful and insightful learning material for people engaged in capacity development activities at country level. They provide concrete information to implement FAO’s new approach to capacity development and are rich with tools for practitioners.


5. **REACH functional capacity assessment tool** assesses the capacity of a multi-sectoral approach to support scale up of nutrition.

6. **SUN Country self-assessment** is an annual exercise carried out as per a set of indicators that are matched with the four SUN movement strategic processes. It is considered as a monitoring tool rather than an assessment tool.

7. **UNICEF’s Monitoring Results for Equity Systems (MORES)** was developed to ensure that UNICEF is as effective as possible in the protection and promotion of children’s rights.

8. **UNICEF MYCNSIA** East Asia Region. Nutrition capacity was assessed using an adapted ecological system of social analysis method.

9. **West Africa Nutrition Capacity Development Initiative (WANCDI)**, UNICEF and West African Health Organization (WAHO) systematically assessed the capacity to act in nutrition at the individual, organizational, and systemic levels.

10. **WFP National Capacity Index (NCI)** measures change in national capacities for Hunger Governance.

11. **WHO Landscape Analysis of readiness to accelerate nutrition action**. The tool provides an analytical framework of indicators for readiness – i.e. commitment and capacity.
5.3 References


