

2015:2

Sida Evaluation

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Support to Capacity Development – Identifying Good Practice in Swedish Development Cooperation

Sida Evaluation Report for the Joint Scandinavian Evaluation
of Support to Capacity Development



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The authors were supported in the country studies by Stephen Wainaina, Munene Rita Muthoni and Simon Njihia in Kenya; Nedžada Faginović, Nađa Rožajac and Edin Tahirović in Bosnia and Herzegovina; and Polla Prak in Cambodia. The work was conducted under a contract between Sida and NIRAS.

The views and interpretations expressed in this report are the authors' and do not necessarily reflect those of the Swedish International Development Cooperation Agency, Sida.

Sida Evaluation 2015:2

Commissioned by Sida, Unit for Monitoring and Evaluation

Published by: Sida, 2015

Copyright: Sida and the authors

Date of final report: August 2015

Printed by: Citrus/Edita 2015

Art.no.: Sida61922en

URN:NBN: urn:nbn:se:sida-61922en

ISBN 978-91-586-4253-9

This publication can be downloaded/ordered from www.Sida.se/publications

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Abbreviations and Acronyms

Avg.	Average
BiH	Bosna i Hercegovina (Bosnia and Herzegovina)
CD	Capacity development
CDPF-Cambodia	Education Capacity Development Partnership Fund (Cambodia)
Danida	Danish International Development Agency
Dept.	Department
EQ	Evaluation question
FBiH	Federation of Bosnia and Herzegovina
FMET	FBiH Ministry of Environment and Tourism
HRM	Human resources management
KWSP-Kenya	Kenya Water and Sanitation Programme
M&E	Monitoring and evaluation
MoEYS	Ministry of Education, Youth and Sports (Cambodia)
MTS-BiH	Municipal Training System Project (Bosnia and Herzegovina)
NALEP-Kenya	National Agriculture and Livestock Extension Programme (Kenya)
OECD-DAC	Organisation for Economic Co-Operation and Development – Development Assistance Committee
PiS-BiH	Partnership in Statistics in Bosnia and Herzegovina
PRK-Kenya	Swedish Support to Police Reforms in Kenya
QA-Cambodia	Programme for Development of Quality Assurance (Cambodia)
RBM	Results-based management
RiR	Riksrevisionen (Swedish National Audit Office)
RS	Republika Srpska
RSIS	Republika Srpska Institute for Statistics
SCB	Statistiska Centralbyrån (Statistics Sweden)

Sida	Swedish International Development Cooperation Agency
SWM-BiH	Municipal Programme on Solid Waste Management in Bosnia and Herzegovina
TAP	Technical assistance personnel
ToC	Theory of change
ToR	Terms of Reference
TRAC	Tool for Results Management and Appraisal of Contributions
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund

Glossary of Key Terms

Affinity	The degree of alignment with social, cultural, religious, political, economic and environmental norms, which may affect programme implementation.
Appropriateness or adequacy	The degree of alignment of the donor effort with the complexity or difficulty of the capacities to be developed at the partner organisations.
Best fit (degree of)	The combined measure of the degrees of adequacy (appropriateness) and responsiveness of the donor support relative to a given capacity development intervention.
Capacity development	The improvement of the ability of people, organisations, institutions and society to manage their affairs successfully. It comprises improvements in one or more of the following domains: <ul style="list-style-type: none">• Individual knowledge and skills• Systems (methods, routines, procedures)• Structures (authority, rights and duties, communication)• Infrastructure and equipment (hard- and software)• Work environment• External factors.
Change agent	Person within the target organisation who facilitates strategic transformation.
Champion	Person external to the target organisation who voluntarily takes interest in and facilitates the adoption, implementation and success of a cause, policy, programme, project or product.
End-user (alt. end-beneficiary)	Person, group or organisation affected by the results that an intervention has on the performance of a target organisation.

Evidence-based	The characteristics of, or the degree to which a given process is informed by, evidence from previous comparable experiences. This evidence should be documented and used in all phases of the process, from design through implementation to termination. In the context of capacity development, it should refer to matters of programme content, approach, systems, structures and/or management.
Implementer	An organisation tasked by the donor agency with implementing parts or the totality of an intervention. It may or may not be a partner organisation in the intervention.
Incentive	Something that encourages a person to improve her or his performance. In the context of capacity development in the work place, incentives can be informal (e.g. status, recognition) or formal (e.g. job position, work environment, salary and employment conditions).
Intervention	A generic term for a donor-supported action, such as a programme, project or activity.
Intervention logic	A description of a sequence of events that is expected to lead to a particular desired outcome. It includes the identification of the underlying assumptions. It is often used interchangeably with theory of change.
Legitimacy	The degree to which partner organisations accept and are satisfied with the donor's role in and support to development processes, in particular capacity development.
Partner organisation	Organisation with which Sida engages in the planning, implementation and/or review of a given intervention.
Pull (demand-side) approach	Generic term for an approach to donor-supported development interventions in which interventions explicitly engage stakeholders external to the target organisation(s) in order to provide incentives for this (these) organisation(s) to perform better. External stakeholders should be able to oversee and hold the target organisation(s) accountable for their performance.

Push (supply-side) approach	Generic term for an approach to donor-supported development interventions in which interventions only work with and through the target organisation(s), without any explicit engagement of external stakeholders.
Responsiveness	The degree of alignment of the donor effort with the characteristics of a given intervention in terms of the legitimacy awarded by the cooperation partner(s), the intra- and extra-organisational context in which the intervention takes place and the level of specification of and attention to capacity development results.
Results-based management	A management strategy focusing on performance and the achievement of outputs, outcomes and impacts.
Results orientation	The degree to which the planning, implementation and review of an intervention is guided by and oriented towards the attainment of agreed results. It often equates with the degree of development of a results-based management framework, which as a minimum should consist of: <ul style="list-style-type: none"> • Evidence-based and inclusive planning • Output, outcome and impact monitoring • Structured and results-oriented reporting • Knowledge management – learning from experience through strategic use of report findings.
Target organisation	Partner organisation receiving the support provided by Sida. Usually it is the organisation where interventions are implemented.
Theory of change	The same as intervention logic.

Acknowledgements

The evaluation team would like to acknowledge the valuable contribution of the partner organisations in the interventions studied in Bosnia and Herzegovina, Cambodia and Kenya, and of all individuals who agreed to be interviewed for this assignment (see Annex 4). This study would not have been possible without these contributions. A special acknowledgement is also directed to the staff at the embassies of Sweden in these three countries, in particular the heads of development cooperation, Ms Marie Bergström, Ms Kristina Kuhnel and Mr Anders Rönquist, as well as the officers for the interventions studied.

The team would also like to thank the reference group for this evaluation, composed of Michelle Bouchard, Stellan Arvidsson Hyving, Thomas Kjellson, Christian Lien, Annika Mokvist Uggla, Veronica Perzanowska, Patrik Stålgren and Maria Tegborg. The evaluation team is grateful for the continuous support provided by the staff at the Sida Unit for Planning, Monitoring and Evaluation, specifically Ms Katrin Aidnell, M&E Specialist and manager of the evaluation; Mr Lennart Peck, Senior M&E Specialist; and Johan Lidholm, Programme Officer. This acknowledgement is extended to the Danida and Norad evaluations offices, their staff and evaluation teams conducting the parallel evaluations as part of the Joint Scandinavian Evaluation of Capacity Development. Finally, the team would like to express their recognition of the contribution of Mr Nils Boesen in developing and subsequently discussing the approach paper presenting the hypothesis on support to capacity development, which formed the basis of this evaluation.

Foreword

If there is one person who should be mentioned in a foreword of an evaluation on capacity development it is Ingemar Gustafsson. During his 37 years at Sida he contributed immensely to the theoretical and methodological framework which has taken Sida's development cooperation from a transfer of knowledge with "a Swedish expert in every bush" to a more sustainable support with a focus on national capacity development, placing the partners in the driver's seat. The new way of thinking and working has also contributed to the international agenda of capacity development.

In essence, this evaluation proves Ingemar right; capacity development interventions succeed best when they are tailored to the specific needs of the context and are responsive to the situations of partners' countries and its rights-holders.

The evaluation is part of a joint commitment by Danida, Norad and Sida to tackle the complex task of evaluating capacity development. The two years invested in this large-scale evaluation have involved many colleagues both in Stockholm and at the embassies – not to mention the evaluated partners. The effort was initiated by Sida's General Director based on the central role, which capacity development plays in most – if not all – of Sida's work. It is also true to say that the evaluation would not have been the same without the Scandinavian collaboration, which ends in the delivery of a synthesis report analysing the findings from the three agencies' individual evaluation reports. The document that you now hold in your hands is Sida's individual evaluation report.

A point of departure for the evaluation has been Sida's Manual for Capacity Development (2005), which is still an important and relevant document that has aged well. However, it does not seem to have been used to its potential. On the contrary, the evaluation shows that there is room for improvement in using existing evidence, experience and guidance regarding how to support capacity development efficiently. Another point of departure has been Sida's work on results based management. Results in terms of capacity development have proven difficult, and yet so important, to capture. This

evaluation identifies the results of a number of programmes and also discusses what contributed to these results.

These are just a few glints of findings from the evaluation report, which has been an inclusive process of learning together with our partners. This process of learning must now continue and be broadened, and lessons gained shall be translated into appropriate action. Sida's Evidence Group will make sure that the important conclusions and recommendations raised by the evaluation team will be followed by an appropriate management response, allowing Sida to continue its mission to lead the change to reduce poverty, in which capacity development is playing a central role.

I believe the legacy of people like Ingemar Gustavsson can be continued and that we, who believe in the importance of capacity development, can reinforce our work inspired by this evaluation.

Madeleine Hägg-Liljeström

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Department of Organisational Development

Sida

Executive Summary

About the evaluation

This report presents the findings and conclusions of an evaluation of Sida support to capacity development. It is one of three parallel evaluations commissioned by Sida, Danida and Norad on this topic, the results of which will be synthesised in a separate report.

The aims of this evaluation were to assess the capacity results of Sida-supported interventions and to inform the design of future capacity development programmes by this agency. The evaluation focused on the Swedish contribution to capacity development in public-sector organisations.

The evaluation was conducted between September 2014 and June 2015 in three steps: a portfolio screening involving the analysis of the project design document of 29 interventions; a more in-depth desk-based review of a shortlist of 13 interventions; and country studies in Bosnia and Herzegovina, Cambodia and Kenya conducted between January and March 2015.

It was structured around a hypothesis of how donor support might lead to better capacity development results. This hypothesis postulates that donor support is more effective when it is adapted to context; is accepted as legitimate and adequate; combines supply- and demand-side approaches; and is geared towards attaining results. Testing the validity of this hypothesis involved:

- assessing the capacity development results of the selected projects;
- characterising each project in terms of the elements of the hypothesis; and
- analysing the relevance of each of these elements for the observed results.

Based on the conclusions from these three steps, a generic theory of change of donor support to capacity development has been elaborated. A set of recommendations has been proposed for how Swedish development cooperation can move ahead in its work on capacity development.

Developing the capacity of partners is a fundamental aim of development cooperation

In different forms and with varying emphasis, fostering capacities in partner countries has been a recurrent objective of development cooperation in general and Swedish aid in particular. The initial focus on the transfer of technical capacities from donors to partners has progressively been replaced by the notion that capacity needs to be developed within the specific contexts and with the active contribution of partners. The aid effectiveness agenda highlights this change in focus, emphasising partner-country ownership of aid, the strengthening of local capacity as a foundation for development and recognising capacity weaknesses as a major constraint to sustainable development. This has underscored the need to recognise capacity development as both a means and an end of development aid.

Despite Sida's adherence to this principle, in the last decade capacity development has lost part of the centrality it previously had in the organisation's work. Sida does not have a function in the organisation dedicated to integrating capacity development into its diverse fields of work. Also, the current procedural rules emphasise capacities to manage the aid process over the capacities of partners to deliver improved products or services. Nevertheless, capacity development as a means or an end goal is still present in several thematic, bilateral and multilateral Swedish cooperation strategies, and is a salient feature of most Swedish-funded interventions worldwide.

Sida-supported interventions have contributed to capacity development results in partner organisations

The country studies showed that the Swedish support made a very important contribution to the development of the capacities of the partner organisations studied. This support targets different types of capacities necessary for partners to deliver a variety of products and services in a manner that is generally efficient. All country-study interventions comprised the strengthening of individual knowledge and skills, as well as of methods, procedures and routines at the partner organisations. To a lesser extent, interventions addressed the administrative structures or infrastructure and equipment of partner organisations. The least common types of measures were those dealing with the work environment and factors external to the partner organisations.

In addition to the planned results, the Swedish support has catalysed numerous positive developments in the partner organisations. These resulted from increased awareness about a problem or means of dealing with it, greater willingness to seek new collaborations and enhanced transparency of organisational processes.

Uneven results at the different levels of some projects point to the importance of carefully adapting the support to the needs and priorities of partners at all levels.

To better contribute to poverty reduction, capacity development projects should explicitly target people living in poverty, either directly or indirectly; include specific poverty reduction objectives; and target sectors, institutions or geographical areas used by people living in poverty.

The Swedish support was generally adequate for the requirements of the capacity development processes

Sida operates in a diversity of contexts and supports capacity development interventions of different thematic, geographical and organisational complexity. Given that complexity, providing the necessary technical expertise, being capable of engaging with multiple partners and stakeholders and adapting to different contexts have been important factors for the Sida-supported interventions studied to attain the intended capacity development results.

Most Sida-supported interventions used individuals at the partner organisations to support change processes, but their role as change agents was seldom clarified and prepared for. The use of external individuals or groups able to overcome resistance to change was considered in only a few cases. Its relevance varied depending on context and capacity development objectives.

The country studies also showed that better results were achieved when the Sida support aligned with the interests of individuals or groups capable of influencing organisational change processes, as well as with the timing of other related projects or reforms. Adopting a stepwise, incremental approach to capacity development was seen to be necessary when the initial capacity of the partner is low. Adjusting the rhythm of change processes to the capacity of the partner to incorporate and make use of the new capacities was identified as an important aspect. Similarly, a clear vision of the objectives shared by the donor and partners was seen to facilitate their efforts towards achieving capacity development results.

Sida is a legitimate partner in capacity development, and Sida-supported interventions were generally adapted to context

A comprehensive analysis of existing and needed capacities, of the priorities of all relevant partners and, more broadly, of the organisational and societal context was seen to be critical for the relevance and acceptance of Sida-supported capacity development efforts. An important point was that such an analysis should be participatory and engage all relevant levels of the institutions involved in a given change process. This includes the political level if deemed relevant for the intervention. Assessing and using locally available capacity was seen to facilitate engagement with partner organisations and support the sustainability of interventions.

In the interventions studied, Sida was regarded as a welcome and trusted partner, capable of supporting change processes with adequate technical and managerial capacity. The Sida approach of working through its cooperation partners enhances their ownership and engagement. Other important factors for the legitimacy of Sida in the interventions studied were the balance between Sida and partner steering, mutual trust, the relevance of the Sida support and the duration of the relationship between Sida and the partner. In this regard, longer cooperation was seen to enhance trust and legitimacy, besides giving more time for capacities to be developed and incorporated at the partner organisations.

Sida engaged predominantly with actors in the target organisations and relatively little with external actors

The evaluation assessed the effect on capacity development results of engaging end-users, oversight institutions or other actors external to the organisations targeted by the interventions. Very few of the interventions studied engaged directly with such external actors, and Sida mostly supported processes from within the target organisations.

Engaging external actors is no magic bullet and should be carefully assessed against the capacity development objectives, the characteristics of the target organisation and the products and services it delivers, the capacity of the external actors and the broader societal context.

The quality and use of results management frameworks is important for capacity development results, but varied between interventions

In line with the explicit results orientation of Swedish development cooperation, all the interventions studied included results frameworks developed during the design or the initial implementation phases. The quality of these results frameworks varied considerably though, as did the extent to which they were effectively used for day-to-day management of the capacity development processes.

The country studies demonstrated the importance of the donor and partners sharing a good understanding of the results and logic of capacity development projects, to channel and coordinate efforts in the most effective way. The specification of activities, outputs and outcomes, with corresponding targets, indicators and means of verification for each type of capacity was generally lacking in the studied interventions. These elements were important for an adequate follow-up of capacity development processes and results. Communicating and learning from results was seen to be necessary for donor and partners to develop adequate corrective actions. In this regard, it was observed that Sida-supported interventions generally used results from previous evaluations in the design of new interventions or new phases of the same intervention; and that Sida made systematic use of the information produced in the interventions for managing them, but that the communication of results between Sida and partners was sometimes insufficient.

Identifying good practice in the Swedish support to capacity development

A set of good practices relative to donor support to capacity development in partner organisations has been identified based on the Sida-supported interventions studied. These good practices have been illustrated in the form of a theory of change with the following steps (Figure 1):

1. The policies, strategies, priorities and needs of the partner country and organisation(s) need to be identified to ensure the understanding, satisfaction and support of all partners. The ability of partners to provide and manage their contribution must be ensured.

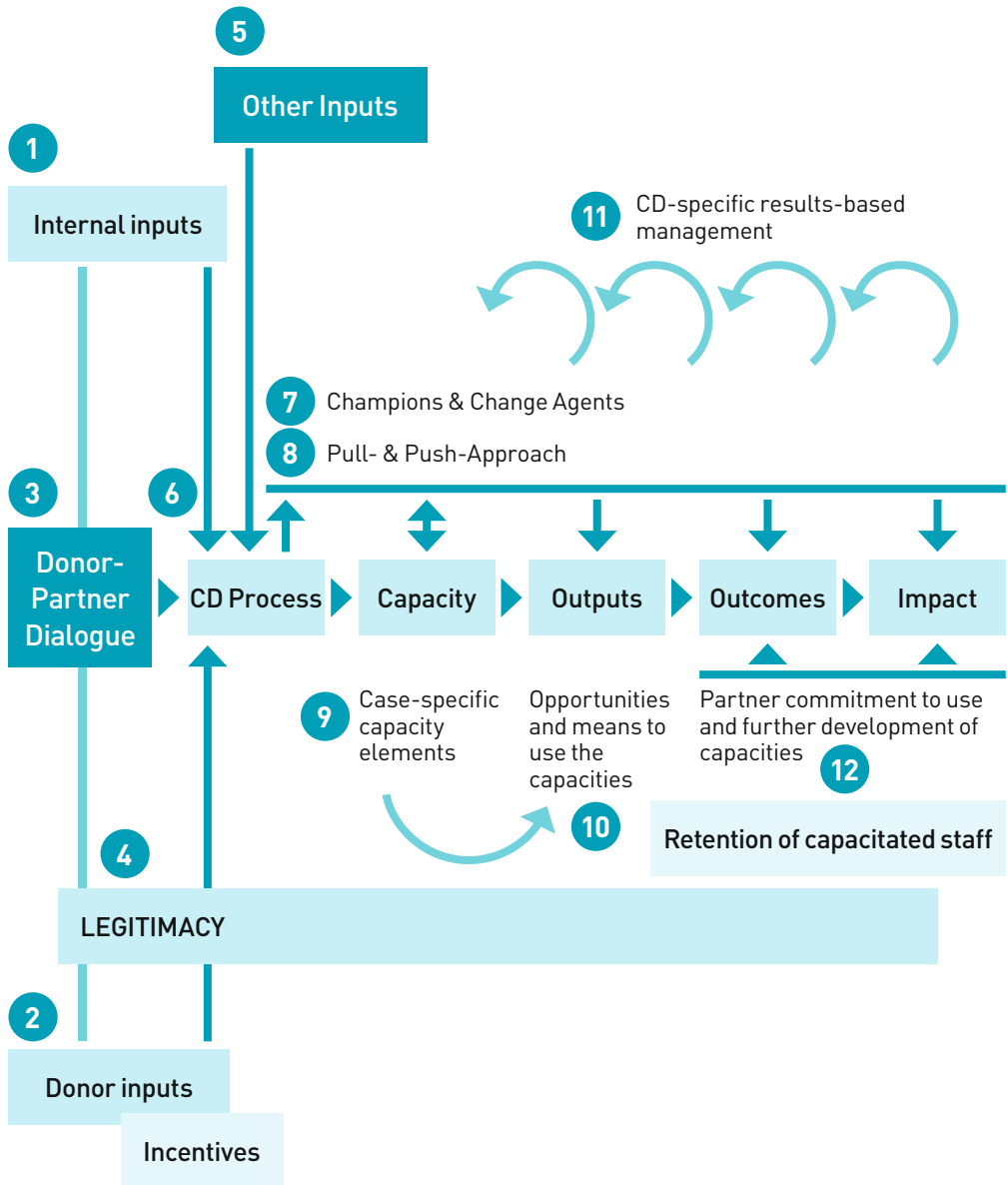


Figure 1. A generic theory of change of donor support to capacity development

2. The capacity of the donor to manage the capacity development process and to finance technical assistance of sufficient standard needs to be assessed prior to committing to providing support.
3. In view of informing project design, donor–partner dialogue in the preparatory phase should encompass: i) softer, sensitive issues such as staff incentives, power relations, management traditions and elite interests; ii) a joint and participatory capacity needs assessment; iii) an agreement on objectives and expected results; and iv) an assessment of the required effort by all partners vis-à-vis the complexity of the targeted capacities.
4. Legitimacy is built up through the initial interactions between the donor and partners, and is strengthened or weakened in the course of the process depending on the donor–partner relations.
5. Inputs from individuals or organisations other than the partner organisations should be appraised and, if possible, included in the project. Such inputs constitute a further opportunity for developing capacity in the partner country and can help sustain change processes beyond the donor support.
6. Capacity development processes must be designed case by case. They should: i) be informed by a comprehensive needs and context analysis; ii) be adaptable to changes; iii) align with internal processes at the target organisation; iv) be incorporated into the routines of the target organisation; and v) include the strengthening of partner organisations' capacity to manage change processes.
7. Actors within and outside the target organisation (*change agents* and *champions*, respectively) capable of supporting change processes and overcoming resistance to change may be used throughout or during parts of the project. The benefits of their use need to be appraised case by case.
8. The benefits and requirements of an approach involving the target organisation and external actors (*push* and *pull approaches*, respectively) should be considered case by case. The legitimacy of the donor and the relations between cooperation partners may be affected by the engagement of external actors.
9. The decision on which capacities to develop is informed by the assessment of existing and needed capacities. The choice must consider the interdependencies between different capacities in view of elaborating a holistic capacity development process.

10. Opportunities and means for the new capacities to be used at the partner organisation need to be ensured, notably by integrating them with existing processes.
11. It is necessary to monitor, evaluate and report on progress and results to foster a shared understanding of the degree of achievement, and to enable adjustments of effort and focus towards the agreed capacity development results.
12. Partners need to commit to continuing the capacity development process after the end of the donor support. Exit strategies should be devised jointly by the donor and partners, eventually including post-project obligations.

Strengthening Sida's work with capacity development

The evaluation proposes a set of recommendations for Sida to strengthen its work with capacity development in partner countries and organisations. These recommendations hinge on the assumption that partners' capacity is necessary for the sustainability of any development effort and on the premise that capacity development remains a cornerstone of Swedish aid.

- Sida should promote the explicit inclusion of capacity development as both a means and an end goal of the Swedish development cooperation policy currently undergoing revision.
- Capacity development should be promoted within Sida to the level of a fifth focus area or a comparable thematic hierarchy, to expand its scope and give it greater priority within Swedish development cooperation and Sida.
- A dedicated function should be established within Sida to develop methods and guidelines for capacity development, and to promote the integration and follow-up of capacity development in all of Sida's work.
- A strategy for reinforcing awareness and knowledge of capacity development among Sida staff at headquarters and abroad should be developed.
- Analysis of institutional capacity development needs and definition of objectives and overall strategies for institutional capacity development should be included in Sida's contributions to National Cooperation Strategies. This should be done for focus areas (sectors), key cooperation partners and national and regional programmes.

- The assessment of existing and necessary capacities of partner organisations should be made compulsory for all Sida-supported interventions. This should be conducted in the proposal appraisal phase and its results translated into capacity development objectives included in the results framework of the intervention.
- The appraisal of project proposals by Sida should include an analysis of the capacity assessments made, the capacity development objectives in the results framework, and the consistency and adequacy of proposed actions to achieve the intended capacity development goals.
- Capacity development should be assessed specifically as part of the regular monitoring and evaluation of Sida projects, and reported accordingly.
- The 2011 Sida Guidance on Capacity Development should be updated in line with the findings of this evaluation. The revised Guidance should contain much more detail and practical instructions on how to incorporate capacity development into all steps of the project cycle, from the initial situation analysis to the final evaluation of capacity development results.
- Finally, Sida should assess jointly with the Swedish government the need for additional resources to enable the broadening and deepening of the work on capacity development.

1 Introduction

1.1 FOCUS OF THIS EVALUATION

1.1.1 Evaluating capacity development

Development assistance has always had the ambition of delivering sustainable results and fostering endogenous capacities that would make aid redundant. Skills training and technical assistance delivered inside target organisations have been among the main donor inputs to achieve these ends. In parallel with the broadening of the view on capacity development (CD), donors have over the last decades gradually applied results-based approaches in this area. Because of the focus on results, evaluations have aimed more at capturing data on tangible, easily measurable effects, and less at measuring less visible phenomena, such as changes in individual skills and behaviours or in organisational systems and structures. Consequently it has been difficult to verify the view that modalities of donor support with large CD components are likely to be more effective and yield more sustainable results than those lacking a clear CD focus, as the evidence base has proved insufficient.

The interest in these issues led Sida, Norad and Danida to engage in a joint large-scale thematic evaluation of support to CD, comprising a series of preparatory studies; three parallel evaluations; a synthesis report summarising and comparing the conclusions of the three evaluations; and both individual and joint dissemination activities. The three evaluations were conducted in parallel, following a common methodology and responding to a common set of evaluation questions (EQs). This is the evaluation commissioned by Sida.

1.1.2 Focus and scope of the evaluation

The understanding of capacity and CD adopted in this evaluation is that of the Organisation for Economic Co-Operation and Development's Development Assistance Committee (OECD-DAC): *“Capacity is understood as the ability of people, organizations and society as a whole to manage their affairs successfully... ‘Capacity development’ is*

*understood as the process whereby people, organizations and society as a whole unleash, strengthen, create, adapt and maintain capacity over time.*¹

Because of the need to limit its scope, this evaluation focuses on the CD of public organisations; support to non-public institutions has only been considered if directly relevant to public-sector support. Interventions have been selected in which CD was either a primary objective or a subsidiary component of programmes with other primary objectives. The interventions were sampled from the Sida portfolio during the formulation phase using pre-defined criteria described in Section 1.4.1.

Organisational CD is considered to require change in one or several of the following capacity dimensions: (i) systems (methods, procedures, routines); (ii) structures (authority, rights and duties, communication); (iii) individual knowledge and skills; (iv) equipment and infrastructure (hard- and software); (v) work environment (physical and social environment); and (vi) factors external to the organisation.

While the focus is on the support to CD from the three agencies, the evaluation recognises that because CD is first and foremost an endogenous process, it is not meaningful to assess the agencies' contribution without considering the efforts of the partner institutions and the context within which this takes place. Hence the evaluation focused on analysing the contribution of Swedish support, instead of attempting to attribute a particular change to that support. Even in cases where the Swedish support was regarded as a decisive element of a change process, the evaluation team has regarded this support as one among other possible contributing elements.

1.1.3 Purpose of the evaluation

The purpose of this evaluation is to promote learning and accountability relative to Swedish support to CD. With regard to learning, it aims to generate knowledge that will enable the evidence-based design of strategies for CD. With respect to accountability, the evaluation provides evidence of the extent to which Swedish support to CD has been relevant, effective and efficient. It also generates knowledge about the sustainability and impact of CD interventions.

¹ OECD-DAC. *The Challenge of Capacity Development – Working towards good practice*. DAC Guidelines and Reference Series. Paris: OECD; 2006.

The evaluation is tasked with elaborating a set of recommendations to inform the process of reviewing policy and working methods in Sida's support to CD.²

1.2 EVALUATION APPROACH – THE HYPOTHESIS ON SUPPORT TO CAPACITY DEVELOPMENT

A key aim of this evaluation consisted in the testing of a hypothesis about donor support to CD (see Annex 3). In its simplest formulation, the hypothesis postulates that donor support to CD is more effective when it is sensitive and adapted to context; accepted as legitimate and adequate; combines supply- and demand-side approaches; and is adequately results-oriented. These four postulates have served to organise the evaluation in the four focus areas indicated in Box 1.

Box 1. The four focus areas used to organise the evaluation

Focus area 1: The relevance and opportunity of a 'best fit' approach for CD support well adapted to specific intra- and inter-institutional dynamics and the wider context.

Focus area 2: Within the 'best fit' dimension, the appropriateness and legitimacy of external (donor) involvement in different dimensions of CD, and whether some processes may be so complex and demanding that the ability of donors to add value is limited.

Focus area 3: The merits of looking beyond the supply side of public-sector institutions to foster broader accountability relations or other types of collaboration with, for example, civil society, the private sector, the media or oversight institutions.

Focus area 4: How a results-focused approach to aid for CD can serve to improve learning and accountability among aid agencies in the future.

Testing the validity of the CD support hypothesis involved, for selected interventions: (i) the description of CD results; (ii) the characterisation in terms of the different factors in each focus area; and (iii) the analysis of the relevance of these factors for the attainment of

² The complete terms of reference for the evaluation can be found in Annex 2.

CD results. This approach enabled the identification of components of the hypothesis that affect the results of donor support to CD. This in turn informed the elaboration of a generic theory of change (ToC) of donor support to CD.

1.2.1 The ‘best fit’ of donor support – focus areas 1 and 2

The first two components of the CD support hypothesis combine in what has been termed the *best-fit* element. The hypothesis postulates that CD results will be better if change processes are adequate for the complexity of the capacities to be developed and if the donor is responsive to the situation of the partner country and its organisations. This postulate breaks down best fit into two key components: adequacy and responsiveness.

Adequacy

The first best-fit component – *adequacy* – reflects how appropriate a given CD intervention is in relation to the complexity of the capacities necessary for the target organisation to deliver a given service or product.³ Complexity itself is described by means of five criteria, namely: (i) the specificity of the products or services for which the capacities are necessary; (ii) the thematic, institutional and geographical distribution of the capacities; (iii) the type of incentives to performance; (iv) the interests of elites relative to the CD process; and (v) the *affinity* of the capacities with dominant social norms and values.

The degree of adequacy of donor support is assessed in terms of the following six factors: (i) the level of effort by donor and partners; (ii) the use of champions; (iii) the role of change agents; (iv) the timing and rhythm of change processes; (v) the staging of change processes; and (vi) the clarity about CD results.

Responsiveness

The second component of best fit – *responsiveness* – regards how well the donor support aligns with the dynamics of partner organisations and the societal context in which it is embedded. The dominant factor of this component is that of: (i) the *legitimacy* awarded to the donor by the partner organisation(s), but it also considers factors related to: (ii) the degree of understanding of the context by donor

³ The term ‘appropriateness’ has, therefore, also been used to coin this first dimension.

and partners; (iii) the clarity about CD results; (iv) the degree of specific attention to CD in the different phases of the intervention; and (v) the type of incentives for donor staff to work to attain CD results.

As alluded to in the previous section, these two main dimensions of the best-fit element have been translated into focus areas 1 and 2 of this evaluation. It is important to observe that the focus areas do not align exactly with the two dimensions of adequacy and responsiveness. Focus area 1 concentrates mostly on the understanding of the setting and context by donor and partners, and how this is reflected in the intervention. This has been interpreted as encompassing the ‘adequacy’ dimension, but also the second of the ‘responsiveness’ factors (‘understanding the setting’).

Focus area 2 refers explicitly to the ‘legitimacy’ factor of ‘responsiveness’. Although the term *appropriateness* is explicitly mentioned, it is understood here in the broader context of legitimacy and alignment with the setting, which are two factors of the responsiveness component. Hence within this evaluation focus areas 1 and 2 were interpreted as corresponding to the hypothesis components adequacy and responsiveness, respectively.

1.2.2 Pull and push approaches – focus area 3

The third component in the CD support hypothesis pertains to the degree to which donor support has been divided between stakeholders internal and external to the target organisation(s). This component corresponds to focus area 3.

Traditionally, donor support has been channelled to and through those organisations supplying a service or product, an approach termed *push* or *supply-side approach* in this evaluation.⁴ The evaluation has investigated whether an explicit engagement of stakeholders demanding a given degree of performance from target organisations has had any bearing on CD results. Such stakeholders can be the end-users of a service or product, interest or civic groups, institutions overseeing the performance of the recipient organisations, or any other entity with the right to hold target organisations accountable.

⁴ ‘Push approach’ refers to support being given to organisations delivering (‘pushing’) services and products to end-users.

Working explicitly with such account-holding stakeholders has, in this evaluation, been termed *pull* or *demand-side approach*.⁵

Examining the balance between pull and push approaches involved assessing how factors internal and external to the target organisation(s) have been analysed by donor and partners, and the engagement of internal and external stakeholders in selected interventions.

1.2.3 Working with results – focus area 4

The fourth and final component of the hypothesis, corresponding to the fourth focus area of the evaluation, pertains to how Sida-supported CD interventions have worked with results. The premise to test is whether comprehensive and systematic work with results – notably by means of so-called *results-based management* (RBM) – has led to better CD results. The *results orientation* of selected interventions was assessed in terms of the clarity, consistency and comprehensiveness of the *intervention logic*; the quality of monitoring of progress and achievements with respect to CD; the quality and usefulness of reporting on this progress and achievements; and the quality and usefulness of knowledge management systems for learning by donor staff and partner staff.

In parallel to the four focus areas, the evaluation addressed 15 EQs covering parts of the CD support hypothesis as well as other aspects of the Sida support to CD. Figure 2 depicts the factors in each of the components of the CD support hypothesis and the four focus areas described in this section. It also makes reference to how the EQs relate to specific hypothesis components and underlying factors. The figure indicates the chapters where findings relative to each focus area are presented. The EQs are discussed further in the next section (1.3), whereas the overall structure of the report is given in Section 1.5.

⁵ ‘Pull-side approach’ is derived from the notion of external stakeholders ‘pulling’ a recipient organisation into delivering services or products to a given standard.

BEST-FIT

Better capacity development result will be achieved if change processes are **adequate** to the complexity of the capacities to be developed and if the donor and partners are **responsive** to the situation of the partner country and its organisations.

ADEQUACY**EQ11**

Degree of match between the characteristics of the intervention and the complexity of the capacities to be developed.

- Level of effort
- Use of champions
- Use of change agents
- Timing and scheduling
- Staging of the change processes
- Clarity of CD results

COMPLEXITY

- Specificity of products and/or services
- Scope and distribution of capacities
- Incentives to performance (for partner organisation staff)
- Interests of elites
- Affinity with dominant social and cultural norms

Focus area 1
Chapter 4

RESPONSIVENESS

Degree of match between the response of the donor and partners and the organisational and societal context.

- Legitimacy
- Understanding of the setting
- Clarity of CD results
- Follow-up of CD
- Incentives for donor staff

EQ2**EQ5****EQ4**

Focus area 2
Chapter 5

PULL- & PUSH-APPROACH**EQ4**

The balance between pull- and push-approaches has a bearing on the results of donor support to capacity development.

APPROACH

- Comprehensiveness of analysis of internal and external factors
- Degree of engagement of internal and external stakeholders

Focus area 3
Chapter 6

WORKING WITH RESULTS

The degree of results-orientation has a bearing on the results of donor support to capacity development.

EQ4**EQ6****RESULTS- ORIENTATION**

- Clarity of the intervention logic
- Quality of CD monitoring
- Quality of reporting on CD
- Quality of knowledge management relative to CD

EQ12

Focus area 4
Chapter 7

Figure 2.
Relationship between the capacity development support hypothesis, the four focus areas and selected evaluation questions, and where these are discussed in this report

1.3 EVALUATION QUESTIONS

The 15 questions addressed in this evaluation are presented in Box 2. As illustrated in Figure 2, some of these questions address components of the CD support hypothesis, but there are factors of the ‘responsiveness’ component that are not covered explicitly by any of them. These are the three last factors, ‘clarity of CD results’, ‘level of specific attention to CD’ and ‘incentives for donor staff’. EQ4, on the contrary, is actually composed of three separate questions – addressing issues related to the understanding of the setting, the influence over pull- or demand-side factors, and the degree to which donor support is evidence-based – and hence is addressed in different places.⁶ EQ14 was not responded to because none of the interventions studied involved cooperation between Sida and new actors in development, which for the purpose of this evaluation were interpreted as large enterprises that engage in development cooperation initiatives.

Box 2. The 15 evaluation questions

EQ1: How can a generic theory of change for support to capacity development be formulated that would enhance the effectiveness of support to capacity development?

EQ2: What is the relevance of the strategies and initiatives for support to capacity development? For example, do they primarily aim to improve capacity to manage aid programmes, or do they aim to achieve a more general improvement of capacity in a sector or an institution?

EQ3: To what degree are the capacities to manage capacity development processes — for example, change management competencies, incentives, procedures, guidance, management — effectively in place and adequate among the donor agencies and partner institutions?

EQ4: How have strategies and interventions been designed to fit with context-specific factors such as specific institutional dynamics or the social, cultural, political and legal environment, and to contribute to influencing factors external to the institution(s), such as demand and accountability mechanisms? To what degree are strategies based on evidence on how support to capacity development has worked elsewhere?

⁶ Respectively, Section 5.1, Chapter 6 and Section 7.2 for each of the portions of the question.

Box 2. The 15 evaluation questions

EQ5: How do representatives of the partner institutions and/or other stakeholders in partner countries perceive the donors' role in capacity development, and what do they think is the appropriate role of donors in future capacity development?

EQ6: How have results-orientation and results-based management approaches been applied in CD support, and how have they contributed to learning and improved effectiveness?

EQ7: To what degree have interventions achieved the planned results at outcomes level, and to what degree is there a correlation between the interventions and observed improvements in capacity of the partner institutions?

EQ8: What are the possible unintended effects (positive and negative) of support to capacity development?

EQ9: To what degree can one conclude that interventions to support capacity development have been effective and represent good use of resources (value for money), compared to other possible ways of supporting the same sectors or institutions(s)?

EQ10: What characterises support to capacity development that is relatively more successful versus strategies and interventions that are relatively less successful?

EQ11: Under which circumstances, for which aspects of capacity and for which specific inputs may donor support to capacity development be appropriate and effective? Are there situations where the agencies should refrain from being involved in capacity development, and/or modalities and approaches they should no longer apply?

EQ12: To what degree is Sida following its guidelines to support CD?

EQ13: Are the current CD approaches an effective way to reach people living in poverty (directly and/or indirectly)?

EQ14: What are the CD lessons learned which Sida could use to move forward when working with new actors in development?

EQ15: Given last decade's focus on results-based management, how could Sida work with clearer definitions and reporting on results in CD?

Table 1 shows the relationship between the EQs and the key elements of the evaluation approach, and where they are addressed in this report.

Table 1. Correspondence between evaluation questions, elements of the evaluation approach and chapters where they are discussed

Evaluation question	Element of the approach	Chapter or section
EQ1	Theory of change of support to CD	10.2
EQ2	Focus area 2	5.1
EQ3	Other factors (external to the hypothesis)	9
EQ4	Focus areas 2, 3 and 4	5.1, 6 and 7.1
EQ5	Focus area 2	5.1
EQ6	Focus area 4	7.1 to 7.4
EQ7	CD results	3.1
EQ8	CD results	3.2
EQ9	CD results	3.3
EQ10	Theory of change of support to CD	8.1 and 10.2
EQ11	Focus area 1	4
EQ12	Focus area 4	7.1.1
EQ13	CD results	3.4
EQ14	<i>Not responded to, see explanation in the text</i>	
EQ15	Recommendations	11.2

1.4 EVALUATION METHODOLOGY

1.4.1 Selection of the sample of interventions

Following the methodological approach proposed in the terms of reference, the evaluation was conducted in three steps, namely: (i) a portfolio screening; (ii) a desk-based review; and (iii) country studies in three countries. The initial sample of interventions was selected by Sida during the formulation phase based on the following criteria: (i) CD is an explicit intention, whether alone or as part of broader objectives; (ii) the type and size of the interventions and their geographic and thematic spread should be representative of the Sida CD portfolio; (iii) interventions initiated at least and not completed more than three years ago; and (iv) sufficient written documentation is available. The criteria were used to screen interventions

identified by different units at the Sida headquarters and embassies of Sweden following a request by the Sida Unit for Planning, Monitoring and Evaluation. The initial sample was scrutinised internally by the Sida reference group before approval.

1.4.2 The portfolio screening

The portfolio screening was done on a sample of 29 interventions from a wide range of sectors. It served the following purposes:

- to inform the choice of cases for the desk-based review and the country studies, and support the refinement of the methodological approach for these steps;
- to produce a typology of CD-focused interventions;
- to allow comparison and subsequent analysis across the evaluations by the three Scandinavian countries, possibly including the sharing of data with other researchers for further statistical analysis beyond these evaluations; and
- to identify interventions for further study in the desk-based review.

Due to time constraints, the portfolio screening was based on only one document from each intervention, namely the project document. In cases where this was not available, the Sida assessment memorandum was used.⁷ The data were entered into a spreadsheet-based scorecard developed jointly by Sida, Norad and Danida, designed to gather basic information about the context and the interventions, variables related to the four hypothesis components, and data on effectiveness. A separate scorecard was filled for each intervention, and a short comparative assessment was produced across the 29 interventions to inform the design of the desk-based review. A Portfolio Screening Note produced in October 2014 summarised the results of this step.

1.4.3 The desk-based review

The desk-based review covering 13 programmes was conducted with the aim of providing additional substantiation by validating, adjusting and deepening the results of the portfolio screening. A different

⁷ The project document typically describes the main features of the intervention. The Sida assessment memo summarises the appraisal conducted by Sida of intervention proposals, often containing substantial detail about the intervention itself.

set of variables were developed, covering the planning, design, implementation and review of the interventions, as well as the four hypothesis components. It also sought to compile information relative to the achievement of results, as well as to unanticipated positive and negative effects. The review involved an assessment of the evaluability of each intervention, a parameter that informed the selection of interventions to be considered for the subsequent country-study phase.

The documentation base for the desk-based review was extended relative to the portfolio screening to include documents such as work plans, periodic technical and financial reports, Sida management documents and evaluation reports. Scheduling constraints did not allow for interviews with selected project staff to be conducted, something that had initially been considered.

Based on (i) the perceived evaluability of interventions; (ii) the availability of documents; (iii) the diversity in terms of type and duration of Swedish support; (iv) geographical spread; and (v) diversity in the socio-political context, a shortlist of six countries was made, from which Sida then selected Bosnia and Herzegovina (BiH), Cambodia and Kenya for the detailed country studies. The results of the desk-based review were presented in the Desk-based Review Note in December 2014.

1.4.4 The country studies

The country studies covered eight interventions in total: three each in BiH and Kenya and two in Cambodia. Six of the interventions had been assessed in the previous steps of the evaluation, while the Kenya Water Sector Reform Programme and the Cambodia Programme for Development of Quality Assurance were added after a recommendation from the embassy of Sweden in these two countries, following the same criteria used for the selection of the initial sample.⁸ For economy of space in this report these eight interventions have been abbreviated as indicated in Table 2. Key elements of each intervention are given in Table 3, and a brief narrative introduction to each of the eight interventions is provided in Annex 5.

⁸ These two interventions had not been included in the initial sample provided by the two embassies. They were later selected when the need for one additional intervention in both Cambodia and Kenya was identified.

The country studies were conducted by teams of two to three senior evaluators, the team leader being part of the core team for the evaluation and one senior evaluator being a national of the study country. In BiH and Kenya the teams included two national assistants. The country studies took place between January and March 2015 and included two to three weeks of data collection and one week of analysis and debriefing.

Table 2. The eight interventions included in the country studies, and their respective abbreviations

Abbreviation	Name of the intervention
SWM-BiH	Municipal Programme on Solid Waste Management in Bosnia and Herzegovina
PiS-BiH	Partnership in Statistics in Bosnia and Herzegovina, Phase III
MTS-BiH	Municipal Training System Project, Phase II (Bosnia and Herzegovina)
NALEP-Kenya	National Agriculture and Livestock Extension Programme (Kenya)
KWSP-Kenya	Kenya Water and Sanitation Programme
PRK-Kenya	Swedish Support to Police Reforms in Kenya
CDPF-Cambodia	Education Capacity Development Partnership Fund (Cambodia)
QA-Cambodia	Programme for Development of Quality Assurance (Cambodia)

The generic approach for data collection in the country studies involved interviews with key informants for each of the selected interventions, namely at the embassies of Sweden, other donors, ministries and other central, provincial or local government organs, technical assistance providers contracted by Sida, and other key stakeholders of the interventions, including where possible and relevant, end-users of the services or products delivered by the target organisations. Key informants were selected with the assistance of the Sweden embassies, in particular the project officers for the selected interventions, partner organisations, the technical assistance providers and individual contacts of the evaluation team members. This approach enabled the assessment of the capacities, effects and relevance of interventions at different levels.

Table 3. Key features of the eight country-study interventions
 (a: latest phase only; b: percentage of the Swedish contribution)

	SWM-BiH	PiS-BiH	MTS-BiH
Period	2010–2015	2007–2010 (Phase I) 2010–2011 (Phase II) 2012–2015 (Phase III)	2008–2011 (Phase I) 2012–2015 (Phase II)
Swedish Contribution (1,000 SEK)^a	100,000	15,700	16,800
Budget % for CD^b	25–50%	>75%	>75%
Cooperation partner(s)	BiH Ministry of Foreign Trade and Economic Relations; FBiH Ministry of Environment and Tourism; RS Ministry of Physical Planning, Construction and Ecology; Associations of Municipalities in FBiH and RS; 44 municipalities and respective inter-municipal organs	Agency for Statistics of Bosnia and Herzegovina (BHAS); Federal Institute for Statistics (FIS); Republika Srpska Institute for Statistics (RSIS)	BiH Ministry of Justice; FBiH Civil Service Agency; FBiH Ministry of Justice; RS Ministry of Administration and Local Self-Government; RS Civil Service Agency; FBiH and RS Associations of Municipalities and Cities
Implementer(s)	Grontmij A/S	Statistics Sweden (Statistiska Centralbyrån, SCB)	United Nations Development Programme (UNDP)
Main objective(s)	To develop and strengthen solid waste management systems at municipal and regional level, to improve environmental conditions and fulfil requirements for EU accession.	To strengthen statistics production in BiH, for greater harmonisation between the statistics institutes and alignment with Eurostat norms.	To improve local government administration by means of a national integrated staff training system.

NALEP-Kenya	KWSP-Kenya	PRK-Kenya	CDPF-Cambodia	QA-Cambodia
2000–2006 (Phase I)	2005–2009 (Phase I)	2010–2014	2011–2014 (Phase I)	2013–2016
2007–2011 (Phase II)	2011–2013 (Phase II)		2015–2018 (Phase II)	
327,000	242,000	17,000	89,000	13,100
25–50%	25–50%	>75%	>75%	>75%
Ministry of Agriculture; Ministry of Livestock Development	Ministry of Water and Irrigation	Kenya Police Reforms Implementation Committee (PRIC); Kenya National Police Service (from 2013)	Ministry of Education, Youth and Sports	Ministry of Education, Youth and Sports
Rambøll Natura AB	Orgut Consulting AB	Swedish National Police Board (Rikspolisstyrelsen); PRIC	United Nations Children Fund (UNICEF)	Swedish School Inspectorate (Skolinspektionen)
To increase the contribution of agriculture and livestock to socio-economic development and poverty reduction.	To develop sustainable, safe and affordable water supply and sanitation facilities managed by communities, with special focus on poor people, women and disadvantaged groups.	To support the implementation of a set of reforms of the Kenyan police sector, including the piloting of community policing forces.	To support the implementation of strategies for capacity development in the education sector, in view of achieving national and international goals for the sector.	To enhance the capacity of the education sector to deliver quality education throughout the country, by means of a national system for quality assurance at various levels.

Based on analysis of the CD support hypothesis, the focus areas and the EQs, an evaluation framework and method were developed for use in the country studies. The method was presented in the Inception Report in January 2015. The evaluation framework was subsequently used to determine the method for data collection, including the type of respondents for each intervention and templates with questions for the interviews.

Common templates for semi-structured and semi-open interviews were used for the consultations with key informants, whereas a simple participatory impact assessment method was used to gather end-users' views on the impact of interventions.⁹ The data were validated by means of triangulation, involving the comparative assessment and aggregation of the information compiled through the different methods and from different sources.

In the specific cases of BiH and Cambodia, semi-open interviews proved of limited use, as interviewees showed confusion and discomfort in speaking freely about broadly defined topics. Instead they preferred to answer specific questions posed to them directly. Hence the team used the semi-structured questionnaire that was translated into the local language and adopted to the type of involvement that each interviewee had in each intervention. With very few exceptions, all consultations were done face to face; where this was not possible, telephone or e-mail interviews were conducted. Wherever necessary, interviews were conducted in the local languages, which in several cases required interpretation by one of the local team members. Interview transcripts were prepared and used to analyse and summarise results for each intervention using a common template (see 1.4.5). The list of persons interviewed is included in Annex 4.

A participatory impact assessment was conducted only in the case of KWSP-Kenya. For all other interventions no such assessments

⁹ Semi-open interviews used a matrix with discussion topics and assessment criteria and, without posing specific questions, asked interviewees to freely discuss those. Semi-structured interviews employ a question-answer model of interaction with the interviewee, based on a set of pre-determined questions, but allowing for diversions around the themes of the questionnaire to occur. The participatory impact assessment approach involves groups of service recipients – for example, groups of women, men, youth – who give details in writing with regard to their respective experiences with a given service. The method employs a simple template to record and share the groups' perceptions.

were conducted because it was impossible to gather a sufficient number of end-users.

Briefing workshops with selected key informants were held in Nairobi, Sarajevo and Phnom Penh to present and discuss findings. Country Working Papers summarising the findings of each country evaluation were circulated to embassy staff for review. The feedback from the embassies and participants at the briefing workshops was considered in the final version of the Working Papers.

1.4.5 Data analysis

In the portfolio screening and desk-based review content analysis was used to extract data from the selected documents using the variables in the two scorecards as coding categories. Because different people performed the analysis, a simplified inter-coder reliability test was performed to verify the degree of accuracy between the different coders. Instructions were produced about the scoring procedure, which were used by the evaluation teams of Sida, Norad and Danida. Numerical scores were used to generate average and dispersion values for the respective variables to characterise the sample of Sida-supported CD interventions. The qualitative data were subject to a process of manual data reduction and categorisation to enable the identification of patterns and themes within the data.

A similar process was used in the analysis of the data gathered in the country studies. Data from interviews were transcribed and subsequently reduced and categorised, which in the case of the semi-open interviews also served to produce counts of types of answer in each topic. To enable comparison across interventions and countries, a common template was created to summarise findings relative to each of the EQs and the four hypothesis components. For each of these, a scoring system was elaborated using as variables the factors underlying each of the four hypothesis components (see Section 1.2), using a numerical score ranging from 1 (minimum) to 5 (maximum). These scores and the accompanying justifications for the eight country-study interventions are presented in Annex 6. A brief explanation of each score is also included in Chapters 4 to 7, where findings for each of the focus areas are presented. Finally, a comparative assessment of the data in this template was performed to enable the preparation of the findings and conclusions that make up this report.

1.4.6 Validity of the results and conclusions

The methods for sampling, data collection and data analysis used in this evaluation entail a number of limitations for the internal and external validity of the results presented in this report.¹⁰ The number and quality of data sources constituted a threat to internal validity in all three steps of the evaluation, especially in the portfolio screening and desk-based review, where analyses relied exclusively on documentary sources. The portfolio screening in particular only used intervention design documents, enabling a very limited characterisation of the interventions. This limitation was reduced in the desk-based review, but the exclusive reliance on written documents implied that undocumented data could not be included in the analysis. The small number of documents reviewed reduced the possibilities for verification. The results from these two steps were, therefore, considered indicative of patterns and trends and subject to further verification in the country studies.

The country studies included a larger number and variety of data sources, which enabled a generally adequate verification of the data. It must, however, be acknowledged that the scope of the evaluation and the time and resources available for these studies vis-à-vis the complexity of the selected interventions did not enable a thorough evaluation of all of their components. In particular regarding the overall effectiveness and efficiency of these interventions, the evaluation has had to rely on previous investigations and the respective documentation. In several cases where interventions had not been completed, effectiveness and efficiency assessments had not yet been conducted, and the findings reported herein must be regarded as preliminary.

The methods used for the analysis of qualitative data entail a degree of subjective judgement that cannot be entirely excluded. To reduce this subjectivity, the evaluation team critically scrutinised all findings and conclusions and subjected them to verification by individuals external to the team. On the whole, the degree of subjectivity of findings reported herein is considered low, and hence internal validity is not believed to be significantly affected by it.

¹⁰ 'Internal validity' is the degree to which findings and conclusions (in particular concerning causal relationships) are warranted – i.e. correspond to the truth. 'External validity' is the degree to which findings and conclusions from a sample are generally valid – i.e. applicable to an entire population.

The scores presented in Annex 6 and reported in Chapters 0 to 7 rely on subjective judgements that might affect the validity of the analysis. There are elements of subjectivity in the setting of the benchmarks (maximum and minimum values) and in the placement of the perceived degree of achievement in relation to those benchmarks. The scores have been scrutinised by the members of the evaluation team to reduce the risk of subjectivity and enable a consistent scoring across the eight country-study interventions. In this report, they are used primarily for comparative and illustrative purposes – a simplified representation of rather complex phenomena.¹¹

One final limitation affecting internal validity is the relatively limited attention given to contextual factors external to the intervention, Sida and the partner organisations. The evaluation team acknowledges that phenomena such as corruption, power struggles, political interference or social pressure sometimes dictate the fate of donor-supported interventions. The CD support hypothesis offers some entry points into the examination of the influence of these phenomena on CD results.¹² However, within the time and resources available, it was not possible to perform a thorough assessment of such contextual factors and their influence on the interventions studied. Where these have been mentioned in the reviewed literature or by interviewees, they have been included in this evaluation. But a more robust examination would have required a different scope and approach to the evaluation, which have not been possible to adopt.¹³ The internal validity of the findings might, therefore, be compromised by excluding such contextual factors from the explanation of CD results.

¹¹ Any eventual use of these scores in numerical analyses must take account of the fact that, in their current definition, the factors are ordinal rather than interval variables and are mutually dependent in several dimensions (collinearity). In the calculation of average scores, all factors have been weighted equally.

¹² For example, champions may be employed to help interventions deal with political interference, and incentives may be significantly affected by corruption.

¹³ The investigation of sensitive issues such as corruption or political interference – seldom documented or acknowledged by the people involved – would require an entirely different set of sources and research tools. It would most likely also compromise the legitimacy of the evaluation team to conduct the rest of the evaluation.

The external validity of findings and conclusions might be affected by the reduced size of the sample used in this evaluation. The relatively stringent sampling criteria used initially resulted in a small sample relative to Sida's complete portfolio of CD-relevant interventions. Moreover, the fact that the sample was not exhaustive but based on voluntary submission by selected Sida staff further compromises external validity. To enhance external validity, the relevance of the findings and conclusions of this study for the broader Sida portfolio have been discussed with Sida prior to the finalisation of this report. Moreover, the comparison with the results of the parallel Danida and Norad evaluations enable conclusions from this study to be seen in the broader perspective of Scandinavian support to CD. Mindful of these limitations, generalisations for which there is insufficient support have been avoided in this report, which focuses instead on issues that, based on the present sample, can be verified more broadly. As a result, the evaluation team is of the view that the findings about the nature and the results of Sida support to CD, as well as the conclusions about the validity of the CD support hypothesis are likely to apply more broadly across the work of Sida, and not only to the sample studied.

1.5 REPORT STRUCTURE

The structure of this report follows the logic of the testing of the CD support hypothesis described in Section 1.2, comprising:

- the description of CD results (Chapter 3);
- the characterisation of the Sida support in terms of the factors of each hypothesis component or focus area (Chapters 4 to 7);
- the analysis of the validity of the hypothesis (Chapter 8);
- the analysis of factors not included in the hypothesis but which were found to be relevant for CD results (Chapter 9); and
- the main conclusions and the identification of good practice in donor support to CD (Chapter 10);

The report closes with a chapter with recommendations on how Sida could move ahead to address some of the conclusions presented herein. After this introductory chapter, the report also includes an overview of how CD has been approached in Swedish development cooperation (Chapter 2).

2 Historical Background

2.1 INTRODUCTION

Since the beginning of the 1960s Swedish development cooperation has adopted different approaches to CD. Principles and goals related to learning and knowledge development have always characterised Swedish aid and been present in the work of Sida, but the importance awarded to them has changed over time. The concept of CD has evolved, as have the frameworks for implementing and monitoring it. Like the development of all types of ideas and activities, CD concepts at Sida have been developed through processes that have at times been distressing and where different concepts and models have overlapped. Although a general trend of CD thinking and approaches can be observed, there have been variations related to the sector and modality of support.

As described by Ingemar Gustafsson (2005),¹⁴ two models for change have coexisted since the beginning of Swedish aid, resulting in two different approaches to CD. The dominant model in the early days of Swedish (as well as other countries') development cooperation emphasised that change would take place through innovative, externally driven projects. The external actor's role was to support these projects and make them work. The other model for CD, which has become more prominent with the 2005 Paris Agenda, focuses on improving existing structures, organisations and institutions in search of change from within. Despite the generic acceptance of these broader models of CD, they have not always been the dominant factor shaping CD practices with all donors at all times. As one would expect, practices have been influenced by the evolution of the broader thinking on development cooperation, which itself has gone through several paradigm shifts. In particular, the focus on ownership – i.e. the balance of power over the development cooperation process – has moved as a wave through the history of development cooperation and influenced views and practices of CD.

¹⁴ Gustafsson, I., 2005. Capacity Development and the Role of External Actors. In: *Dedicated to Education for All – the Lifework of Ingemar Gustafsson*. Stockholm: Institute of International Education (IIE); 2013.

2.2 HISTORICAL PERSPECTIVE

During the 1960s and early 1970s the ruling concept was that of ‘knowledge transfer’,¹⁵ which was based on the premise that developing countries lacked a specific knowledge or skill that could be transferred from developed countries. The focus was on the knowledge and skills of individuals, and less on the systems or structures of organisations. The support was mainly provided by Swedish experts, normally recruited by Sida, called ‘Agency TAP’ (Technical Assistance Personnel). The support normally covered international training of key individuals (counterparts) from the cooperation countries, followed by extensive in-country – typically on-the-job – training by expatriates. These were often subject matter experts who were also responsible for performing the actual technical assistance work. During this period, Swedish development cooperation ran schools and hospitals and financed key expatriates placed in ministries and other public institutions in developing countries.

The idea of ownership shifted during the era of knowledge transfer. The donor-controlled support in the 1960s was replaced by so-called ‘country programming’, which emphasised the responsibility of the recipient country.¹⁶

Evidence of results of development cooperation started to show that the knowledge transfer model did not produce the expected CD results. In the 1970s and early 1980s the focus shifted to so-called ‘knowledge development’, recognising that the knowledge and skills of foreign experts and the experience of the developed countries needed to be adapted to the conditions of the aid-receiving countries to enable recipient-led development. The support of knowledge development continued to focus on education and training of selected individuals, and on-the-job skills development. With time it was realised that the results were not as expected, mainly because the trained staff members were either not returned to the position which should benefit from their knowledge or not backed by the top management, who did not understand the new approach.

¹⁵ In Swedish, *kunskapsöverföring*.

¹⁶ Country programming (in Swedish, *landprogrammering*) meant to analyse a specific sector in a country to define the financial and knowledge gap that needed to be filled through development cooperation efforts to reach a certain development level.

As a consequence of the perceived shortcomings of the previous individual-based models, the concept of ‘institution-building’ came into force in the 1980s.¹⁷ The basic premise was that systems and context needed to be addressed as a framework for knowledge creation, in addition to developing the knowledge and skills of the individual. This is a broader concept and more in line with the current idea of CD. Simultaneously, acknowledging the importance of the State in development, support to public-sector management became one of Sida’s priorities.¹⁸ Twinning was adopted as one of the approaches to effective collaboration, and several Swedish government agencies then initiated partnerships with counterparts in developing countries that continue to this day. This was also at a time when the public sector in many of Sweden’s partner countries – notably in Africa – started to show severe weaknesses in terms of efficiency and transparency. Sweden and the donor community in general responded by returning to a more donor-driven cooperation model.

A joint Nordic Evaluation of Technical Assistance Personnel – technical assistance understood as “sending international experts to support implementation of activities in developing countries” – was conducted in 1988.¹⁹ The strategy based on transferring expertise to counterparts was criticised for its lack of results and sustainability, and it was concluded that the CD approach of the time had not led to the expected improvements. The response by the Nordic donors was to look for a more flexible approach to support, in which consultants external to the donor agencies were given a prominent role. The previous Agency TAP was replaced by Consultant TAP, combining short- and long-term experts in a model which was regarded as more flexible and adaptable to the heterogeneous needs of different aid-receiving countries.

Towards the end of the millennium, a more generalised criticism started to be directed at the role and use of technical assistance in development cooperation. According to Gustafsson (2005), the second half of the 1990s was a period of review and rethinking of development cooperation. External factors such as declining support

¹⁷ In Swedish, *institutionsbyggande*.

¹⁸ In Swedish, *förvaltningsstöd*.

¹⁹ Forss, K., Carlsen, J., Frøjlund, E., Sitari, T. and Vilby, K. *Evaluation of the effectiveness of technical assistance personnel financed by the Nordic Countries*. Danida, Finnida, MCD/Norad and Sida; 1988.

from tax payers to development assistance and a series of critical United Nations conferences resulted in coordinated efforts such as the Millennium Development Goals in 2000. The modalities of cooperation came into focus in the beginning of 2000, culminating in the 2005 Paris Declaration on Aid Effectiveness adopting the principles of ownership, harmonisation, alignment, results orientation and mutual accountability. The Paris Declaration meant that the control over the planning and implementation of development processes in aid-receiving countries would shift from donor-driven projects to nationally owned strategies for poverty reduction. This implied that the capacity of the public sector in developing countries became the critical factor for development, regarded as it was as the anchor for all development efforts.

In this period Sida developed a Policy for Capacity Development as a Strategic Question in Development Cooperation,²⁰ which was the result of a review of priorities and modalities for CD as they had evolved within Sida up to that date. With this came a decision to “systematically integrate capacity development as an objective in projects and programmes” (p.10).

CD became a central part of the new modalities. It was given a broader dimension, and Sida eventually adopted the OECD-DAC definition of CD, which came to replace its own. The Policy was followed by the Sida Manual for Capacity Development in 2005.²¹ Efforts were made to enhance the capacity of Sida’s own staff, which enabled a more uniform and cohesive approach to CD across sectors, countries and staff levels. The work was developed by Sida’s Department for Policy and Methodology, which appears to have played a crucial role in these efforts. However, as always in organisational development, there were challenges to operationalising the new aid modality and the enhanced CD focus across the whole organisation. Moreover, the Millennium Development Goals and the Paris Declaration provided two different entry points to CD, which was reflected in the Swedish Policy for Global Development.

In 2009 the Swedish National Audit Office (Riksrevisionen, RiR) published its audit of Sida’s support to CD in the public

²⁰ Sida. *Sida’s Policy for Capacity Development as a Strategic Question in Development Cooperation*. Methods Development Unit. Stockholm: Sida; 2000.

²¹ Schulz, K. w/ Gustafsson, I. and Illes, E. *Manual for Capacity Development*. Department for Policy and Methodology. Stockholm: Sida; 2005.

administration of partner countries.²² The findings were that: (i) Sida rarely assessed existing capacity; (ii) the contributions often lacked clear and realistic goals; (iii) Sida's strategy for making a transition to an increased sector programme with sufficient partner capacity was unclear; (iv) internal learning (i.e. at Sida) was at risk because of weaknesses in the evaluation process; (v) Sida had weak control signals in CD issues; and (vi) there was a conflict of objectives between the Paris Declaration and the use of Swedish government agencies. With respect to this latter issue, despite acknowledging the many cases of successful cooperation with public agencies, RiR observed that systematic assessment of the best available implementation partner was not conducted in cases where public agencies were involved. This was contrary to the principle of untied aid and a potential risk for implementation efficiency.

Several changes were introduced in the Swedish cooperation after 2007, such as greater focus on results and the control of development support, engagement with new actors in development, a decrease in the number of cooperation countries and less focus on the previous aid modalities of general and sector budget support.

Between 2008 and 2011 Sida went through two major reorganisations involving *inter alia* important reductions in the number of staff. Of particular importance was the transfer of the responsibility for policy development in Swedish aid from Sida to the Ministry of Foreign Affairs. Sida's own policy work was reduced to the internal administration of development cooperation. These changes affected CD, the institutional focal point for CD having been discontinued in the reorganisation. Specific institutional approaches in this domain have been scarce since, and CD is covered mainly at project/programme level. Some areas of Sida's activity appear, on the other hand, to emphasise CD more – for example, support to civil society, international training programmes, research cooperation and the Sida Partnership Forum in Härnösand.

The latest Sida publication on CD was the Sida Guidance to Capacity Development issued in 2011,²³ which replaces the 2000 Policy for Capacity Development and describes CD in development

²² Riksrevisionen. *Sidas stöd till utveckling av kapacitet i mottagarländernas statsförvaltning*. RiR 2009:15. Stockholm: Riksrevisionen; 2009.

²³ Salomonsson, C., Reuterswärd, H, Frankenberg, A. and Nidesjö, M. *Guidance on Capacity Development. How to assess, support and monitor capacity development among partners in Swedish development cooperation*. Stockholm: Sida; 2011.

cooperation as having the aims of systematically: (i) identifying the needs for CD, and what role external support could play in addressing these; (ii) promoting the use of country and organisation systems in implementation, and identifying the risks associated with the Swedish contribution; and (iii) enhancing the sustainability of the development contribution. The Guidance adopts a more hands-on, process-oriented approach to working with CD in Sida-supported interventions. It covers separately the assessment of capacities at cooperation partner institutions, the design of CD support interventions, and the monitoring and evaluation (M&E) of CD achievements.

With respect to capacity assessment, the Guidance states that this should ideally be conducted by the partner organisation(s) – Sida and external actors only being involved “if needed” and “as a last resort” and without jeopardising partner ownership. Sida should, nonetheless, conduct its own appraisal of the assessment process. Interestingly, the main purpose of this assessment is “to ensure a successful implementation of the [Swedish] contribution”, rather than the capacity gaps of the partner organisation that prevent it from delivering the services and products that it is supposed to. The Guidance is vaguer with respect to the CD design and M&E elements. It merely points at alternative generic principles – for example, with respect to design, applying a programme-based approach, having a results-oriented framework and building on existing capacity – and refrains from defining a set of specific criteria and *modi operandi* for CD that could apply more generally across Sida.

CD as a goal or process is part of several thematic, bilateral and multilateral cooperation strategies. Examples of the former include Sida’s strategies for the environment and climate, and the Swedish government’s results strategy for human rights and democracy. As examples of CD in bilateral and multilateral strategies, it is explicitly included as an approach in the bilateral cooperation strategy with Cambodia; and as both approach and goal in several of the domains of cooperation in the recent results strategy for Sweden’s reform cooperation with Eastern Europe, the Western Balkans and Turkey. It is in this context that CD has been studied in this evaluation, which focused on thematic support established under bilateral agreements between Sweden and its cooperation partners. In these,

CD remains as an important goal in itself, and one that is regarded as necessary for the attainment of other goals.

Looking more broadly at the objectives and the hierarchy of the Swedish development cooperation policy framework,²⁴ institutional development appears as one of its cornerstones. Although institutional development is not directly included as a sub-objective, it is mentioned as an important result implicitly or explicitly in several of the explanatory texts, such as those for sub-objectives 1 (strengthened democracy and gender equality) and 3 (a better environment).²⁵ The detailed analysis of the sub-objectives also shows that institutional capacity must be strengthened for the achievement of the objectives of Swedish aid. For example sub-objective 2 (better opportunities for people living in poverty to contribute to and benefit from economic growth and obtain a good education) speaks of access to education for which institutional capacity is necessary; and sub-objective 4 (improved basic health) discusses access to basic health and water and sanitation systems, which hinge on the development of stronger sector institutions. What is more, the explicit endorsement of the principles of aid effectiveness implies that the development of institutional capacity must be a key issue for Swedish development cooperation. On the whole, the Swedish aid policy framework adopts a broad definition of institutional CD and regards CD as both a means and an end of Swedish development cooperation.

The Swedish government has recently announced a revision of the aid policy framework. It is very unlikely, however, that this revision will entail any major change to the importance of institutional capacity for Swedish aid, given the prominence of this topic in Swedish international development cooperation.

Finally, although not directly relevant to this evaluation, mention should be made of the Swedish government's Results Strategy for Capacity Development and Collaboration. This applies to programmes of a global nature and aims at strengthening the capacity of organisations and institutions for a more effective fight against poverty. The strategy for the period 2014–2017 emphasises the work with the Sida International Training Programmes; the programmes

²⁴ Government Offices of Sweden. *Aid policy framework – the direction of Swedish aid*. Government Communication 2013/14:131. Stockholm: Government Offices of Sweden; 2013.

²⁵ See Sections 5.1.2/5.1.3 and 5.3.2, respectively.

for placing Swedish experts in international organisations; the activities of the Sida Partnership Forum; and the development of new aid modalities and knowledge about aid implementation, results and effectiveness through strategic evaluations. It is expected that this evaluation will contribute to this last domain.

2.3 WORKING WITH CAPACITY DEVELOPMENT IN PRACTICE

The translation into practice of Sida concepts and principles related to CD results from the application of specific rules and instructions for the management of interventions. This section briefly reviews how these rules and instructions frame the practical approach to CD.

The minimum mandatory requirements for Sida staff to manage Sida interventions are contained in the so-called Rule for Managing Contributions.²⁶ The overarching aim of the Rule is to “ensure the quality and efficiency of the management of contributions” by means of “coherent and results-based management that ensures the information needs for monitoring, evaluation and dialogue”. The Rule is the basis on which Sida programme officers conduct assessments during the different stages of any contribution, duly complemented by other instructions whenever applicable.

The Rule contains no explicit requirement relative to CD but covers predominantly procedural aspects of contribution management, and issues of capacity are mentioned only in terms of Sida programme officers assessing the capacity of partners for internal control (article 2.3). In this regard there are no explicit instructions in the Rule about how such capacity assessment ought to be conducted, what it should include or how insufficient capacity of partners should be rectified.

The perspective on the partners’ capacity expressed in article 2.3 is narrower than that of the OECD-DAC. In this article the capacity expected from cooperation partners is that for delivering “agreed outputs in an efficient and effective manner”. This places the focus on the capacity to deliver within the Sida intervention and not

²⁶ The version reviewed for this evaluation is the one dated 16 February 2015. The Rule is subject to regular updating, which means that the interventions included in this evaluation were probably required to follow a slightly different set of instructions.

against broader institutional development goals that may go beyond those of the particular intervention.

The OECD-DAC definition seems to be implied in other articles of the Rule, namely articles 2.6 (risks identified in relation to sustainability and ownership) and 2.4 (sustainability and ownership). Here it is stated that “the intervention shall, if applicable, have the prerequisite to achieve long-term sustainability of the expected outcomes.” Long-term sustainability of outcomes implies developing the capacity of institutions so that they can do what they are supposed to without support from donors.

More detailed guidance is provided in the manuals for contribution management, the latest of which is geared towards the work with the IT application Tool for Results Management and Appraisal of Contributions (TRAC) – hence their designation as TRAC ‘help texts’.²⁷ With respect to assessing partner organisations’ capacity during the pre-appraisal stage, officers are instructed to: (i) compile information from previous capacity assessments during the process of choosing cooperation partners; and (ii) if needed, request additional support to assess the partners’ capacity for RBM, financial and procurement management and dealing with corruption.

The stage of appraising and agreeing on contribution requires an assessment of the partners’ organisational capacity, the key purpose of which is to “establish whether the conditions for a successful implementation are in place”. As required by the Rule, focus is on the internal control capacity of partners, understood as the combined processes for ensuring the achievement of objectives and efficiency of operations, reliability of financial reporting and compliance with legal obligations. Programme officers are explicitly instructed to consider the different types of organisational functions and structures that affect capacity in each of the domains mentioned, and to verify whether there are plans at the partner organisation to respond to any weaknesses. If this is not the case, they should determine whether CD measures should be put in place to help overcome such weaknesses.

²⁷ These ‘help texts’ contain detailed instructions on how to interpret and approach each of the contribution management steps and are meant to support Sida staff in using the TRAC application. It follows from and builds on earlier publications such as the 2012 Sida at Work manual. (Sida. *Sida at Work. Manual for Sida’s Contribution Management Process*. Stockholm: Sida; 2012.)

The instructions in the help texts relative to this assessment are exhaustive and detailed and if followed in their entirety enable the elaboration of well-grounded and comprehensive analyses of cooperation partners' capacities. It must be observed, however, that the help texts concern first and foremost the assessment functions that Sida and embassy staff have to carry out, and do not address the issue of how CD should be designed or implemented.²⁸ This is understood to be the role of the partners responsible for proposing the contribution and is, therefore, not covered by the Sida internal rules and instructions.

²⁸ This matter was taken up recently at the Swedish Public Agencies Forum (*Myndighetsforum*), where the need for Sida to become more involved in the initial design phase of interventions was discussed.

3 Capacity Development Results

This section summarises the findings relative to the overall effectiveness, the degree and type of achievements in terms of CD, the existence of unintended effects, the efficiency and the effects on people living in poverty of the interventions included in the country studies. Due to important gaps in documentation, notably the absence of evaluation or periodic progress reports, the results of the desk-based review have not been used in this summary.

3.1 EFFECTIVENESS AND CAPACITY DEVELOPMENT RESULTS

In the three country studies, the evaluation team assessed both the overall effectiveness of the eight interventions – i.e. the degree to which the planned outcomes had been attained – and the CD results, understood as the changes in the capacity of the partner institutions. In this regard, and recalling Section 1.1.2, it is important to observe that such changes have other contributing factors than the Swedish support.

The achievements presented herein result primarily from interviews conducted with representatives of partner organisations, complemented by data from periodic and evaluation reports. As mentioned in Section 1.4.6, the scope and the resources available to this evaluation did not allow a complete assessment of the effectiveness of the interventions studied. For this reason, the evaluation has had to rely on the results of earlier evaluations or on preliminary assessments. Of the eight interventions included in the country studies, four were ongoing at the time of the in-country missions, and hence effectiveness could not yet be fully assessed. The remaining four interventions had, at the time of the studies, not yet been evaluated, hence no reports on their overall effectiveness were available.

Table 4 summarises the overall effectiveness and the degree of attainment of organisational CD results at output and outcome level for the eight country-study interventions. The level of organisational

CD results was scored on a scale ranging from 1 to 5, corresponding, respectively, to very low and very high degree of achievement (see Sections 1.2 and 1.4.5).

On the whole the interventions are regarded as having medium to high overall effectiveness. This finding must be considered preliminary though, until ongoing or future outcome assessments conducted independently of this evaluation are finalised. Such assessments are also considered by the evaluation team to be necessary for robust conclusions about the specific contribution of the Sida support to be drawn. Based primarily on the views of partners, it appears that the Sida-supported interventions have made a very important contribution to the improvements reported so far.

Table 4. Summary of the degree of effectiveness and achievement of capacity development results for the interventions included in the country studies

Intervention	Overall effectiveness	Organisational CD results
SWM-BiH	High based on the period monitoring and partners' views. Outcome assessment not yet conducted.	High (4)
PiS-BiH	Medium to high, based on mid-term review, partners' views and Statistics Sweden's own draft final report. Outcome assessment not yet conducted.	Medium to high (3.5)
MTS-BiH	High based on mid-term review and partner's views. Outcome assessment not yet conducted.	High (4)
NALEP-Kenya	High in the previous phase according to end report. Not yet assessed for phase II, but perceived as generally high by project partners.	High (4)
KWSP-Kenya	Could not be assessed due to the absence of systematic follow-up and documentation of outcomes. Perceived as variable across programme components, ranging from low to high.	High at national level (4) and low at sub-national level (2)
PRK-Kenya	Outcome assessment not yet conducted. Preliminary assessment indicates medium to high overall efficiency, variable across project components.	Medium (3)

Intervention	Overall effectiveness	Organisational CD results
CDPF-Cambodia	Could not be fully assessed due to lack of outcome indicators. Partners' views generally positive and indicate medium to high efficiency. Outcome assessment not yet conducted.	High at national level (4) and low at sub-national level (2)
QA-Cambodia	High according to views of partners. Outcome assessment not yet conducted, as intervention is ongoing.	High to very high (4.5)

Similar observations can be made with respect to the assessment of the results relative to CD in the partner organisations. The average score across all eight interventions points at a medium to high degree of achievement (see the right-hand column of Table 4). It is important to observe that one of the interventions – CDPF-Cambodia – attained high CD results at national and provincial levels but low at the lower levels. The main reason was the comparatively stronger focus on working with higher-level partners, to the detriment of efforts targeting those in the districts and local schools.

A somewhat inverted situation was observed in two of the interventions in BiH, namely the SWM-BiH and the PiS-BiH. For reasons that the evaluation team interprets as having to do primarily with the acceptance of the intervention by partners at higher levels of administration, these two interventions recorded a significantly lower degree of achievement at the national and entity levels than at the local level. However, because the activities directed at the national level only constitute a relatively minor component in both interventions, the relatively lower degree of achievement was not seen to affect the overall score significantly. Examples of the achievements of selected interventions included in the country studies are given in Box 3.

Box 3. Selected examples of capacity development achievements of country-study interventions

Score: High to very High

Quality Assurance Programme in Cambodia (QA-Cambodia)

Generally very good CD results, but their sustainability remains uncertain. Overall effectiveness has been compromised by excessively optimistic planned outcomes considering the time and funds available. The intervention has been highly effective in CD for all units of the Cambodian Ministry of Education that took part in it. The products developed within the intervention have a high degree of national ownership. The Ministry staff competence in relevant areas for school inspection has increased, systems for new school inspection have been developed and put in place, and necessary equipment has been provided. The system has already been approved by the Ministry, and steps have been undertaken to implement it.

Score: High

Municipal Programme for Solid Waste Management in BiH (SWM-BiH)

The project has had excellent results at municipal level in terms of putting in place solid waste management planning and management systems and establishing or otherwise expanding solid waste management services. Such achievements would not have taken place if the project had not been implemented. The provision of waste collection equipment has been very positive and in most cases led to a remarkable expansion of service capacity. Public awareness should have been planned and conducted differently, as it did not attain the results it aimed for, the same being true of the objectives relative to entity- and state-level partners.

Score: Medium

Swedish Support to Police Reform in Kenya (PRK-Kenya)

The degree of delivery is not easy to determine, as the outputs and performance indicators are not very specific. Moreover, there is no systematic M&E that is linked to the expected outputs and outcomes. It is clear that good progress has been made in terms of enhanced competencies of police officers, and management, equipment and infrastructure have been delivered as planned, curricula have been improved, and a Police Reform Programme 2011–2013 has been produced. The structures, systems and work environment have all suffered from substantial delays in filling key management posts, as well as the unwillingness of the two police forces to collaborate and coordinate, which has decreased overall CD results. There has, over the support period, also been a lack of determined overall political leadership for police reforms and a tendency to revert to a more authoritarian style of political leadership as regards police reforms, which has clearly affected the pace and quality of the reform process and international support for it.

Box 3. Selected examples of capacity development achievements of country-study interventions

Score: High and Low

Education Capacity Development Partnership Fund Cambodia (CDPF-Cambodia)

The score indicates high CD at national and provincial level and low CD in district offices and schools. Results with greater potential for being sustainable can be observed at national level and particularly in some departments of the Ministry of Education. CD has also taken place at province and district levels and to some minor degree in schools. The CD from CDPF-Cambodia is basically in relation to the management and administration of education services and not in relation to providing education. One important reason for lower sub-national CD results is that the CD support is mostly noticed at the national level and then decreases gradually by level – i.e. second at province level, then district and limited at school level. The processes supported can lead to a significant improvement of the Ministry's capacity if the products developed – plans and monitoring systems – are used effectively. Considering the limited time of CDPF-Cambodia and the wide scope of support, the intervention is considered to have achieved good results.

3.1.1 Type of capacity development results

The evaluation also considered the type of capacities targeted by the interventions studied. The six categories enunciated in Section 1.1.2 were used, namely: (i) systems (methods, procedures, routines); (ii) structures (authority, rights and duties, communication); (iii) individual knowledge and skills; (iv) equipment and infrastructure (hard- and software); (v) work environment (physical and social environment); and (vi) factors external to the target organisation. An overview is given in Table 5, which shows that most programmes had achieved results in four different aspects of CD. The capacity dimensions that have been targeted by all interventions are those of systems and knowledge and skills, followed by those of structures and infrastructure and equipment, both targeted by seven interventions. Only two interventions had objectives and activities related to work environment, whereas half addressed factors external to the target organisations. Examples of the latter include engaging with the public through awareness campaigns and seeking partnerships with other interventions and organisations (including other donors) to support change processes.

Table 5. Overview of the capacity dimensions targeted by the country-study interventions (Y-Yes; N-No)

Capacity dimension	SWM-BiH	PiS-BiH	MTS-BiH	NALEP-Kenya	KWSP-Kenya	PRK-Kenya	CDPF-Cambodia	QA-Cambodia	Sum
Systems	Y	Y	Y	Y	Y	Y	Y	Y	8
Structures	Y	N	Y	Y	Y	Y	Y	Y	7
Knowledge and skills	Y	Y	Y	Y	Y	Y	Y	Y	8
Infrastructure, equipment	Y	Y	Y	Y	Y	Y	Y	N	7
Work environment	Y	N	Y	N	N	N	N	N	2
External factors	Y	N	Y	N	N	N.	Y	Y	4
Sum	6	3	6	4	4	4	5	4	

3.2 UNINTENDED EFFECTS

A generic observation from the interventions studied is that very little effort is put into identifying and analysing their unintended effects. The majority of sources did not refer explicitly to unintended effects, focusing rather on those elements that interventions intentionally dealt with.

The evaluation team did not find evidence of any particular type of unintended effects – positive or negative – that may be ascribed to a generic Sida approach to CD support. In other words, the types and magnitude of the unintended effects detected were specific to each intervention and cannot be attributed to Sida’s generic *modus operandi*.

In two interventions, namely the PiS-BiH and the KWSP-Kenya, no unintended effects were observed. Among the remaining six, positive unintended effects were observed in the form of: (i) generalised increases in awareness of individuals involved in the intervention about a given issue or the means of dealing with it; (ii) greater willingness to collaborate with other individuals or organisations dealing with the same or related issues, in some instances resulting in novel actual collaborations; and (iii) enhanced transparency of processes due, for example, to new or improved data and communications, which in turn was seen to foster greater accountability. A particular example from the SWM-BiH intervention is given in Box 4.

Box 4. Excerpt from the December 2013 periodic monitoring report of the SWM-BiH intervention, illustrating unintended catalytic effects of the Sida support

“The strengthened capacity and responsibility at municipalities and the adopted solid waste management plans are providing opportunities for the municipalities to apply for additional funding to further improve their solid waste management systems, for example funding from entity ministries, canton ministries, municipal budgets or donor organisations. This is an important catalytic effect of the Sida programme. Many municipalities need more investment to strengthen sustainability. [...] Examples where the Sida programme has significantly contributed to additional funding, according to the municipalities interviewed, include:

- At Teočak, the Sida programme has reportedly kick-started more interest from the canton ministry, which is now financing the rehabilitation of the disposal site and also is likely to provide funds for a baling machine so that recycling can be started.
- At Čelić, the fact that there is a solid waste management plan is reportedly helping the municipality to apply for funding from the FBiH Ministry of Environment and Tourism (FMET). The Sida programme has also helped to connect the municipality with the canton ministry and FMET.
- Žepče municipality is receiving funds from FMET for transport to the regional landfill and closing the local landfill, and there is more interest from the municipal council so that funding from the municipal budget is getting approval.
- In Zavidovići, FMET is also funding closure of the regional landfill and the solid waste management plan has made it easier to obtain a loan towards a new vehicle.
- In Visoko, FMET has made a contribution to the costs of use of the regional landfill, and three small waste collection vehicles have been received from Turkey. It is understood that FMET are also interested in funding a transfer station.
- The Ministry of Physical Planning, Civil Engineering and Ecology in RS is re-organising the environmental investment fund so that revenues into the fund are from polluters. The municipalities will be able to apply to the fund.”

Wenbom M. Report of Monitoring Consultant. 16 December 2013. Monitoring of the Municipal SWM Programme in Bosnia and Herzegovina. Sarajevo: Sida, 2013; p.11–12.

The evaluation team did not detect any severe negative unintended effects of the country-study interventions. The severest effect is arguably the one detected in the SWM-BiH intervention, where the

expansion of solid waste collection services enabled by the intervention has resulted in increased costs for the municipalities. In some cases these have not been matched by an increase in revenues, leading to a deterioration of the financial situation of municipal utility companies. Another illustrative example is that of the PRK-Kenya, where police staff not included in or informed about the intervention developed an increasingly negative attitude towards the community policing activities developed by the intervention, which they regarded as excessively lenient towards criminal offenders or suspected offenders.

3.3 EFFICIENCY

None of the interventions included in the sample for this evaluation has been subject to a detailed assessment of efficiency. Therefore, it is not possible to provide thorough estimates of the value for money of the Sida support to CD, as this type of assessment was beyond the scope and resources of this evaluation. However, based on indicative efficiency assessments included in the mid-term review of three interventions and on the perceptions of individuals consulted during the country studies, all eight country-study interventions were considered to represent good value for money (Table 6).

Table 6. Overview of perceptions relative to the efficiency of the country-study interventions

Intervention	Perceptions on efficiency
SWM-BiH	The project is generally regarded by persons interviewed and the Sida monitoring consultant as having been cost-effective (good value for money). Lower spending on procured equipment and a favourable exchange rate between EUR and SEK allowed substantial savings during the first phase, which enabled the expansion by one third of the number of participating municipalities.
PiS-BiH	The mid-term review found it to be generally efficient (good value for money). There is no alternative twinning arrangement involving Swedish expertise, and non-twinning alternatives employing Swedish or other North-European experts are likely to have comparable costs. Greater cost-effectiveness could hypothetically be achieved by employing experts with comparable technical expertise but lower fee rates, but these would have to be sourced outside Sweden, and hence would require a re-design of the entire twinning approach.

Intervention	Perceptions on efficiency
MTS-BiH	The intervention is regarded by the mid-term review team and the interviewees contacted for this evaluation as representing good value for money. The mid-term review praised the Project Advisory Board for its oversight of project management and its contribution to overall efficiency.
NALEP-Kenya	The support to CD actually made the NALEP programme synonymous with agricultural extension services in Kenya. There was also a high level of accountability. NALEP was also largely demand-driven, and the overall opinion from interviews at all levels (national, counties and field level) was that activities undertaken represented good value for money.
KWSP-Kenya	The mid-term review assessed efficiency as good, in line with expectations and without significant defects. The lack of integration of the systems for delivering the technical assistance and for resource allocation into those of the partner institutions was regarded as limiting for efficiency and sustainability.
PRK-Kenya	The support has created good value for money in the support component of community policing components in which systems, structures and competencies have been improved using reasonable resources. Other components, such as management development at headquarters and the training components at the academy, have not generated sufficiently substantial results in terms of outcomes, which has been regarded as constituting less value for money.
CDPF-Cambodia	The majority of stakeholders interviewed considered CDPF to be good value for money due to use of local personnel, local training, a good mix of CD approaches and international technical assistance being used only when needed. Critical voices (few respondents) claim that too much international technical assistance has been bought at high costs, where in some cases national technical assistance could have been used instead. Moreover, training workshops are costly due to the per diem costs.
QA-Cambodia	The overall assessment by all but one interviewee is of good value for money. Costs are kept low since no long-term international technical assistance is used. Technical assistance is provided through shorter trips. Swedish twinning institutions charge lower fees than international consultants. Cambodian working groups in the ministry undertake a large part of the work. Per diems are not paid. One critical voice considered the travel costs excessive but admitted having limited insight into the programme.

The PRK-Kenya intervention is considered to have represented good value for money in the community policing component, but less so in other programme components where achievements have been less clear. The perception of a lesser degree of achievement was often seen to equate with a perception of less efficiency, even though this might not have been the case. Clearly, the lack of political stewardship for reform in this area has affected the outcome negatively. The interviewees' perception of good value for money in the MTS-BiH and PiS-BiH interventions was supported by the respective mid-term reviews. This latter intervention, however, was seen to pose particular challenges for the assessment of efficiency, as the insufficient disaggregation of the financial reporting made it impossible to assess the value for money of the intervention's different components.

The PiS-BiH is one of three country-study interventions that involve twinning arrangements between Swedish public agencies and their counterparts in the partner countries; the other two were the PRK-Kenya and the QA-Cambodia, involving, respectively, the Swedish National Police Board and the Swedish School Inspectorate. Such twinning arrangements invariably involve Swedish experts providing most, if not all, of the technical support, and the mid-term review of the PiS intervention argues that comparable qualifications to those of Statistics Sweden could eventually have been found elsewhere at lower rates. The Sida cooperation partners interviewed were, however, of the opinion that the results produced by the current partnerships – for example, the twinning arrangements in the QA-Cambodia intervention between the Swedish School Inspection and the Ministry of Education Youth and Sports (MoEYS) and between the French Institute for Education Planning and the National Institute for Education and the MoEYS's planning department – were good enough to merit the input costs. Interestingly, the French twinning experts were considered more expensive than average international consultants, whereas the opposite was true of the Swedish consultants. In this case then it was clearly the quality of the results that weighed the most in the assessment of the value for money. Cooperation partners in the PRK-Kenya and PiS-BiH interventions were of similar opinions.

Findings from the country studies also indicate that for efficiency 'the devil is in the detail', specifically that 'the devil is in the method'.

In the study of CDPF-Cambodia and QA-Cambodia, it was found that relevance affected the perception of the efficiency of a particular activity. In two of the districts visited, some of the equipment provided was not needed or inadequate. In some of the districts and schools, staff had participated in training courses that were not relevant for their work tasks. For example, a history teacher and a cultural values teacher had been offered an opportunity to attend intensive maths training. Other teachers participated in training for the elaboration of school development plans, taking the places of representatives of the school support committee. Mismatches such as these negatively affected the assessment of efficiency.

In the PiS-BiH programme, despite general satisfaction with the quality and relevance of the training provided, some interviewees at the partner institutions were of the opinion that the intervention could have been more efficient if certain individuals had received more targeted advanced training.

3.4 EFFECTS ON POVERTY

Of the interventions included in the country studies, only those in Cambodia and Kenya had objectives explicitly targeting people living in poverty. The three interventions in BiH did not target and have not been considered by the evaluation team to have any unintended effects on poverty.²⁹

The poverty effects were divided into direct and indirect effects depending on whether the intervention directly or indirectly targeted people living in poverty. Three of the eight country-study interventions report observable direct positive effects on people living in poverty. These are NALEP-Kenya, KWSP-Kenya and CDPF-Cambodia. The common denominator in their approach towards working with poverty was that poor people were direct or indirect beneficiaries, and the effects on poor people were explicitly included in the interventions' objectives and implementation strategies. NALEP-Kenya and CDPF-Cambodia appear to have been effective in their work to improve the living conditions of people

²⁹ The focus of the Swedish cooperation strategy with BiH is on EU integration. Poverty reduction is not an explicit objective of the current regional strategy, and was only mentioned as an indirect objective in the previous one, namely as a result of greater EU integration. It was not a direct or indirect objective in any of the three interventions studied.

living in poverty (see Box 5 for NALEP-Kenya). In turn, the KWSP-Kenya intervention faced difficulties in implementation in certain parts of the country, which affected the results on poverty reduction negatively. A thorough assessment of the poverty effects of the KWSP-Kenya has not been possible due to insufficient monitoring and reporting of this particular aspect of the intervention.

Box 5. Summary of the poverty reduction impacts of NALEP-Kenya as of 2009

“Approximately 1,800,000 households have been reached through Common Interest Groups (CIGs) and farmers’ field days since the start of NALEP II. As a result of the application of improved practices and technologies farmers have been able to increase their production of crops, livestock and processed agricultural produce such as mushrooms, flour from various traditional crops like cassava and sweet potatoes, and dairy products such as milk and yoghurt.

The impact has been very significant. Some members of CIGs have been able to increase their income by a factor 2 to 4 within two years, and as a result, they have moved out of poverty, and have improved the nutritional, health and educational standard of their families.”

PEM Consult. *Midterm Evaluation of NALEP II*. 26 September 2009. Nairobi: Sida and NALEP; p.3.

The CDPF-Cambodia, QA-Cambodia and MTS-BiH interventions have had potential indirect positive effects on people living in poverty (Table 7). The potential effects have not been verified in either of the cases, but several interviewees put forward the logic behind hypothetical effects on poverty. This logic holds that the organisations targeted by the interventions – municipal governments in BiH and MoEYS in Cambodia – provide services that potentially benefit people living in poverty. The expected strengthening of the capacity of these organisations makes it possible for them to improve their servicing of the specific needs of these people. While no evidence for the veracity of this logic has been found in any of the interventions, it seems plausible that if the sector, the organisation receiving the CD support and the geographical area of the intervention are used by people living in poverty, there could be indirect positive effects as a result of that support. An extended account of both potential and

actual effects on poverty of the CDPF-Cambodia intervention is given in Box 6.

Table 7. Summary of potential indirect effects on poverty of the MTS-BiH, CDPF-Cambodia and QA-Cambodia interventions

Intervention	Potential indirect effects on poverty
MTS-BiH	The intervention has not addressed issues of poverty directly, and no effects on poor people have been detected or reported. Indirectly, one may reason that improved municipal services – some of which do support poverty reduction – will be beneficial for poor people, but no evidence of this contribution has been collected within the intervention.
CDPF-Cambodia	Direct positive effects were achieved through the application of an equity lens in the distribution of resources, thus providing relatively more resources to poorer districts and specific activities for poor schools and areas. Indirect potential effects (no evidence observed) were caused by the sector, and the type of support provided – i.e. a focus on schools and certain systems making data more transparent (see Box 6 for more details).
QA-Cambodia	Although the programme does not target poor people directly, it is thought that it could have a significant indirect positive effect on them. This is because it works in a basic sector that is important for poor people, it includes the primary level as well as secondary level and will reach all geographic areas including remote poorer areas and poor urban areas. The improved results from QA-Cambodia will permit more details on results and show differences between girls and boys as well as between poorer and less poor areas. The improved information is a basis on which to develop targeted policies for poor people (which may or may not happen).

Box 6. Examples of the effects on poverty of the CDPF-Cambodia intervention

The CDPF-Cambodia support to CD at the Ministry of Education and its different levels appears to reach poor people both indirectly and directly. Indirectly, improvements in the education system on the whole benefit all potential pupils, poor and non-poor alike. It should be kept in mind though that very poor children might not attend school due to pressures to earn an income outside school and informal fees that have to be paid (e.g. uniforms, school materials).

Specific components of the intervention targeting school dropouts could have a positive impact on poor students once dropout data become available. The real effect on poor households will depend on how data affect budget allocations. Representatives of some of the schools visited said that part of their budget would be used to finance support to poor students who are likely to drop out.

Two other aspects of CDPF-Cambodia appear to be supporting an increased positive effect on poor households. One is the so-called equity lens, meaning that poor provinces receive a relatively higher allocation of funds than non-poor districts. Second, specific activities have been undertaken for poor provinces (to a lesser degree though). An additional important conclusion regarding a poverty focus can be found in the following comment from one of the interviewees: "If you want to reach the poorest and the most marginalised, the system does not work. To be ethnic-minority-friendly, you often have to develop innovative solutions and fit into the mainstream."

4 Findings on the Adequacy of Donor Support

This chapter summarises the findings relative to focus area 1, the adequacy component of the CD support hypothesis. As is the case with the chapters relative to the other three focus areas, these findings are drawn primarily from the interventions included in the country studies, and to a lesser degree on the results of the desk-based review, for the reasons explained in Section 1.4.6. The scores elaborated for the different hypothesis components and factors (see Section 1.4.5) are used to illustrate the relative degree of achievements.

Together with the responsiveness component discussed in the next chapter, the adequacy component is part of the so-called best-fit element of the CD support hypothesis. The relevance of analysing the best fit stems from the general perception that CD support is more successful if it is adapted to the specific requirements of the target organisation and the services or products it is expected to deliver. As detailed in Section 1.2.1, the adequacy component comprises the following six factors, which will be analysed in the remainder of this chapter:

- A1: Level of effort relative to the complexity of the capacities to be developed
- A2: Use of champions
- A3: Use of change agents
- A4: Timing, including scheduling of activities
- A5: Staging of the support
- A6: Clarity of CD results.

4.1 LEVEL OF EFFORT

Level of effort considers the extent to which the combined effort by donor and cooperation partners matches the complexity of the CD task. This in turn is a function of the technical and organisational complexity of the services and products to be delivered, and of characteristics of the organisation and the way in which the CD process interferes with interests and norms in society. The argument presented in the approach paper is that CD is easier the more

specific the capacities, the less the dependency of different systems and organisations, the stronger the incentives for staff at the partner organisation(s), the lesser the conflicts with the interests of powerful elites and the better the alignment with societal norms and values.

4.1.1 Degree of complexity of the capacities to be developed

Following from the above paragraph, and recalling Section 1.2.1, the degree of complexity of the capacities to be developed was assessed in terms of five sub-factors, namely: (i) the specificity of the products or services for which the capacities are necessary; (ii) the thematic, institutional and geographical distribution of the capacities; (iii) the type of incentives to performance; (iv) the interests of elites relative to the CD process; and (v) the affinity of the capacities with dominant social norms and values.

In the sample of interventions studied in this evaluation, the two complexity sub-factors seen to vary the most were the first two – specificity of products and services, and distribution of capacities. The Sida support was seen to range from interventions focusing on the development of very specific capacities, to those addressing multiple and not easily demarcated capacities. Examples of the former included the provision of individual training in specific statistical or public financial management methodologies and tools, and of the latter of an array of CD activities to put in place country-wide training systems for public servants in BiH or to develop rural extension services throughout Kenya (Figure 3). Similarly, the distribution of the capacities targeted by Sida interventions was seen to vary greatly, from interventions working with one institution on a well-defined topic, to others involving multiple partners in different sectors and spread out over an entire country. A salient example of the latter was the SWM-BiH intervention that worked directly with 44 municipalities and four regional landfills, in addition to the two entities and the state governments.

The remaining three sub-factors of complexity were seen to vary less in the interventions studied. Incentives were very seldom considered in pre-implementation assessments, and hence barely taken into consideration in the design or implementation of interventions. Their relevance for the effectiveness of interventions has been discussed in some evaluation reports, but only with respect to salary

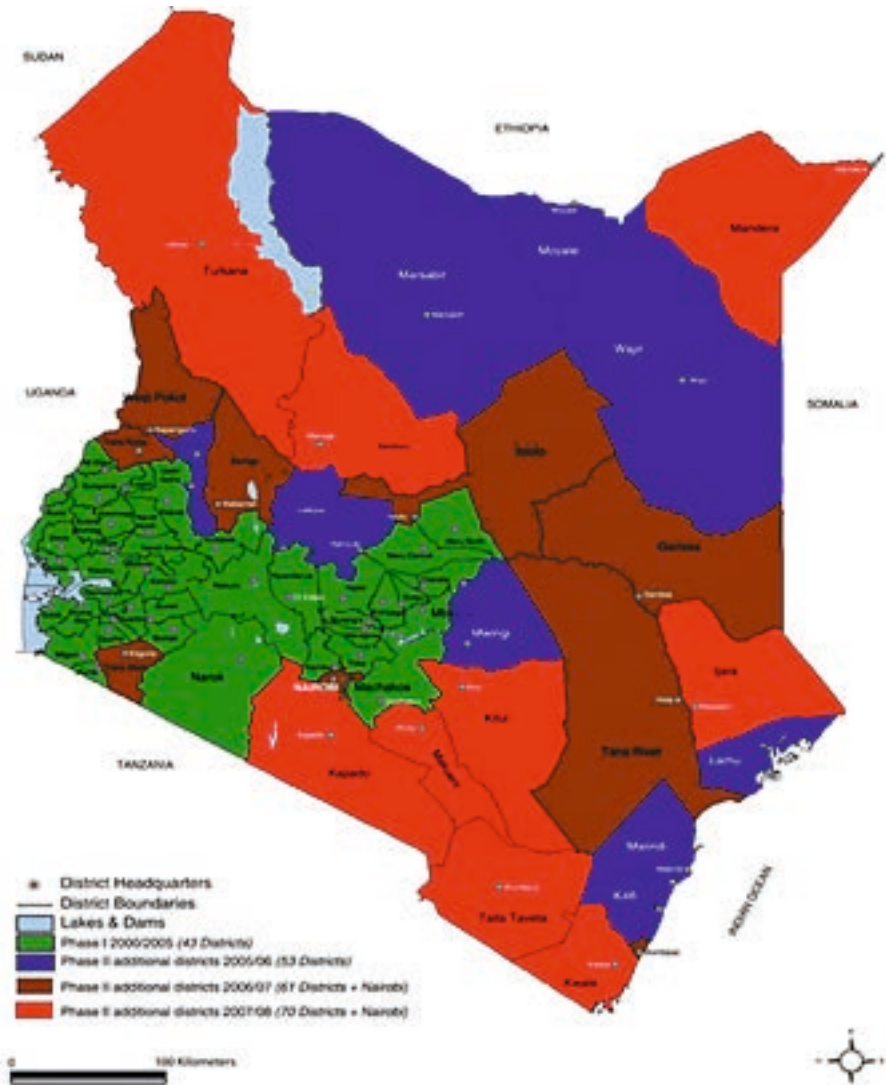


Figure 3. The geographical coverage of the different phases of NALEP-Kenya

incentives.³⁰ With respect to these, it is important to observe that the generally low salaries in the partner organisations of the interventions studied are a potentially limiting factor for the engagement of staff in change processes. The QA-Cambodia intervention, for example, witnessed cases of reluctance on the part of partner staff to

³⁰ Incentives that could be, but are not, systematically considered include risk perceptions, career progression, recognition by peers and superiors, and non-income benefits.

participate in programme activities because extraordinary daily allowances were not paid; these were regarded as important complements to staff salaries.³¹ Another important type of incentive affecting CD processes in Cambodia was the strongly hierarchical structure in public administration, which was seen to constrain the flow of capacities to the lower levels. It also hampered the initiative of lower-level staff to engage in the change process if not instructed from above. The CDPF-Cambodia intervention attempted to address this issue, but progress was seen to be slow.

Sub-factors (iv) and (v) – the alignment with the interests of elites and with the dominant social norms and values, respectively – also received relatively little attention and were, therefore, seldom referred to in programme documents to justify a given approach. This might be an indication that the supported interventions were not regarded as interfering with or going against elite interests or dominant social norms. However, as discussed in Section 5.1, an adequate consideration of the interests of political actors or top managers capable of influencing a given change process was seen to be important in several cases. That this matter is not sufficiently articulated in programme documents may be considered a weakness of contextual analyses.

4.1.2 Level of effort relative to the degree of complexity

The country studies showed that the average level of effort of Sida and its cooperation partners relative to the complexity of the desired capacities was on average medium to high. An important observation in five of the interventions studied – those with high and very high A1 factor scores (see Figure 4) – is that the level of effort was not equally adequate at all levels of the target organisations. More specifically, it was observed that the interventions in Cambodia – notably the CDPF – were less well prepared to work with the lower, decentralised levels of government, whereas in BiH the opposite was observed.³²

³¹ A beneficial aspect of the refusal to pay such allowances was that participation in the training was regarded as part of the normal work and not as an add-on. This was seen by interviewees in partner organisations as having strengthened the sustainability of the programme.

³² In the CDPF-Cambodia intervention, factor A1 was given scores of 4 (high) and 2 (low) for the work at national and sub-national levels, respectively; the score of 3 indicated in the graph represents a middle value.

Because Sida works mostly through its partners, their ability to engage in the change process is a key determinant of the intervention's total level of effort. In cases where this ability was reduced – due to lack of willingness, political interference or bureaucratic hurdles – CD results were affected negatively.

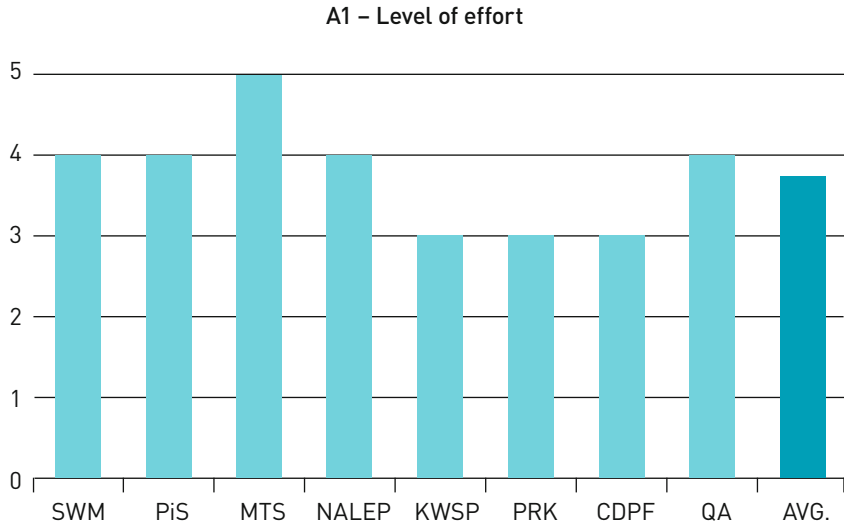


Figure 4. Scores for factor A1 (level of effort) for the interventions included in the country studies

4.2 USE OF CHAMPIONS AND CHANGE AGENTS

Champions are described in the CD support hypothesis as external individuals or groups influential enough to support or overcome resistance to change processes. They might be called on to assist cooperation partners and donors gain the upper hand over those resisting a CD process. Change agents are considered individuals or groups of individuals working from within the target organisation to facilitate the desired change process. Such individuals are expected to have access to top managers, networks and technical, political, communication and financial resources.

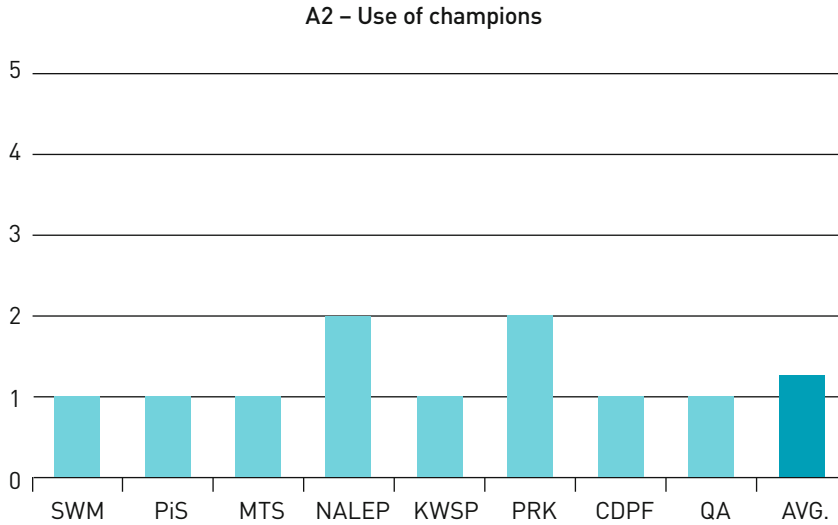


Figure 5. Scores for factor A2 (use of champions) for the interventions included in the country studies

The generally low scores regarding the use of champions are displayed in Figure 5. Six of the eight interventions have not used – or even considered using – champions. Their use was recorded in only two interventions – NALEP-Kenya and PRK-Kenya – but even in these cases the role of champions was not identified or prepared for during programme design. In both cases the champions were considered to have played an important role in the success of specific components of the intervention – in NALEP-Kenya the prioritisation of extension services in national strategies by a member of the government, and in PRK-Kenya the supporting of the community policing component by religious groups, the Red Cross and elements of the government structures.

With respect to the use of change agents, the scores were generally higher (Figure 6).³³ An important point in the comparison with the use of champions is that all country-study interventions used change agents to support change processes and CD in some way. With one exception, however, their use was largely unstructured, in the sense that five of the eight interventions did not explicitly define

³³ The score given to factor A3 in the CDPF-Cambodia intervention is 4 for the national-level component and 3 for the sub-national-level component. The middle value of 3.5 is represented in the graph.

the role of change agents with regards to processes taking place at the target organisations. Both the QA-Cambodia and CDPF-Cambodia interventions considered the engagement of change agents in programme design and implementation, namely individuals at middle and top management level at the MoEYS.

The NALEP-Kenya intervention attained the highest A3 score, justified by the importance of community-based organisations for the provision of rural extension services. In the words of the authors of the mid-term review, the stakeholder fora created by the programme were “mutually [...] supportive in providing relevant extension services for crops, livestock, fisheries and value-added activities, as well as funds and expertise for important infra-structure such as sub-surface dams and water harvesting structures, rural access roads and rural health centres.”³⁴

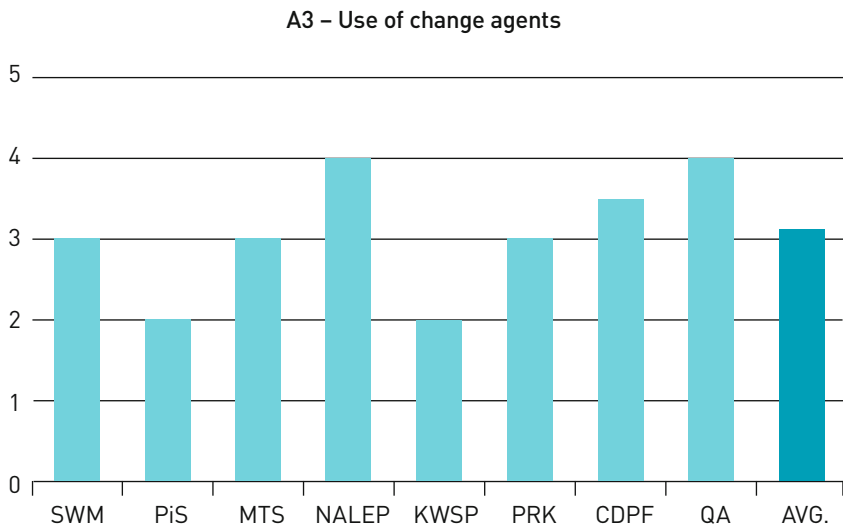


Figure 6. Scores for factor A3 (use of change agents) for the interventions included in the country studies

As was the case with the use of champions, in the other interventions the function of change agents remained insufficiently acknowledged and underdeveloped, and their engagement happened mostly in an *ad hoc* manner. Where change agents have been used, these have been individuals at partner organisations who, after having

³⁴ PEM Consult. *Midterm Evaluation of NALEP II*. 26 September 2009. Nairobi: Sida and NALEP; p.2.

undergone training, have been expected to introduce specific technical or administrative processes in their work place. Examples of such processes include preparing and processing new applications to public funds, developing and managing interactions with civil society and engaging in new forms of communication in the work place. While such achievements are not to be overlooked, none of these five interventions explicitly prepared those individuals to drive and manage complex long-term processes of systemic organisational change. It must be acknowledged, however, that where change agents have been used – even if not explicitly regarded as such – they have played a decisive role in advancing the objectives of the interventions. Working through the staff at target organisations is one of the fundamentals of Sida’s work. By doing so, some of these staff members adopt the role of change agents, even if only implicitly and without complete capacitation for all the requirements of the role.

4.3 TIMING AND STAGING

Timing combines an assessment of the adequacy of the starting date of a CD process and of the way in which this process has been scheduled – relative, for example, to other interventions, reform processes or internal processes at the target organisations. Staging concerns the degree to which a CD process adopts a stepwise approach, starting with simpler processes before taking on more complex ones.

Adequacy factors A4 (timing and scheduling) and A5 (staging) both attained average scores of medium to high, a certain degree of parallelism having been observed between these two factors (Figures 7 and 8).³⁵ With one exception, all of the interventions studied adopted an explicit incremental approach, opting for a progressive build-up of capacities. The case where staging was less obvious is one where the nature of the capacities to be developed – advanced statistical skills for highly specialised staff, in the PiS-BiH intervention – enabled a more abrupt, clearly targeted approach.

³⁵ The score given to factor A4 in the CDPF-Cambodia intervention is 4 for the national-level component and 2 for the sub-national-level component. The middle value of 3 is represented in the graph. For factor A5, the scores are 5 and 3 at national and sub-national levels, respectively, with the middle value of 4 represented in the graph.

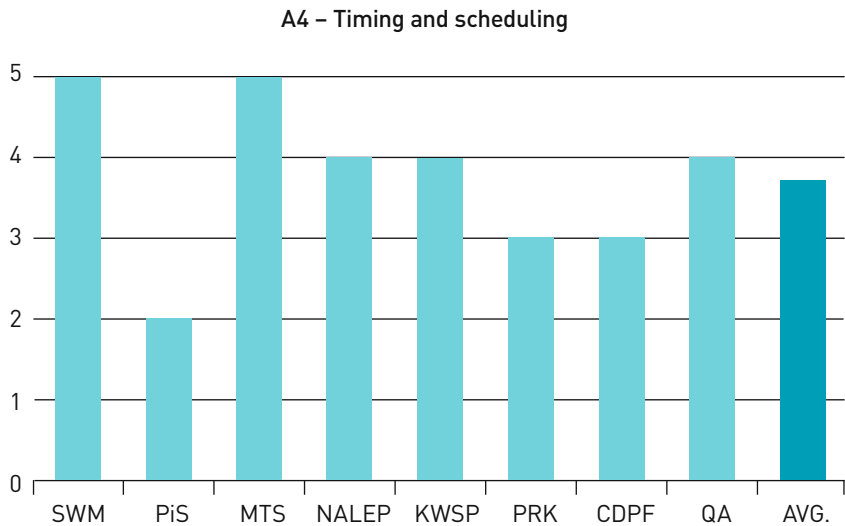


Figure 7. Scores for factor A4 (timing and scheduling) for the interventions included in the country studies

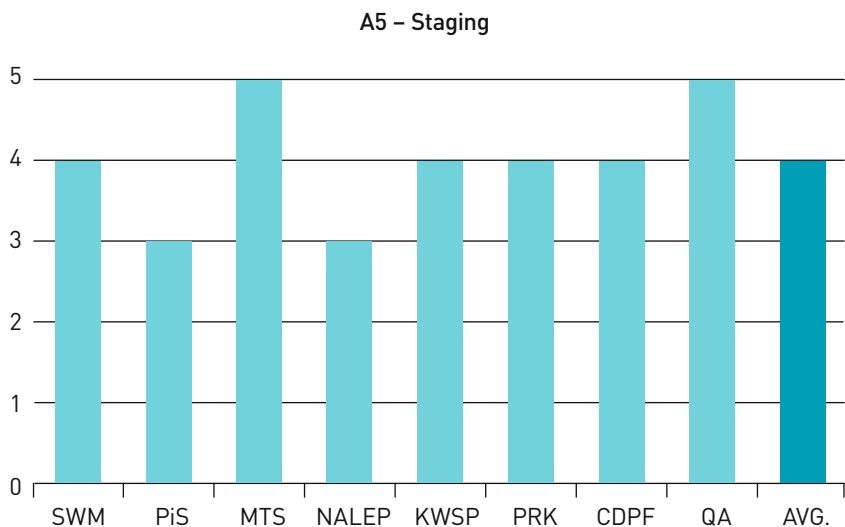


Figure 8. Scores for factor A5 (staging) for the interventions included in the country studies

In the interventions studied, adequate scheduling has been seen to require careful attention to the capacity of target organisations to absorb the capacities developed by the intervention. Hence an

adequate schedule has been regarded in most cases – with the exception observed above – to equate with an incremental one.

In all cases but one, the timing of the start of the intervention has been considered adequate – all interventions having been carefully aligned with ongoing policy processes, and several of them having resulted from explicit requests by the partner organisations. The single case where the choice of timing was clearly inadequate is the last phase of the PiS-BiH intervention, where Sida and its implementer failed to properly acknowledge and avoid the foreseeable disruption to implementation caused by the national population census. The census required extraordinary resources from the partner organisations, which could not engage in programme activities (Box 7).

Box 7. The negative impact of a bad choice of timing in the PiS-BiH intervention

“Only part of the planned activities has been implemented and some of the outcomes are definitely not within reach. Preparations for the Population Census are certainly the most relevant factor, as they captured the full attention of the whole system at crucial times, calling for the full involvement of most of the personnel in almost all departments.”

Ardeni PG, Kveder A. *Mid-term Review of Support to Partnership in Statistics in BiH Phase 3*. Final Report. Sida Decentralised Evaluations 2014:19. Stockholm: Sida, 2014; p.14.

Two other interventions – PRK-Kenya and CDPF-Cambodia at sub-national level – scored less well in factor A4 (timing) due to the insufficient duration of the intervention vis-à-vis the intended results. In this regard, it is important to observe that over half of the interventions included in the desk-based review and country studies had more than one phase, which indicates that Sida has been sensitive to the need and requests to extend interventions when circumstances justify.

4.4 CLARITY OF CAPACITY DEVELOPMENT RESULTS

The last of the adequacy factors refers to the degree of clarity – shared by cooperation partners and donor – about the CD results that the intervention is meant to support. The assumption is that

a clearer vision of results will lead to greater clarity about the course of action towards these results.

Factor A6 (clarity of CD results) shows a greater dispersion of scores, with two interventions seen to attain the maximum score, while one was assessed as low (Figure 9).³⁶ Those attaining the score of ‘very high’ – MTS-BiH and NALEP-Kenya – were interventions in which all partners were clear about the expected CD results throughout the entire intervention. The interventions that scored lower – medium or high – were those where results for one or more components of the intervention were less well developed, understood or consensual.

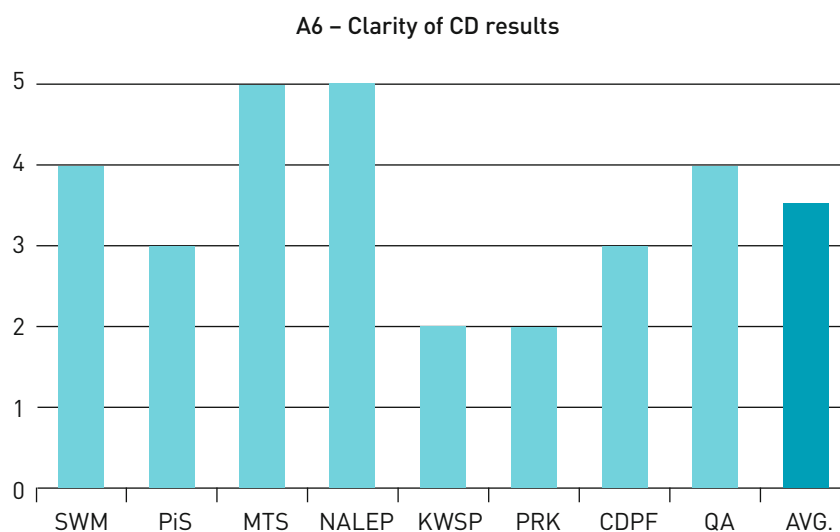


Figure 9. Scores for factor A6 (clarity of CD results) for the interventions included in the country studies

One illustrative example is the SWM-BiH intervention, in which a well-articulated vision of results at lower administrative levels was shared and acted on by all partners. At the same time Sida and its technical assistance provider struggled for over half of the project duration to elaborate objectives, targets and activities for results at entity and state levels. These remained elusive and difficult to quantify until the end of the intervention.

³⁶ The score given to factor A6 in the CDPF-Cambodia intervention is 4 for the national-level component and 2 for the sub-national-level component. The middle value of 3 is represented in the graph.

This points to a related aspect, namely that of engaging representatives of partner organisations at all the levels targeted by the intervention. Partners at different levels have different interests, priorities and concerns, which should be included in the intervention's objectives. In all three countries, interviewees from partner organisations were keen to highlight this aspect. This issue is discussed further in Section 5.1, in the analysis of factor R2 (understanding of context).

The interventions scoring the lowest in factor A6 are those where CD results were inadequately described and their understanding not shared by all partners. This leads to the observation that clarity of CD results goes hand in hand with the clarity and comprehensiveness of an intervention's results framework. Indeed, one of the two interventions with the lowest A6 scores – the PRK-Kenya – is also the one with the lowest score for the clarity of the intervention logic (factor RO1, see Section 7.1).

4.5 OVERVIEW OF ADEQUACY SCORES

Across the eight country-study interventions the degree of adequacy has been assessed as medium (Table 8). In chapter 8 the relevance of the adequacy score for the CD results observed is assessed and discussed.

Table 8. Summary of scores for the adequacy component and factors for the eight country-study interventions

Component / Factor	Intervention								Avg.
	SWM	PiS	MTS	NALEP	KWSP	PRK	CDPF	QA	
Adequacy	3.5	2.5	4.0	3.2	2.7	2.8	2.9	3.7	3.2
/ A1: Level of effort	4.0	4.0	5.0	4.0	3.0	3.0	3.0	4.0	3.8
/ A2: Use of champions	1.0	1.0	1.0	2.0	1.0	2.0	1.0	1.0	1.3
/ A3: Use of change agents	3.0	2.0	3.0	4.0	2.0	3.0	4.0	4.0	3.1
/ A4: Timing and scheduling	5.0	2.0	5.0	4.0	4.0	3.0	3.0	4.0	3.8
/ A5: Staging	4.0	3.0	5.0	3.0	4.0	4.0	4.0	5.0	4.0
/ A6: Clarity of CD results	4.0	3.0	5.0	5.0	2.0	2.0	3.0	4.0	3.5

5 Findings on the Responsiveness of Donor Support

According to the approach paper, responsiveness pertains to how donor support is adjusted to the conditions in which the CD process takes place. Considering that the interventions supported by Sida are joint efforts with its cooperation partners, the evaluation team considers it most appropriate to assess the joint responsiveness of the donor and cooperation partners.

As stated in Section 1.2.1, the responsiveness component comprises five factors, which are discussed in the sections that follow. These factors are:

- R1: Legitimacy of the donor (awarded by the partner organisation(s))
- R2: Understanding of the setting by the donor and partners
- R3: Clarity about CD results
- R4: Follow-up of CD support (in the different phases of the intervention)
- R5: Incentives for donor staff (to work towards achieving CD results in the target organisation(s)).

Factor R3 was interpreted as having the same meaning as factor A6 of the adequacy component, and will, therefore, not be discussed further here.³⁷

5.1 LEGITIMACY AND UNDERSTANDING OF CONTEXT

The first responsiveness factor, legitimacy, assesses the degree to which “the donor has been invited as a legitimate partner”³⁸ to support a given change process. It combines aspects of ownership and steering of the CD process, and how these are shared between cooperation partners and donor. It is also a function of how cooperation partners perceive the relevance of donor engagement, and of the

³⁷ Please refer instead to Section Error! Reference source not found. for the discussion of factor A6.

³⁸ See Section 7 of the approach paper in Annex 3.

suitability and correctness of their way of working – for example, in relation to prevailing procedures or values at the organisation.

As acknowledged in the approach paper and elaborated further in the next chapter, legitimacy usually rests on a correct understanding of the context in which the CD process takes place. The degree to which this occurs is what factor R2 (understanding of context) attempts to capture.

These two factors – R1 (legitimacy) and R2 (understanding of context) – attained scores of high to very high, the highest of all the factors assessed in this evaluation (Figure 10 and Figure 11). On the whole, Sida and its partners demonstrated a very sound understanding of the specific context in which interventions take place and were considered by its cooperation partners as legitimate with respect to the purposes and nature of the interventions.

The two factors are closely interdependent. In fact, legitimacy rests on the acceptance by cooperation partners of strategies and approaches aligned with their interests, priorities, capacities and needs. The design and subsequent implementation of such strategies and approaches requires careful and periodically revised assessments of the conditions and context in which an intervention is to be carried out. As explicitly acknowledged in the Sida 2011 Guidance on CD and the TRAC help texts,³⁹ such assessments should ideally be carried out by or in close cooperation with partners, a requirement that can only be fulfilled if Sida is regarded as a legitimate partner. In this logic, an initial recognition of the donor's legitimacy by its partners is necessary for cooperation to begin. If translated into strategies and approaches that are relevant for and accepted by partners, this cooperation further enhances mutual trust and donor legitimacy.

Against a background of generally high to very high legitimacy and understanding of context, it is instructive to consider three particular weaknesses detected in the country-study interventions.

³⁹ Refer to p.5 of the 2011 Guidance on Capacity Development, and heading 'Capacity Assessment and Risk' in the TRAC help text.

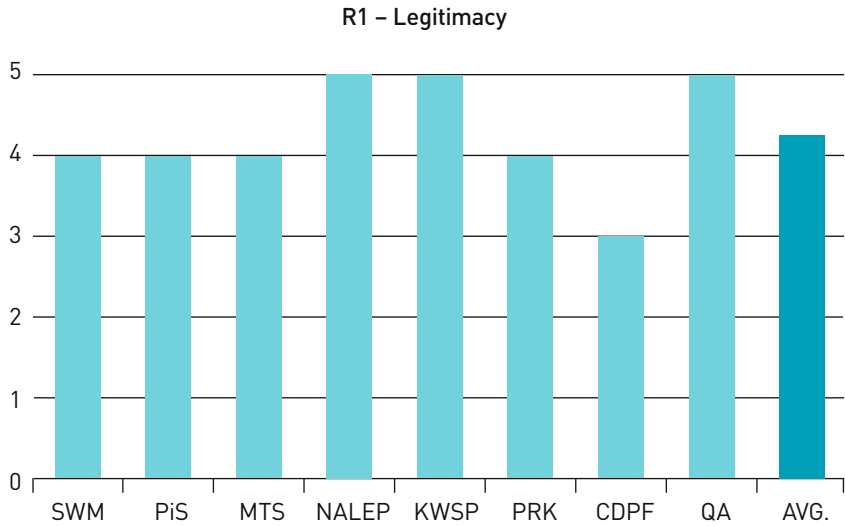


Figure 10. Scores for factor R1 (legitimacy of donor) for the interventions included in the country studies⁴⁰

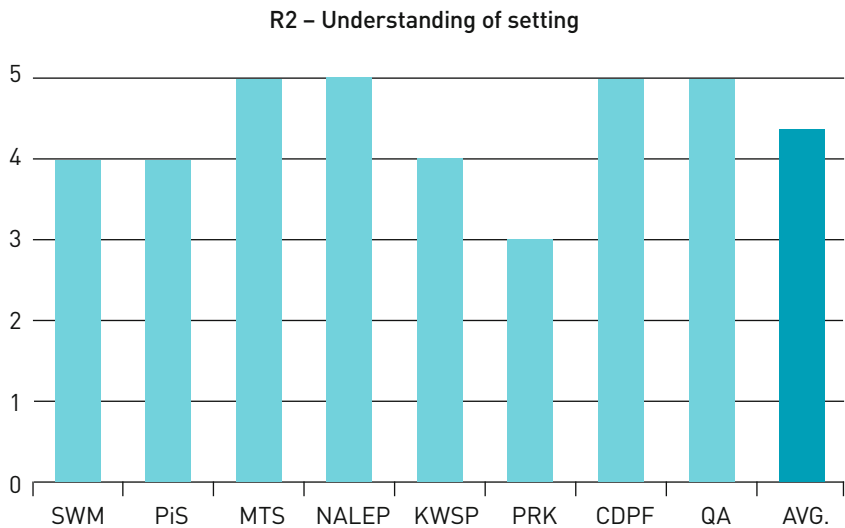


Figure 11. Scores for factor R2 (understanding of setting) for the interventions included in the country studies

⁴⁰ The CDPF-Cambodia intervention was given a score of 4 for legitimacy at the national level and 2 at the sub-national level. The value of 3 represented in the graph is a middle value.

The assessments of existing capacities and of CD needs in programmes such as NALEP-Kenya and CDPF-Cambodia were not sufficiently comprehensive, especially with respect to the sub-national levels. This led to problems during implementation, notably that some of the support was not adequate or relevant, which had a negative impact on results. A more detailed aspect, which should be part of the overall assessment of existing capacity and the CD needs at institutional level, is that of incentives, and how they may affect the achievement of results. It has been observed that none of the interventions studied performed a comprehensive analysis of incentives affecting staff at the target organisations. Measures addressing incentives have, therefore, not been incorporated into the interventions. Usual incentives such as salaries, career progression and non-income staff benefits appear to be regarded as lying beyond the reach and capacity of Sida – and, more broadly, of external donors – to influence. While this may be true in most cases, a more structured assessment of incentives could be beneficial for interventions that require changes in individual behaviour. Such an assessment could be included in broader capacity or needs assessments conducted in the preparatory phase of interventions.

The second aspect pertains to the comprehensiveness of the assessment of capacities of organisations in the partner country that could play a role in the implementation of interventions. While several of the interventions studied did assess the capacities of and used local organisations in implementation, interviewees from partner organisations of the KWSP-Kenya commented that greater efforts could have been made to identify local experts to provide parts of the technical assistance. In the 2011 mid-term review of the SWM-BiH intervention, a similar recommendation was made, partly with the aim of enabling savings and greater flexibility in the contact between the implementer and the partner municipalities. Local expertise was subsequently engaged in the later phases of the intervention.

In some cases the engagement of local expertise was constrained by the insufficient capacity available. In cases such as the MTS-BiH intervention, the programme included a training-of-trainers component for developing the capacity of future training providers (Box 8).

Box 8. Efforts for the training of trainers in the MTS-BiH intervention

“In 2013, the project team intensified its activities aimed towards improving the quality of training on offer. Following a comprehensive training market assessment and the creation of a database of training providers in previous years, the Federal Government, acting on a recommendation by the Civil Service Agency, adopted a regulation on certification of training providers which ultimately led to the establishment of a roster of accredited training providers. This has substantially improved the quality of the procurement process for training services and decreased training costs through removing companies as mediators between trainers and recipients. A total of 52 trainers in six subject areas are now accredited to provide training services to local governments in the Federation. A new call for experts was published in December to augment the existing training capacities. It is expected that Republika Srpska will follow suit in 2014.

In the course of 2013, the Project finalized and delivered a comprehensive 4-day generic training of trainers program that targeted a wide range of practitioners with knowledge and experience but limited training skills. 31 new trainers successfully graduated from the program with 14 selected to participate in a mentoring process with a recognized training organisation. The mentoring exercise is expected to hone the training skills of participants but will also result in the development of five new training programs, selected in accordance with the two entity training strategies.

A coordination and information meeting was also held with partner institutions and representatives of the most active training providers participating in the BiH training market to exchange information and understand the roles of both supply and demand sides of training. A follow-up meeting is planned in the first quarter of 2014 to brief the training providers on the new requirements set out in the quality assurance framework.”

Municipal Training System Project. *2013 Annual Progress Report*. Sarajevo: Sida and UNDP, 2014; p.14.

The third aspect concerns the legitimacy and the preparedness of Sida and its implementers to engage with political actors in attempts to influence political processes. In the interventions studied, such engagement was found to entail risks to legitimacy and to the achievement of results. Sida and its implementers have experienced difficulties in accessing or influencing higher-level decision-making

processes, and interventions have generally been less efficient with respect to achievements that depended on political actors. It has not been possible to assess whether this resulted from failures to properly assess the political reality in the partner countries, or if the political arena was too volatile or impermeable to the interventions' efforts. What has been possible to establish is that the objectives and activities in the interventions targeting political actors were generally less well defined and generated more uncertain outcomes. This is interpreted as resulting from a combination of insufficient – or, at least in some cases, shifting – legitimacy of Sida to interfere with political structures, and of insufficient clarity about the dynamics and priorities of the political actors affected by the interventions.

That such shortcomings did not affect the overall legitimacy of Sida can be explained by the fact that the objectives and activities targeting political actors constituted relatively small components of the interventions. For example, in BiH the components targeting entity and state levels faced a series of challenges and delays, but they were small components not affecting the broader acceptance of the programme, and there were other, non-political aspects of the relations with those two levels that were accepted as legitimate. Problems arose when getting too close to politics, but this was carefully avoided; hence the interventions – and Sida – were able to retain high levels of legitimacy.

5.2 FOLLOW-UP OF CAPACITY DEVELOPMENT SUPPORT

The fourth responsiveness factor relates to how the CD support is followed up in interventions supported by Sida. It pertains to the specific attention granted to CD-related aspects as part of the follow-up of the change processes in which CD is included. The approach paper observes in this regard that “while the initial specification of CD is often low, the follow-up on CD support and results [...] may often be conspicuously absent”.⁴¹

This factor has necessarily to do with the overall quality of an intervention's results management system, and those interventions attaining higher scores in factor R4 are also the ones performing better in terms of the quality of their monitoring system (Figure 12).⁴²

⁴¹ See Section 7 of the approach paper in Annex 3.

⁴² Please refer to the discussion on factor RO2 in Section 7.2.

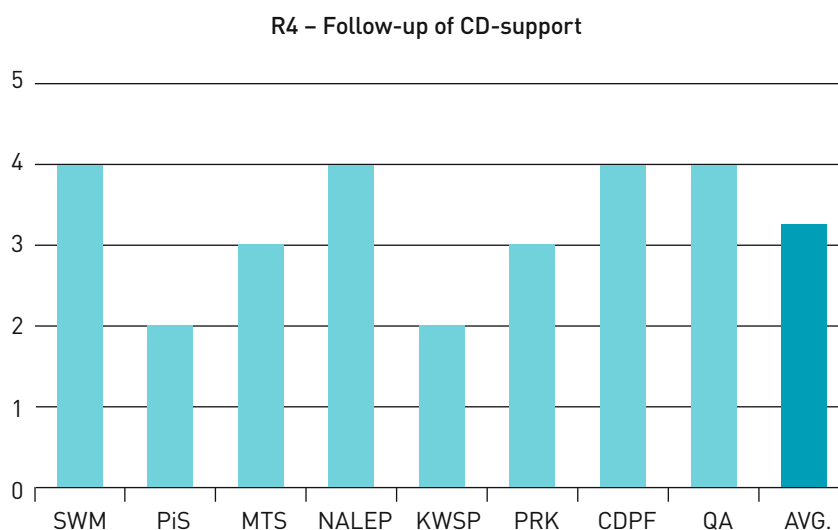


Figure 12. Scores for factor R4 (follow-up of CD support) for the interventions included in the country studies

The average level of attainment for factor R4 was assessed as medium. With the exception of two interventions seen to have very poorly elaborated results frameworks from the outset – PiS-BiH and KWSP-Kenya – the interventions studied showed some level of attention to defining the CD results to be achieved. However, only the SWM-BiH was seen to set out a full logical sequence of how different types of capacities fed into each other and led to the expected outcomes.

Less than half of the interventions had a systematic follow-up of CD progress and achievements. The MTS-BiH intervention attempted to put in place a process for assessing the outcomes of municipal training initiatives at the levels of individual, organisational and institutional performance, but the process was not scaled up to cover the entire intervention, thus its impact is likely to remain limited.⁴³ The two programmes in Cambodia, as well as NALEP-Kenya, adopted systems for regular reporting against the CD objectives that were considered useful by interviewees for assessing progress and defining courses of action. A particular strength in the case of the CDPF-Cambodia intervention was the alignment of the

⁴³ At the time of conducting this evaluation the results of the assessment had not yet been reported. See Box 11 in Section 7.2 for more details.

system for programme follow-up with the Master Plan for Education, enabling the contribution of the former to the implementation of the latter to be assessed.

5.3 INCENTIVES FOR DONOR STAFF

The fifth and last factor of the responsiveness component, R5 (incentives for donor staff), assesses the nature of the incentives available to Sida staff to work towards the CD goals supported by a given intervention. The approach paper highlights that such incentives may affect how staff relates both to its own organisation – i.e. Sida or the embassy of Sweden – and to the partner organisation(s). Incentives may be of very diverse types, ranging from tangibles such as rewards for good performance, to intangibles such as encouragement for innovation and independent thinking.

Across the eight country-study interventions, the R5 component was given a medium to high score, meaning that the incentives provided to the Sida staff engaged in the interventions studied were generally conducive to working towards CD results (Figure 13).

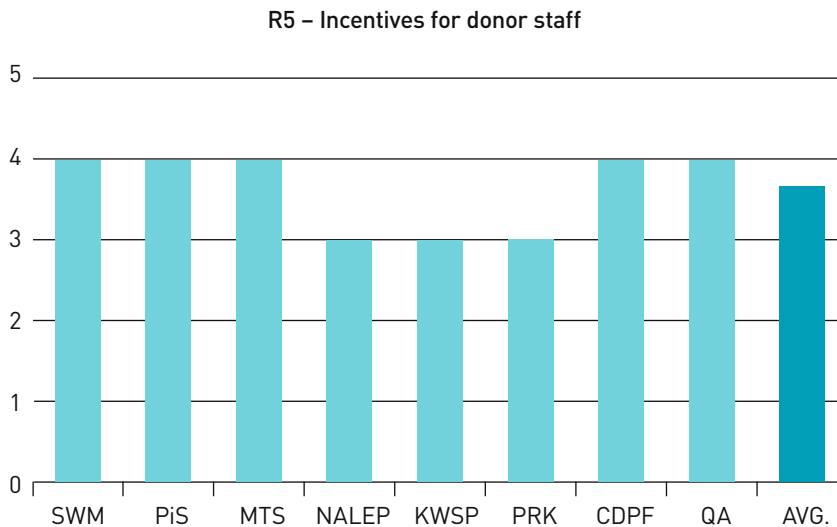


Figure 13. Scores for factor R5 (incentives for donor staff) for the interventions included in the country studies

The issue of incentives appeared, on the whole, to receive little specific attention in the design and implementation of the interventions studied. The fact that Sida and its representatives generally

work towards achieving results might be seen to flow naturally from the self-evidence that results are to be achieved, rather than from any explicit incentives put in place to facilitate a greater results orientation. In line with Sida's overall orientation towards results, all Sida officers contacted for this evaluation showed interest in the interventions attaining their long-term development goals in an efficient manner.

The specific focus on CD, in particular how and when changes in the capacity of partner organisations should be assessed, was seen to vary among officers. As per Sida current practice, this variation is acceptable given the absence of a blueprint for how contributions should be designed or implemented. Flexibility of the CD approach is also facilitated by a working culture that favours dialogue over top-down authority, which – despite the marked increase in steering from the Sida headquarters – gives individual officers room to adopt the approach that best suits each intervention.

None of the Sida representatives interviewed for this evaluation said that working conditions were inadequate or prevented them from doing their work. However, a generalised concern was expressed about the large number of programmes that each officer manages simultaneously and the excessive requirements of the current contribution management system. Most officers found that the time spent on entering information into TRAC is excessive and that it greatly constrains the possibility of engaging directly with each intervention and partner organisations – for example, through regular site visits or more frequent dialogue. It is not clear from this evaluation whether this affected the results of the interventions, but it was seen to influence the perception of Sida officers and the learning they obtain from the programmes that Sida supports. It was also seen to reduce the willingness of Sida officers to take on new tasks for extended appraisals or follow-up of CD in the programmes they managed.

On the whole, the modest to good scores for this factor reflect a rather neutral approach to the issue, where neither positive nor negative incentives were seen to be very salient.

5.4 OVERVIEW OF RESPONSIVENESS SCORES

Across the eight interventions included in the country studies the degree of responsiveness has been assessed as medium to high (Table 9). In chapter 8 the relevance of the responsiveness score for the CD results observed is assessed and discussed.

Table 9. Summary of scores for the responsiveness component and factors for the eight country-study interventions

Component / Factor	Intervention								Avg.
	SWM	PIS	MTS	NALEP	KWSP	PRK	CDPF	QA	
Responsiveness	4.0	3.4	4.2	4.4	3.2	3.0	3.9	4.4	3.8
/ R1: Legitimacy of donor	4.0	4.0	4.0	5.0	5.0	4.0	3.0	5.0	4.3
/ R2: Understanding of setting	4.0	4.0	5.0	5.0	4.0	3.0	5.0	5.0	4.4
/ R3: Clarity of CD results	4.0	3.0	5.0	5.0	2.0	2.0	3.0	4.0	3.5
/ R4: Follow-up of CD support	4.0	2.0	3.0	4.0	2.0	3.0	4.0	4.0	3.3
/ R5: Incentives for donor staff	4.0	4.0	4.0	3.0	3.0	3.0	4.0	4.0	3.6

6 Findings on Pull and Push Approaches

This chapter presents the findings relative to the third focus area of the evaluation, the balance between so-called pull and push approaches. As expressed in the approach paper “the present evaluation will look at if and how CD support [...] has sought to support CD processes not only from the inside, but also through ‘pull approaches’ that would strengthen oversight, accountability and transparency.”⁴⁴ It means that the CD support is provided not only to the target organisation but also to external actors to increase their capacity to demand improved service delivery, accountability and transparency of that organisation.

In line with the approach paper, the evaluation considered:

(i) whether the CD support has departed from a comprehensive assessment of internal and external factors that affect the CD process; and (ii) the type of support granted to those external actors, if any.

The findings from the country studies show that two of the eight interventions only addressed so-called push factors – i.e. support was directed exclusively to the target organisations. The remaining six interventions have made some effort to also engage external actors. In the case of the SWM-BiH intervention there were efforts to raise the awareness of citizens at central and local levels regarding the importance of adequate waste management. Although not entirely successful – due to unclear objectives and the short duration of the campaigns – these efforts aimed at enhancing the engagement of the public in waste collection and separation, and their willingness to contribute financially to the system.

In the PRK-Kenya programme communities and civil society organisations were involved in the programme and considered key partners in the framing of the community policing component. CDPF-Cambodia involved external actors at the provincial and school levels but not at the central level. The former were sector and inter-sectoral working groups intended to support the work of the MoEYS in the provinces. These sectoral groups performed below expectations, and the linkages between the Ministry and the

⁴⁴ See Section 8 of the approach paper in Annex 3.

provincial level have not seen the desired improvements. The pull approach adopted at school level in the CDPF-Cambodia intervention is described in Box 9.

Box 9. The pull approach at school level in the CDPF-Cambodia intervention

In CDPF-Cambodia the training in relation to school development plans included both school directors and the School Support Committees. The Committees, which are part of the Cambodian education structure, are made up by community members and have the role to supervise and support schools. The training of school leadership and School Support Committees should result in a school development plan. Funds are provided to the schools through the School Improvement Grant Programme, another Sida intervention in the education sector. The School Support Committees should oversee the utilisation of the funds. Almost all stakeholders interviewed, including donors and non-donors and Ministry of Education staff at both national and local levels, consider that the School Support Committees have an important role to play in overseeing schools and 'pressuring' for better education, and transparency in implementing the plans and in the use of funds. The training of School Support Committees through CDPF-Cambodia equipped them with more capacities to supervise the schools.

Although five of these six interventions included some pull mechanisms, the design of the interventions and the strategies have not been based on an in-depth analysis of how the combination of external and internal factors affect the capacity and performance of the target organisation(s). As a result, no strategies for how the participation of external actors could strengthen the CD processes have been produced in any of these interventions. An exception was the NALEP-Kenya intervention, which purposely targeted the empowerment of rural communities to demand better extension services. Despite difficulties in the mobilisation of some stakeholder groups – notably the private sector – the support to the demand side was important to strengthen the linkages between rural workers and the extension services.

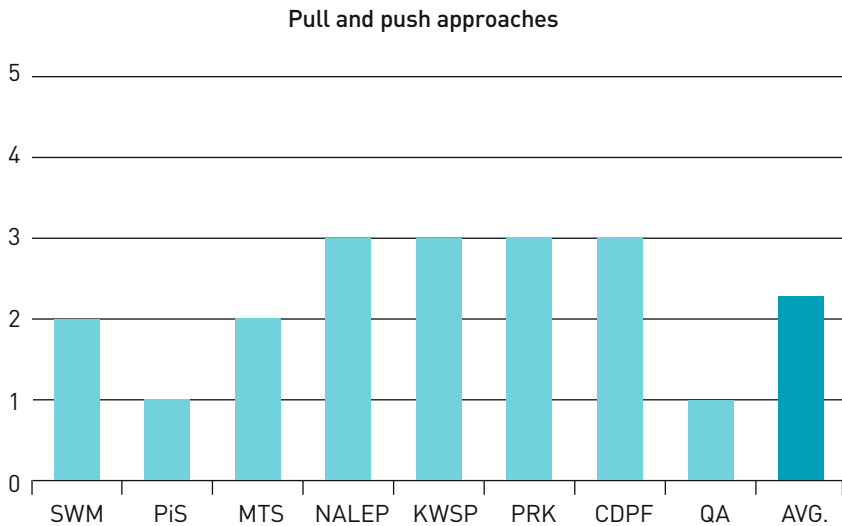


Figure 14. Scores for the pull- and push-approach component of the interventions included in the country studies

Figure 14 presents the scores for the degree of balance between pull and push approaches in the eight country-study interventions. Unlike the scores for the other components, there is no value order in the scores of 1–5 for this component. This means that a score of 1 does not necessarily represent a lower level of achievement than a score of 5.⁴⁵ This is because of the observation – expressed in the CD support hypothesis – that the combination of pull and push approaches might not be desirable in every situation. Instead, the relevance of engaging both internal and external actors should be assessed against the CD objectives, the characteristics of the target organisation, the capacity of external actors and the broader societal context.⁴⁶ A perfectly balanced approach (score 5) should, therefore,

⁴⁵ In mathematical terms, the pull and push scores are categorical variables, whereas the remaining scores are ordinal or, hypothetically, interval variables. Categorical variables are those where there is no intrinsic ordering to the categories (e.g. hair colour categories); ordinal variables are those where there is a pre-determined and clear ordering of the categories but where the intervals between them are not equal (e.g. level of educational attainment); interval variables are those where there is an intrinsic ordering and equal spacing between the values of the categories (e.g. income categories 5, 10, 15).

⁴⁶ See Section 8 of the approach paper in Annex 3, as well as the introduction to Chapter 8.

be regarded as equally valuable as push-only or pull-only approaches (score 1).

The country-study interventions adopted a predominantly push approach with smaller pull-approach components. This result can probably be attributed to the fact that it is the organisation recognising the need to develop its capacity that typically requests support from Sida. Such organisations are less likely to favour pull approaches, which would increase external demands for oversight and delivery. This was captured in the mid-term review of the NALEP-Kenya intervention, which suggests that the acceptance of balanced pull and push approaches might itself be an indication of change processes leading to improved governance (Box 10).

Box 10. The political challenge of combining pull and push approaches in the NALEP-Kenya intervention

“NALEP establishes institutions, which might be considered a challenge to the existing power structure in the rural areas of Kenya via their involvement in a bottom-up planning process and mobilization of government of Kenya, as well as community resources. This political challenge, however, can be turned into a major strength when it becomes broadly recognised that NALEP as an extension system delivers in a very cost-effective, democratic, transparent and accountable manner. In fact, the NALEP approach has the potential of becoming a political platform for change towards enhanced governance.”

PEM Consult. *Midterm Evaluation of NALEP II*. 26 September 2009. Nairobi: Sida and NALEP; p.11.

7 Findings on the Results Orientation

The degree of results orientation constitutes the fourth focus area of this evaluation and corresponds to the fourth component of the CD support hypothesis. As stated in Section 1.2.3, this component was broken down into the following four factors, which partly align with the four generic stages of RBM:⁴⁷

- Clarity of intervention logic/ToC
- Quality of CD monitoring system
- Quality of reporting on CD
- Quality of knowledge management system for CD.

The assessment focused on the CD-specific elements of the results management systems of the interventions studied. Because such elements cannot be detached from the system as a whole, the observations regarding CD-specific elements are generally applicable to the entire results management systems of which they are part.

7.1 CLARITY OF THE INTERVENTION LOGIC

The elaboration of an intervention logic presupposes an adequate evidence base for the situation that the intervention is meant to address. The recent Sida Handbook on RBM for research cooperation formulates this as follows: realistic expected results are defined on the basis of an appropriate analysis, which should clearly identify the target group and beneficiaries, and enable the identification and management of risks.

In particular with respect to CD, evidence regarding capacity status and needs, stakeholders and societal priorities and needs is necessary for partners and donors to understand and agree on: (i) why a programme is being launched; (ii) which capacities need to be developed; and (iii) why the support addresses some functions and not others. Hence it is relevant to briefly discuss the evidence base

⁴⁷ These stages are: (i) evidence-based planning; (ii) monitoring and reporting; (iii) evaluation; and (iv) organisational learning. See, for example, Sida. *Handbook on Results-Based Management for Sida Research Cooperation*. Stockholm, Sida; 2014.

used in the design of the interventions studied, using findings from both the desk-based review and the country studies. Because of the general difficulty in finding reliable information about the preparatory phases of all interventions, these results ought to be regarded as merely indicative.⁴⁸

All interventions have used evidence of some sort in their preparation and design. The most common sources of evidence were: (i) secondary data – for example, existing studies, statistical data; (ii) experience from previous interventions – and, in the case of interventions with several phases, experiences and evaluation results from previous phases; (iii) experiences from related interventions, in the same country or region; (iv) country, sector or organisation strategies, which generally refer to previously collected evidence; and (v) direct consultations with partners in the country and organisations – for example, through workshops or different forms of policy dialogue. No case was found of a dedicated baseline study being conducted with the aim of supporting the preparation or design of the intervention. However, capacity needs assessments have been conducted after the start of projects in some instances – for example, during the inception phase of the SWM intervention, and periodically during implementation in the PiS and MTS interventions. These assessments have been used to adjust the intervention logic.

With regard to the development and use of results frameworks, 12 of the 13 interventions included in the desk-based review had a description of the underlying logic included in the initial project document. The only intervention that did not – PRK-Kenya – developed a results framework during the first year.

The scores relative to factor RO1 (clarity of intervention logic) are shown in Figure 15. Four of the interventions – SWM-BiH, MTS-BiH, NALEP-Kenya and QA-Cambodia – attained high scores, indicating the presence of results frameworks with key elements – outcomes, outputs, targets and activities – and well-established linkages between these. As per Sida general practice, these results frameworks vary somewhat in content and appearance, as they largely adopt the format used by the partner organisations or the

⁴⁸ This difficulty arises primarily because: (i) not all processes for generating that evidence have been documented; (ii) where they have been documented, documentary sources were not always available; and (iii) most of the people who were involved in evidence generation are no longer involved in the interventions and, therefore, could not be contacted by this evaluation.

technical assistance providers. SWM-BiH is the only intervention for which a comprehensive ToC has been elaborated, which served as the basis for the performance monitoring plan developed during the inception phase. None of the results frameworks included a complete account of critical assumptions. The risk management matrices did compensate for this shortcoming in most cases though. Four of the country-study interventions had unclear or incomplete – for example, solely output-based – results frameworks, and were, therefore, scored as medium (PiS-BiH, KWSP-Kenya and CDPF-Cambodia) or low (PRK-Kenya).

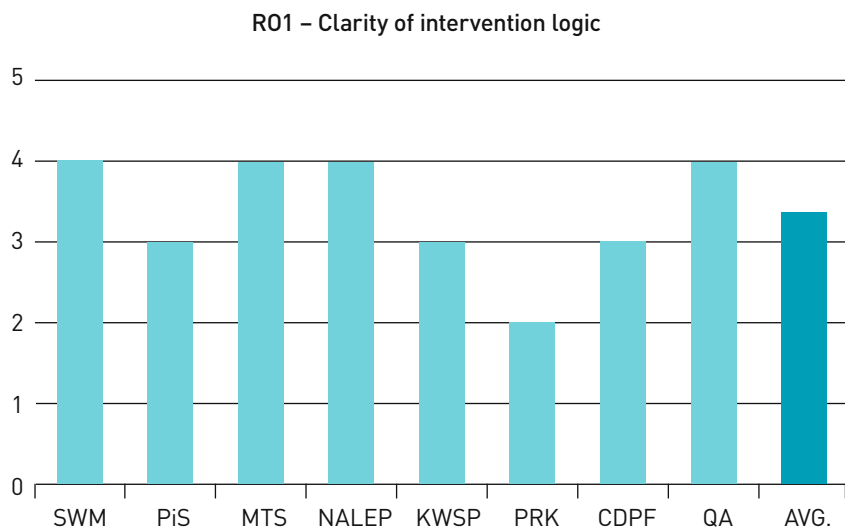


Figure 15. Scores for factor R01 (clarity of intervention logic) for the interventions included in the country studies

With respect to the CD-specific emphasis in the results frameworks of the country-study interventions, none of the frameworks included an exhaustive breakdown of outcomes, outputs, targets and activities pertaining to all dimensions of the capacities that the intervention aims to develop.⁴⁹ This prevented all interventions from attaining the highest score in factor R01.

The SWM-BiH intervention is an interesting case in this regard. Despite a rather unique – in the context of the sample being studied

⁴⁹ Recalling Section 1.1.2, this includes systems, structures, individual knowledge and skills, equipment and infrastructure (hard- and software), work environment and factors external to the target organisation.

– ToC, the performance monitoring plan is based on a sub-set of key performance indicators that fail to capture the variety of capacity dimensions targeted by the intervention. This is because indicators were used that capture the practical outcomes of the application of the improved capacities, instead of indicators for the capacities themselves – for example, the expansion of the area covered by waste management services as an indication of combined improvements in the capacities to plan waste collection and manage the finances of the system. While the argument might be valid – not least in view of the efficiency of monitoring vis-à-vis the resources of the intervention – the system does not enable the separate monitoring of each of the targeted capacities.

Partners in BiH and Kenya mentioned that capacity is a diffuse concept and that CD is, therefore, difficult to clearly discern, set targets for and subsequently monitor. This may explain the omission of CD-specific elements in the results frameworks. It is possible, nonetheless, to define CD-specific outcome and impact targets; hence the issue is likely to be one of having the right capacity and resources to do so, rather than an impossibility.

Other weaknesses detected in six of the eight country-study interventions include: (i) results frameworks which are output-based but where outputs do not clearly relate to outcomes and impact; (ii) results frameworks where indicators are either absent, too complex or unclear, making them unusable or rendering data collection and validation excessively resource-intensive; and (iii) results frameworks which have no means of verification, meaning that the partner has not decided how, when and where to collect data.

According to interviewees at Sida, the fact that the quality of the intervention logics varies between the interventions studied has several possible explanations: (i) the interventions were designed in different periods and, therefore, under slightly different sets of requirements for the management of results; (ii) the results frameworks are generally elaborated by the partner organisations, whose capacity to design such frameworks varies considerably; (iii) the capacity of Sida programme officers to appraise the results management framework of proposals varies across embassies, which is an important aspect when Sida increasingly leaves intervention design and implementation to its partners; (iv) the priority awarded to the quality of the results framework in decisions to grant support varies across embassies and Sida offices, and across time; and (v) decisions

to grant support may be prompted by factors not exclusively related to the quality of interventions (of which the underlying logic is a component), such as disbursement schedules.

7.1.1 Adherence to the 2011 Sida Guidance on Capacity Development

The above findings on the CD-specific content of the intervention logics may be seen against the provisions in the 2011 Sida Guidance on Capacity Development. In this document, officers responsible for managing Sida contributions are instructed to “monitor a combination of changes in organisational output, and organisational qualities such as e.g. human and organisational behaviour” when assessing CD results, and “ensure that the assessment framework used by the organisation is understood by the organisation’s members and stakeholders.”⁵⁰

It is not surprising that neither of these two provisions was systematically followed, since neither Sida staff nor technical assistance providers or partner organisations interviewed for this evaluation made any regular and systematic use of the Guidance. In Cambodia and BiH neither implementers nor partners were aware of the existence of the Guidance, whereas the Sida staff interviewed knew of its existence and content but did not explicitly refer to using it. In Kenya both Sida staff and partners were familiar with the Guidance, but found it too conceptual and thus of little practical use.

In this regard, some of the Sida staff and partners interviewed expressed the request for more hands-on guidance on how to ensure the inclusion of critical capacity dimensions in all CD interventions.

7.2 QUALITY OF CAPACITY DEVELOPMENT MONITORING

M&E serves the purpose of following up, analysing and assessing achievements against the three levels of targets – outputs, outcomes and impact – to enable accountability and learning. Meaningful M&E requires a data collection strategy to be in place. The monitoring data form the foundation for the evaluation, as they express the performance history of a given programme.

⁵⁰ Sida. *Guidance on Capacity Development*. Stockholm: Sida; 2011, p.11.

Because Sida does not have any pre-determined requirements for the monitoring of interventions, this section assesses quality against more general criteria for good M&E, including quality and relevance of data against the targets indicated in the results frameworks.

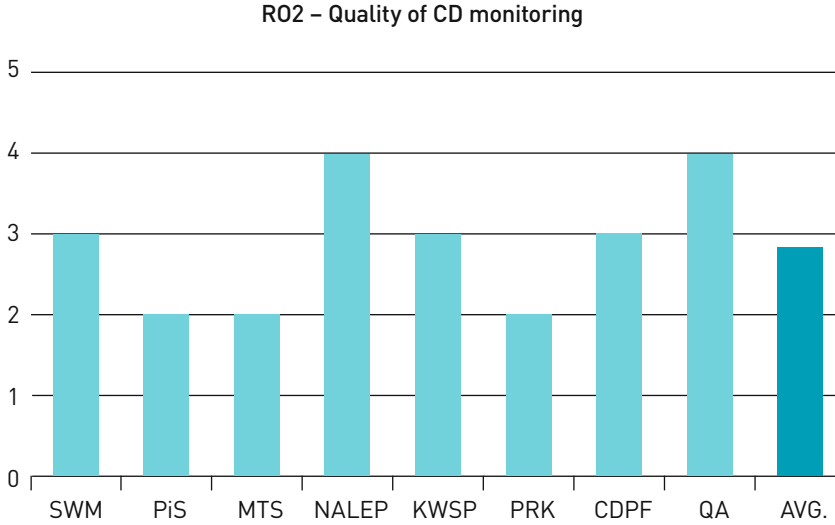


Figure 16. Scores for factor R02 (quality of CD monitoring) for the interventions included in the country studies

The existence of monitoring systems and measures for specifically monitoring CD was assessed and is represented in Figure 16. The scores range from low in the PiS-BiH, MTS-BiH and PRK-Kenya interventions, to medium in SWM-BiH, KWSP-Kenya and CDPF-Cambodia, and high in NALEP-Kenya and QA-Cambodia. This tallies generally well with the assessment of the clarity of the results frameworks – i.e. factor RO1 represented in Figure 15. The lack of a specification of capacity dimensions in those frameworks is also mirrored in the monitoring systems, which failed to monitor the achievements in the key capacity dimensions targeted by the interventions.

In addition to the weaknesses in the design of most monitoring systems, assessing the extent to which they have actually been used has been very difficult because periodic reporting seldom referred explicitly to the proposed monitoring framework (see Section 7.3 below). Two examples of how monitoring with a CD focus was conducted in BiH are given in Box 11.

Box 11. The political challenge of combining pull and push approaches in the NALEP-Kenya intervention⁵¹

Starting in 2013, the **Municipal Training System Programme** in BiH adopted a five-step methodology to assess the impact of the individual training provided, in terms of: i) reaction to/satisfaction with the usefulness, suitability, approach and methodology of the training; ii) degree of learning, with the help of pre- and post-tests; iii) applicability of learned skills, through focus groups or surveys to elicit the use of skills in practice; iv) volume and quality of municipal activities or services (e.g. number and funding success of municipal or inter-municipal projects following a training in project cycle management); and v) return on investment in terms of time saved when delivering the service or activity after the training as compared to before. At the time of the country visit, the results of the piloting of this methodology had not been reported yet; hence its usefulness and ease of application cannot be assessed. The methodology constitutes an explicit attempt to measure the broader capacity effects of the intervention.

During the first six months of the **Municipal Programme on Solid Waste Management** in BiH, the technical assistance provider defined a set of key performance indicators to assess progress towards and achievement of programme objectives. The first step involved the elaboration of a theory of change and the identification of the priority objectives according to different perspectives — for example, of service customers, finance or process managers. The selected indicators were those believed to best capture the priorities and objectives of the intervention considering those multiple perspectives. They were then included in the solid waste management plans developed with the support of the intervention, specific training having been provided to incorporate them in the routine monitoring and reporting of municipal utility companies. Working with this indicator-based system has been a learning process in itself; despite irregularities in the reporting to Sida, all municipalities consulted for this evaluation acknowledged the usefulness of the system to inform the planning of solid waste management activities.

⁵¹ For a recent account of the evaluation system in the MTS-BiH project, refer to: Sørensen SE. Comprehensive return on investment evaluation system for local self-government training in Bosnia and Herzegovina. Case: Project cycle management course. *Performance Improvement* 2015; 54(1): 14–27.

7.3 QUALITY OF REPORTING

Reporting is meant to ensure accountability on and learning about performance, internally within the organisation, to donors and to the public. The latter is particularly important for CD programmes that affect the performance of government institutions, which was the case for all the interventions included in this evaluation.

According to Sida's RBM principles, reporting should account for performance and provide analysis of how and why certain results were or were not achieved. Used effectively, a report becomes a key management tool.

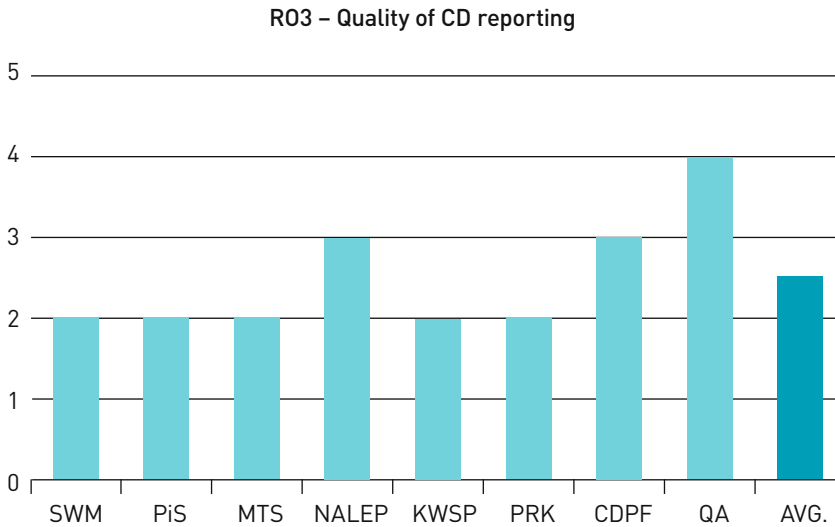


Figure 17. Scores for factor R03 (quality of CD reporting) for the interventions included in the country studies

The evaluation rated the average quality of reporting in the eight country-study interventions as low (see Figure 17). The relatively low scores were motivated by a combination of the following key factors:

- The report does not systematically address achievements against targets (5)
- The report mainly concerns outputs, while outcomes receive limited or no attention (5)
- The report contains observations and little evidence (3)
- The report does not include or benefit sub-national levels (2).

The figures in brackets indicate the number of interventions in which each shortcoming was detected, and show that interventions in general were affected by more than one of the shortcomings. A critical aspect underlying the first three factors is that only one of the interventions systematically used the proposed monitoring framework as the basis for reporting on CD. Hence reporting did not systematically include monitoring of CD data that could be assessed against targets and provide easy-to-interpret evidence of progress and achievements.

7.4 LEARNING FROM RESULTS

The quality of knowledge management has been difficult to assess because it is impossible to identify all instances where the findings from periodic or final reports have informed improvements to the interventions themselves or to related interventions. The evaluation team focused on three aspects: the use of evaluation results in intervention design, the communication of results to partners and the sharing of experiences internally at Sida.

With respect to the use of results from previous evaluations in the design of new interventions or new phases of the same intervention, the evaluation found several examples of this (see Section 7.1). Both the desk-based review and the country studies showed that where interventions had been evaluated, evaluation results and earlier experiences have been considered in the planning and design of new phases or new interventions in related areas.⁵²

The communication of results – from evaluations and periodic reporting – was seen to be a weak point in most of the interventions studied. Periodic reports were primarily directed to and used by Sida, and not its partners. This was particularly the case in interventions involving multiple partners – such as NALEP-Kenya, KWSP-Kenya, CDPF-Cambodia, SWM-BiH and MTS-BiH – in which dialogue between Sida and partners at decentralised levels on the progress of the intervention barely took place. Discussion of periodic progress and evaluation reports (e.g. mid-term reviews) occurred mostly at the six-monthly or yearly project advisory board meetings between Sida and partners at central level. Several interviewees at

⁵² For example, the experiences from the NALEP-Kenya intervention informed the design of the Sida-supported Agricultural Sector Development Support Programme in Kenya.

Sida and partner organisations were of the opinion that it is relevant to use reports for joint reflection and learning, at the same time as they recognised that such an aim requires resources that are not available in most cases.

There is evidence from all country-study interventions that Sida makes systematic use of information to manage interventions. The processing of this information follows the guidance for contribution management described in Section 2.3, and the assessments made by Sida officers are currently made available to the whole of Sida through TRAC. With the improved connectivity of the system and its functionalities for producing syntheses for internal sharing and learning, some officers regret spending too much time filling mandatory TRAC fields instead of actually having contact with interventions and partners. Given the weaknesses in the monitoring and reporting of interventions described above, the limited contact of Sida officers with intervention partners entails the risk of Sida developing an incomplete view of the interventions.

Uncertainties regarding the actual degree of systematic internal learning, the limited degree of dialogue with partners on intervention results, and the general absence of a specific focus on CD issues in the information generated in the interventions studied resulted in a low average score for factor RO4 across the eight country-study interventions (see Figure 18).

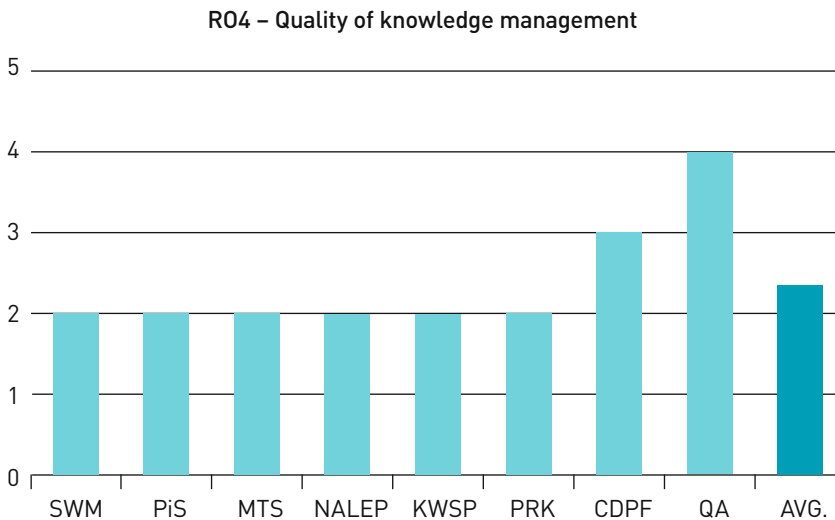


Figure 18. Scores for factor RO4 (quality of knowledge management) for the interventions included in the country studies

7.5 OVERVIEW OF RESULTS-ORIENTATION SCORES

Across the eight interventions included in the country studies, the degree of results orientation has been assessed as low to medium (Table 10). In chapter 8 the relevance of this score for the observed CD results is assessed and discussed.

Table 10. Summary of scores for the results-orientation component and factors for the eight country-study interventions

Component / Factor	Intervention								Avg.
	SWM	PIS	MTS	NALEP	KWSP	PRK	CDPF	QA	
Results orientation	2.8	2.3	2.5	3.3	2.5	2.0	3.0	4.0	2.8
/ R01: Clarity of intervention logic/ToC	4.0	3.0	4.0	4.0	3.0	2.0	3.0	4.0	3.4
/ R02: Quality of monitoring system	3.0	2.0	2.0	4.0	3.0	2.0	3.0	4.0	2.9
/ R03: Quality of reporting on CD	2.0	2.0	2.0	3.0	2.0	2.0	3.0	4.0	2.5
/ R04: Quality of knowledge management	2.0	2.0	2.0	2.0	2.0	2.0	3.0	4.0	2.4

8 The Validity of the Capacity Development Support Hypothesis

This chapter presents and discusses the results of the assessment of the validity of the CD support hypothesis. This involves assessing the validity of each of the four postulates of the hypothesis, which is equivalent to assessing the degree to which the level of achievement in each of the four focus areas correlates with the CD results of the interventions. Because of gaps and limitations in the data from the desk-based review on both CD results and hypothesis components, only the findings from the country studies have been considered in the testing of the hypothesis.

The four postulates (or components) of the hypothesis, as presented in the approach paper in Annex 3 (see also Section 1.2) are as follows:

- 1) Better CD results will be achieved if change processes are adequate for the complexity of the capacities to be developed (adequacy)
- 2) Better CD results will be achieved if the donor and its partners are responsive to the situation of the partner country and its organisations (responsiveness)
- 3) The balance between pull and push approaches has a bearing on the results of donor support to CD (pull and push approach)
- 4) The degree of results orientation has a bearing on the results of donor support to CD (working with results).

The evaluation team considers that there is a distinction in how postulates 1 and 2, on the one hand, and postulates 3 and 4, on the other, are formulated. The first two presume that there is a positive correlation between adequacy or responsiveness and CD results – i.e. higher adequacy or responsiveness leads to better CD results.

Postulates 3 and 4 assume only that there is a correlation but do not make explicit whether this is positive or negative. In the particular case of postulate 4, it is possible to argue that the generic aim of working with results is to enhance the performance of development efforts; hence there is an implicit positive correlation in this postulate.

An important consideration to make is that the assessment by the evaluation team rests on the verification of phenomena that did take

place and those that did not take place. While it is relatively straightforward to infer causal relationships in the former situation, the same does not apply to the latter; the absence of a phenomenon does not necessarily allow conclusions about its hypothetical presence. Hence this latter type of situation has been treated with greater care to avoid inferences that could not be verified.

8.1 CONCLUSIONS ON THE VALIDITY OF HYPOTHESIS COMPONENTS

This section summarises the evaluation team's judgement regarding the perceived contribution of each of the hypothesis components and factors to the CD results observed in the country-study interventions. Isolating these contributions has been compounded by the large number of factors, the difficulty of precisely characterising each of them, and the interdependencies between different factors. Examples from the interventions studied are used to support the judgement, in particular to illustrate the circumstances in which factors may or may not be relevant for CD results.

8.1.1 Adequacy

The evaluation team considers the degree of adequacy to have a positive effect on the results of donor support to CD. Based on the sample studied, the first postulate of the hypothesis is considered valid. Considering each of the adequacy factors separately, the following observations can be made:

- A level of effort that is commensurate with the complexity of the capacities to be developed seems to be highly relevant for CD results. In particular, the adjustment of the intervention to the technical requirements of the capacities (i.e. technical expertise vis-à-vis the specificity of products and services), the ability to engage with and gain support from all relevant partners and the readiness to work in different geographic locations (if and when necessary) stood out as success factors in all interventions.
- All interventions demonstrated the critical importance of adequately addressing the interests of elites, both for the support and the hindrances they can generate to any externally funded intervention.
- The degree of complexity itself was not seen to have an effect on results; rather, it is the manner in which donors and partners deal with this complexity that is relevant.

- There is no unequivocal evidence about the effect of using champions on CD results. Interventions such as NALEP and PRK saw champions influence results positively, but it cannot be concluded that the other interventions would have attained better results if they had also used champions.
- Employing change agents acting from within the partner organisations has been important for the good results of seven of the eight country-study interventions. It appears, especially from the experiences in Cambodia, that explicitly acknowledging and preparing the role of change agents yields better results. It is likely that the design of these roles needs to be tailored to the specific context of each intervention.
- Aligning the timing of the intervention to that of events potentially affecting it was shown to be necessary to ensure the engagement of partners. Interventions whose timing was aligned with that of national strategies were considered more relevant and received more support from policy-level partners, which facilitated implementation and improved results.
- The adoption of an incremental approach was seen to be important in interventions starting from low levels of initial capacity. In these, implementing stepwise CD processes was considered necessary to allow partners the time to absorb the new capacities. An incremental approach seems less relevant in interventions providing very specific inputs to partners with a stronger capacity basis, as was seen in the PiS intervention.
- It appears that clarity about CD results helps Sida and partners focus their efforts on achieving those results. Clarity of the vision of results needs to translate into concrete action to achieve results; hence it is not entirely possible to isolate the contribution of this factor from that of the level of effort. It appears instead that clarity of vision is necessary to adjust effort, which in turn affects results.

8.1.2 Responsiveness

The evaluation team considers the degree of responsiveness to correlate positively with the results of donor support to CD. This validates the second postulate of the CD support hypothesis, based on the sample studied. The following observations can be made:

- The first two factors of this component – legitimacy and understanding of the setting – were seen to be strongly interdependent and highly relevant for the attainment of CD results. The latter

was also seen to correlate strongly with several factors under the adequacy component.

- Being recognised and accepted as a legitimate partner was essential for Sida to be able to operate in the partner countries and organisations. CD results were affected negatively in those few cases where legitimacy was compromised – for example, engagement with higher administrative levels in BiH or sub-national levels in Cambodia.
- Several interviewees considered the Sida approach of working through its partners essential for partner ownership and donor legitimacy. This was seen to have a positive effect on partner engagement, and with it the overall level of effort and the success of the intervention.
- A correct understanding of the setting was seen to be important for the choice of partners, the design of the intervention, the identification of capacities to develop, the selection of the most adequate timing and rhythm of change and, not least, the definition of objectives and means of implementation that are relevant for the partner(s). Singling out the contribution of the understanding of the setting to CD results is, therefore, difficult, but given its relevance for those other factors, the evaluation team is of the view that the factor is of great relevance for the quality of CD support and of its results.
- It is not possible to conclude on the relevance of the quality of the follow-up of CD support to CD results. Important variations were detected in the quality of follow-up and in the degree to which this follow-up was used to adjust the course of interventions. CD-specific follow-up of all relevant capacity dimensions has been relatively weak across most interventions, which limits the ability to draw conclusions.
- There is weak evidence about the effect of incentives for Sida staff on CD results. Disincentives affecting CD results were not detected, and hence their effect could not be assessed. Standard incentives such as salary levels, career opportunities and recognition by peers and superiors were generally in place, but their relevance for the commitment of staff to work towards results could not be discerned.

8.1.3 Pull and push approach

There is no compelling evidence that a balanced pull and push approach affects the results of donor support to CD. The evaluation

team is, therefore, not able to validate or falsify the third hypothesis postulate.

Important variations were observed in the interventions studied, both in the degree to which pull and push approaches were used and, more importantly, in the perceived relevance of these approaches for the observed results. Four of the eight country-study interventions suggest that a combined pull and push approach was relevant for CD results. In the other four an imbalanced approach does not seem to have had any effect on CD results.

The CDPF-Cambodia and PRK-Kenya are examples of the former situation: in PRK, the involvement of communities and civil society organisations was seen to strengthen results of the community policing component, whereas in CDPF efforts at local level to capacitate School Support Committees were seen to be important for supporting and monitoring school development. Comparable effects were seen in the other two interventions in Kenya.

The findings from the other four interventions – the three in BiH and QA-Cambodia – suggest that a balanced approach might not be necessary for the achievement of CD results. In SWM, using external actors would have been too premature considering the incipient level of development of municipal solid waste management systems. In the PiS the benchmark with which to align the degree of capacity followed international standards, and it is highly improbable that statistical data users would affect its level. In the MTS, citizens could have been involved in the definition of the themes and contents of municipal training programmes, but it is questionable whether they would have a well-substantiated opinion on this issue. And in QA-Cambodia no entry points for external demand-side actors were considered, given the strongly hierarchical and centralised institutional traditions.

On the whole, adopting a pull approach should not be regarded as a magic bullet for better CD results.⁵³ Instead, the combined engagement of internal and external actors should be assessed case by case, so that the very notion of the balance between the two approaches will vary with the objectives of the intervention and the context in which it takes place.

8.1.4 Results orientation

The evidence from the interventions studied supports the validity of the fourth hypothesis postulate that the degree of results orientation

112 ⁵³ See Section 8 of the approach paper in Annex 3.

has a bearing on the achievement of results of donor support to CD. This evidence also suggests that the correlation between results orientation and CD results is positive. The following may be observed:

- A clear intervention logic was seen to coincide with a clear vision of CD results. In several cases this was seen to help Sida and partners focus on working towards these results.
- Regular monitoring and reporting was seen in several cases to be important for Sida and partners to assess progress and adjust the intervention. It was generally found that corrective action is directed at what is monitored and, especially, at what is reported. Thus monitoring and reporting of all relevant capacity dimensions is more likely to support corrective action towards a broader range of CD results. Cases such as QA-Cambodia and the CDPF seem to support this inference. Other interventions where CD-specific monitoring and reporting was rather poor were seen to succeed in changing course towards good CD results, which suggests that there are other factors at play than only the quality of monitoring and reporting. Indeed, it is the actual adjustment of effort that seems to have the strongest effect on CD results.
- Based on the sample studied, it appears that the quality of learning and knowledge management is relevant for CD results. Learning about the intervention was seen in most cases to be essential for Sida officers to assess progress and propose adjustments towards results. In one case – the PiS – this effect was less pronounced; not that learning did not take place, but it was less clear how this affected the implementation of the intervention.
- A similar observation can be made of the relevance of sharing information about intervention progress and CD results with the cooperation partners. Learning about and discussing progress gives partners the possibility of adjusting implementation in the manner that is most relevant for them.

8.2 CONCLUSION ON THE VALIDITY OF THE HYPOTHESIS

On the basis of the analysis of the country-study interventions, the first, second and fourth postulates of the CD support hypothesis were found to be valid. With respect to the fourth postulate, it is concluded that the degree of results orientation has a positive effect on CD results. The postulate concerning the effect of a balanced pull and push approach could not be validated.

9 Other Factors Affecting Capacity Development Results

The evaluation team was requested to identify and assess the relevance for CD results of factors not included in the CD support hypothesis. Two types of non-hypothesis factors have been identified: those that add details or nuances to the components and factors of the hypothesis; and factors that are entirely external to it.

Factors not included in the CD support hypothesis which the evaluation team found to have a positive effect on CD results include the following:

- Adequate form, method and overall quality of CD support: in six interventions the quality of the CD support in general, and of the technical assistance in particular, was considered a decisive factor for the achievement of CD results. In several of these interventions, interviewees considered this the single decisive factor. Defining features of good-quality support include flexibility and adaptability, which was seen to be important for the delivery of good CD results in four interventions implemented in diverse settings. This enabled the teams to provide good-quality assistance regardless of the local conditions. This factor complements factor R2 (understanding of setting), emphasising the importance of continuously assessing the specificities of and changes in context to better tailor the support given.
- Sufficient time-frame for CD and longer-term CD vision was seen to be an important positive factor in all of the interventions. Longer commitments and explicitly acknowledging that sustainable CD takes time was found to yield better CD results. This factor supports factor A4 (timing and scheduling), adding to it the less-explicit dimension of the donors' long-term commitment to and vision for CD.
- Capacity of Sida staff, including sector competence and degree of engagement of donor: in three of the interventions – CDPF, QA-Cambodia and SWM – the active engagement of Sida staff and the quality of their support was regarded as supporting the achievement of intervention results. This supports factor A1 (level of effort), adding specific sector competence and the active participation of donors as key factors affecting CD results.

- CD support that is holistic, in the sense of encompassing staff capacity (competences and number), equipment and organisational systems, seems to lead to better results, according to findings from the SWM, PiS, CDPF and QA-Cambodia. Staff numbers and investment support are not traditional domains of Sida support, but in the interventions studied, where these aspects have been addressed, results have been overly positive. On the whole, support that considers all elements needed to reach a certain CD goal will achieve better CD results.
- Adequate capacity in partner organisations to manage CD processes: where partner organisations have been able to adequately assign resources to the CD process, incorporate the support into their operations, actively contribute to the intervention and engage in monitoring progress and results, CD support appears to have yielded better results.

The evaluation team did not identify any factors external to the CD support hypothesis that had affected CD results negatively. As mentioned in Section 1.4.6, the evaluation team cannot exclude the potential effects of contextual factors – i.e. factors external to the intervention, Sida and cooperation partners – that have not been thoroughly assessed in this evaluation.

10 Conclusions

The first section in this chapter summarises key findings pertaining to the validity of the CD support hypothesis and to the characteristics and results of the Sida support to CD. Based on these, good practice of donor support to CD is formulated in the form of a generic ToC, presented in Section 10.2.

We start by recalling that the starting point of this evaluation was to test a hypothesis on support to CD that postulated that better CD results can be achieved when the donor support is adapted to context, legitimate and adequate for the complexity of the capacities targeted. The hypothesis further postulated that CD results are affected by the balance of pull and push approaches and the degree of results orientation of the intervention.

10.1 KEY FINDINGS

- *The Swedish support is an important contribution to CD in partner organisations*

According to the country studies, the Swedish support can make a *significant contribution to CD* in the target organisations. In the interventions studied this support targeted a variety of capacities necessary for partners to deliver their products and services, in a manner that was generally regarded as efficient. All the interventions led to the strengthening of individual knowledge and skills, as well as of methods, procedures and routines at the target organisations. To a lesser extent, interventions addressed partner organisations' administrative structures or infrastructure and equipment. Work environment and factors external to the partner organisations were the least common types of capacities addressed.

Some of the interventions reported *uneven results at the different levels of implementation*. This points to the importance of carefully adjusting the support to the needs and priorities of target organisations at all levels.

- *Sida-supported interventions had positive catalytic effects and can contribute to poverty reduction*

In the country-study interventions the *Swedish support has catalysed numerous positive developments* in the target organisations. These

resulted from increased awareness about a problem or means of dealing with it, greater willingness to seek new collaborations, and enhanced transparency of organisational processes. Small negative unintended effects were detected in some interventions.

In terms of the *contribution to poverty reduction*, the evaluation concludes that the Swedish support to CD was more effective when it directly or indirectly targeted people living in poverty; included specific poverty reduction objectives; and targeted sectors, institutions or geographical areas used by people living in poverty.

- *The Swedish support was generally adequate for the CD objectives of partner organisations*

The interventions studied demonstrated that *Sida operates in a diversity of contexts* and supports CD with different levels of thematic, geographical and organisational complexity. The country studies showed that *adequate technical expertise* and *the ability to engage with multiple stakeholders and to adapt to different contexts* are important factors for donor-supported interventions to attain CD results.

- *The role of change agents and champions can be clarified better*

The Sida-supported interventions frequently used individuals at the target organisations to support change processes, but *the role of change agents was seldom clarified or prepared for*. The use of champions was considered in only a few cases. A general observation of this evaluation is that the relevance of *using champions depends on the context and on the objectives of the CD support*.

- *The results of the Swedish support were affected by elite interests, the timing of the interventions and the absorptive capacity of partners*

The country studies showed the *importance of the Swedish support aligning with the interests of elites* – individuals or groups capable of influencing organisational change processes. The *importance of aligning with the timing of other related projects or reforms* has also been demonstrated.

In terms of the staging of change processes, an incremental approach to CD was necessary in cases where the initial capacity of the target organisation was low. More generally the rhythm of change needs to be *adjusted to the capacity of the partner to incorporate and make use of the new capacities*. Related to this, the country studies demonstrated the importance of donors and partners recognising that CD takes time. The time-frame of CD support should reflect this.

- *A clear vision of the results of the CD support strengthens joint efforts by Sida and partners*

Most interventions had a clear vision of the intended CD results, even if this varied between different components of some interventions. *A vision that is shared by Sida and its partners was seen to facilitate their aligning of efforts towards attaining CD results.*

- *Sida is a legitimate and welcome partner for supporting CD*

In the interventions studied, Sida was regarded as a legitimate partner, *capable of supporting change processes with adequate technical and managerial capacity.* The Sida approach of working through its cooperation partners enhanced ownership and engagement. Other factors seen to contribute to the legitimacy of the donor were the balance between donor and partner steering, mutual trust, the relevance of the donor support and the duration of the donor–partner relationship. In this regard, longer cooperations enhanced trust and legitimacy, in addition to allowing more time for capacities to be developed and incorporated at the target organisations.

- *An adequate understanding of the context is critical for Sida and its partners*

The evaluation showed that *Sida and its partners generally had a high level of understanding of the context* in which interventions take place. This was regarded as a critical aspect for elaborating objectives and approaches aligned with the interests and capacity of partners, and an ingredient for donor legitimacy. The country studies demonstrated the importance of a proper *understanding of context at all levels of the intervention*, including the political level if it has the potential to affect the intervention results. Assessing and using locally available capacity was seen to facilitate engagement with partner organisations and local stakeholder groups, as well as to strengthen the sustainability of interventions.

- *The adequate balance between pull and push approaches varied among Sida-supported interventions*

The evaluation assessed the effect on CD results of engaging end-users, oversight institutions or other external actors. Very few of the interventions studied engaged external actors directly, and none was seen to depart from a comprehensive analysis of their potential contribution to CD objectives. *Sida mostly supported processes from within the target organisations* – i.e. it adopted a push approach. The country

studies suggest that the engagement of external actors needs to be carefully assessed against the CD objectives, the characteristics of the target organisation and the products and services it delivers, the capacity of the external actors and the broader societal context.

- *The quality of the results management frameworks varied between Sida-supported interventions*

In line with the explicit results orientation of Swedish development cooperation, all the interventions studied included results frameworks developed during the design or the initial implementation phases. *The quality of these results frameworks varied considerably, as did the extent to which they were effectively used in the day-to-day management of CD processes.* None of the results frameworks studied included an exhaustive breakdown of outcomes, outputs, targets, activities and corresponding indicators and means of verification for all CD dimensions targeted by the intervention. Accordingly, the monitoring and reporting of each of these dimensions was not performed systematically.

The evaluation concludes that communicating and learning from results supports the elaboration of corrective actions by donor and partners. In this regard, it was observed that Sida-supported interventions generally *used results from previous evaluations* in the design of new interventions or new phases of the same intervention; and that *Sida made systematic use of information* produced in the interventions for their management, but that *the communication of results between Sida and its partners was sometimes insufficient.*

- *Support to CD yields better results if it is sensitive and adapted to context, legitimate and adequate, and if it is oriented towards results*

With respect to the CD support hypothesis, this evaluation has validated three of its four postulates, namely that better results will be achieved if support to CD is adequate for the complexity of the capacities to be developed; if donors and partners understand and respond to the context in which the intervention takes place; and if they share a focus on attaining results and apply sound RBM.

The evaluation could not validate the postulate regarding the relevance of balancing pull and push approaches, and concludes that this aspect is highly context-specific and needs to be considered case by case.

10.2 GOOD PRACTICE OF DONOR SUPPORT TO CAPACITY DEVELOPMENT

The testing of the hypothesis enabled the identification of elements that affected the results of Sida-funded interventions (see Chapters 8 and 9). These are elements of the CD support practice by Sida and partners that the evaluation team regards as more broadly applicable, thereby constituting a set of good practices of donor support to CD. In this section, this good practice is presented in the form of a generic ToC – i.e. a set of events and conditions framing support to CD in view of attaining the desired results.

The elements of this ToC may also be regarded as recommendations on how to approach the different steps and requirements of CD support interventions. In other words, the theory recommends a specific line of action for donor-supported CD to be as successful as possible. These recommendations of a more generic and technical nature are complemented by recommendations specific to the work of Sida given in Chapter 11.

10.2.1 Graphical representation of the theory of change

Based on the analytical model and the building blocks of the analytical model in the approach paper,⁵⁴ the proposed generic ToC is represented in Figure 19. With reference to the numbers indicated in the figure, each of the elements and their interlinkages are described in the next section.

It is tempting when developing a generic ToC such as this to include every conceivable element believed to affect progress towards results. The evaluation team has tried to avoid this temptation by concentrating on those elements that stood out as particularly relevant in the evaluation and which can inform practice of future CD support. These were highlighted in Section 10.1. The evaluation team has also focused on verifying the relevance of ToC elements mentioned in Section 6 of the approach paper (see Annex 3); those found to be relevant have been included in the generic ToC.

The proposed ToC is intentionally sparse on assumptions, as the evaluation team considered these relevant mostly in the context of specific interventions, and not in that of a generic theory. The evaluation team would nonetheless like to emphasise the importance of clearly mapping out assumptions when adapting this generic ToC to any particular development programme.

120 ⁵⁴ See Section 5 of the approach paper in Annex 3.

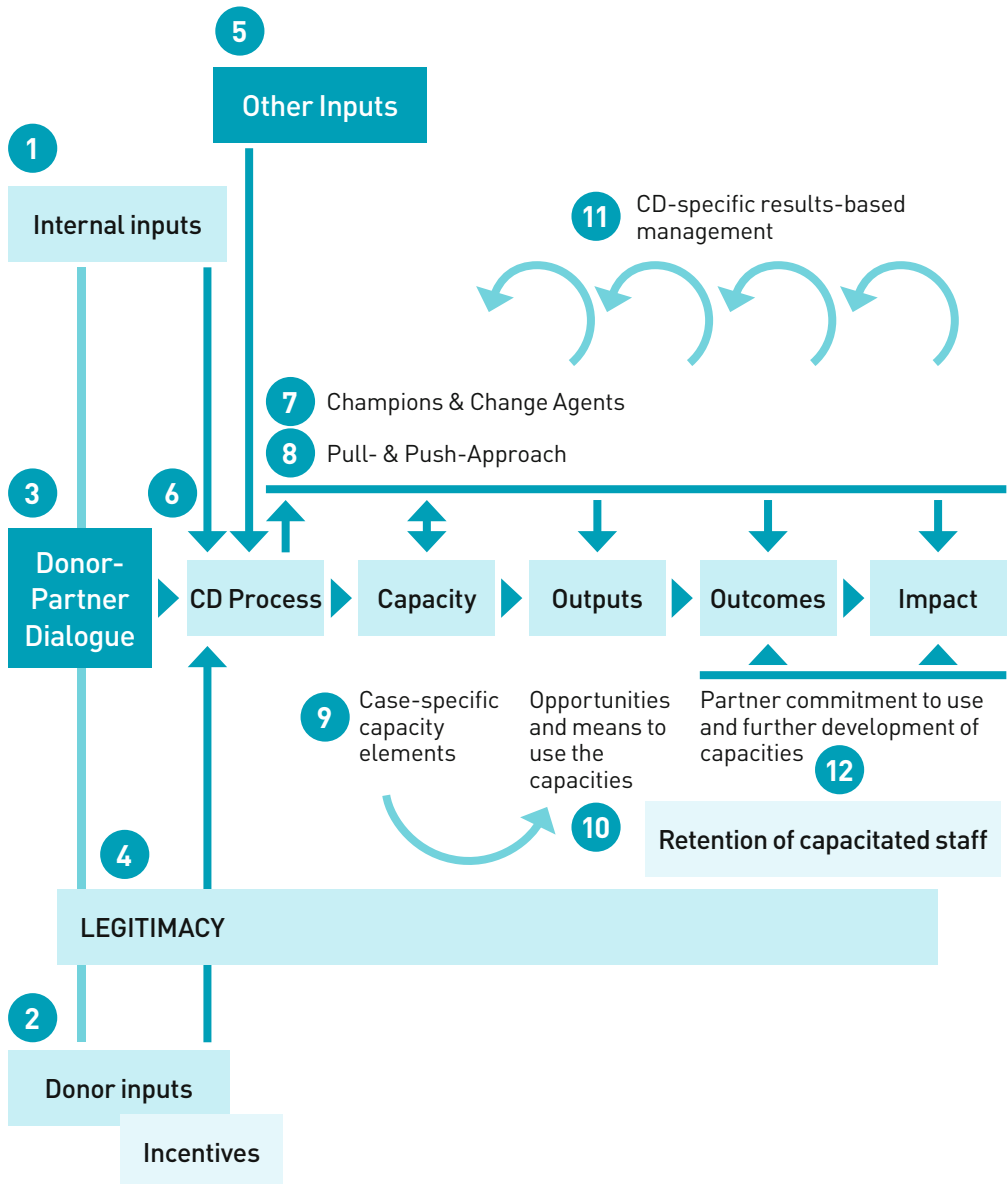


Figure 19. Representation of the proposed generic theory of change of donor support to capacity development. See Section 10.2.2 for a description.

10.2.2 Narrative of the theory of change

The evaluation team concurs with the view expressed in the approach paper that “organisations (and people, and systems) [are] open in the sense that they have permeable boundaries and constantly interact with their environment, influencing it and being influenced by it”. As this evaluation has amply shown, donor-financed interventions to support CD are themselves open processes: as the target organisations interact with their environment, so do those interventions, in a process that causes organisations, interventions and the external context to change. Understanding and working with this changing environment is an essential element that cuts across the entire ToC.

Also in line with the thinking in the approach paper, the Capacity-Outputs-Outcomes-Impacts sequence⁵⁵ is interpreted in this ToC as the logic for how people and organisations use their capacities, and not a representation of the progress of programme implementation. In programme implementation, outputs might not align with – and in fact even precede – changes in capacity of the individuals or organisations targeted.

A critical aspect unifying most of the elements on the left-hand side of the representation is the need to develop a well-substantiated understanding of the context in which the intervention is to take place, and of the needs and priorities – CD-related but not only – of the target organisation(s). To ensure the legitimacy of the donor support, and given the central role of in-country partners in Sida’s development cooperation efforts, it is also critical that all partners share this understanding.

1. *Ensure local ownership and relevance of CD processes.* The cooperation partners need to own the CD processes, and donor support should be clearly aligned with the policies, strategies, priorities and needs of the partner country and organisation(s). It is important that Sida engages with partners at different levels to ensure ownership at all levels targeted by the support. In-country partners need to be clear and in agreement about the capacity needs and priorities that the donor support should address. Although this is also a matter for dialogue with the donor, because donor support usually cannot address all needs, such agreement is necessary to ensure the understanding, satisfaction and support of all partners.

⁵⁵ See Section 5 of the approach paper in Annex 3.

As per Sida's current contribution management practice, the ability of partners to provide and manage their inputs ought to be demonstrated at an early stage. The capacity of the cooperation partner to manage its own CD processes must be analysed at this point, since that will influence how the CD support should be structured. For partners with low capacity, additional technical capacity may be provided through the programme.

2. *Ensure sufficient donor capacity for the CD processes.* The capacity of Sida to manage the CD support and to finance technical assistance of adequate standard needs to be assessed before committing to an intervention. Procedures for this element are comprehensive and largely in place at Sida, but capacities to manage CD, as well as sector-specific competence, need to be ensured for efficient support.
The assumption that adequate incentives for Sida and technical assistance teams to perform towards achieving CD results are in place ought to be verified at this stage.
3. *Establish an early dialogue between donor and partners.* To the extent possible, and with the aim of informing the design of the donor support, the interaction between donor and cooperation partners during programme preparation should encompass:
 - a dialogue on softer, often sensitive issues such as staff incentives, power relations, management traditions and elite interests;
 - a joint assessment at all relevant levels of capacity needs, priorities and strategies of the country and partner organisations, to identify the specific contribution of the donor intervention, its timing and duration. This aspect is of critical importance, in particular that key stakeholders and institutions at all levels be listened to in the assessment of needs and priorities;
 - an agreement on objectives and expected CD results that is understood and shared by Sida and partners; and
 - an assessment of the complexity of the capacities to be developed, emphasising the capacity dimensions that are necessary to address, to enable the adequate dimensioning of the effort by Sida and partners.

4. *Build up and maintain donor legitimacy throughout the entire CD process.* The desired result of the interaction between donor and partners is the award of legitimacy to the donor to provide the required CD support. Legitimacy is necessary at the outset but should not be regarded as a given; legitimacy is strengthened or weakened, renewed or removed over the course of the donor support depending on the dynamic relations between donor and partners.

5. *Assess the use of other inputs from the partner country.* Inputs other than those of the donor and the target organisation(s) may be brought in for the design and/or implementation of the support. The availability of such inputs should be assessed in the preparatory stages.
The use of other in-country inputs is a further opportunity to develop capacity in the partner country that can sustain CD efforts beyond the duration of the donor support.

6. *Design CD processes in line with the needs and characteristics of the target organisation.* The choice and design of CD processes must be determined by the specific context of the partner country and organisation(s), the existing level of capacity and the specific CD objectives agreed by Sida and its partners. Four important features included in this generic ToC are that:
 - donor-supported CD processes need to be flexible and able to adapt to changes in context and to the dynamics of the support. The latter is informed by monitoring and reporting of the intervention;
 - donor-supported CD processes must be relevant for and align with internal processes at the target organisation(s), to maximise opportunities to make use of and further develop the capacities introduced by the intervention;
 - linked to the previous point, donor and partners need to identify and engage the person(s) responsible for the application of the new capacities in the partner organisation(s); and
 - based on an assessment of partner organisations' capacity to manage CD processes, ways of strengthening this capacity should be considered in the intervention design.

7. *Assess the use of change agents and champions.* Change agents and champions may be used throughout or during specific parts of

the intervention, depending on an assessment of their availability and capacity to support the change process. Change agents, in particular, may need to be capacitated to subsequently perform their role in supporting the delivery of outputs, outcomes and impacts.

The long-term engagement of change agents and champions beyond the duration of the donor support should be regarded as a means of strengthening the sustainability of CD results.

8. *Assess the relevance and feasibility of combining pull and push approaches.*

Informed by the pre-intervention dialogue between donor and partners and the specific context and capacity needs analysis, the benefits and requirements of a balanced pull and push approach ought to be considered in decisions regarding the CD processes, bearing in mind that:

- the legitimacy of the donor support might be affected by the engagement of external (demand-side) partners; and
- established interests, notably of elites, might be threatened by the engagement of demand-side partners (e.g. oversight institutions).

As with change agents and champions, demand-side partners might be used throughout or only in specific parts of the intervention.

9. *Develop a holistic CD process based on a careful capacity needs assessment.*

The capacity elements to develop are case-specific, and their choice should be informed by a careful assessment of existing and missing capacities at the targeted organisation(s). As a general observation, all CD should be holistic and systematic: all dimensions of capacity ought to be assessed and addressed together to identify their mutual dependencies (individual skills and knowledge, systems, structure, work environment, equipment and infrastructure, and external factors).

10. *Identify and explore opportunities to use the new capacities.*

Opportunities and means for individuals to make use of the capacities developed by the donor support need to be ensured so that outputs – and subsequently outcomes and impacts – can be delivered.

Integrating the donor support with internal processes at the partner organisation(s) is critical for that to happen. It is assumed

that the targets of the donor support – for example, trained staff, improved systems, new equipment – remain at the partner organisation(s); otherwise, the results of the donor effort may be compromised.

11. *Establish an effective system for monitoring and evaluating the CD process and results.* A system for following up, reporting on and periodically evaluating achievements relative to the developed capacities should be put in place to: (i) support the shared understanding of donor and partners of the achievements of the intervention; and (ii) enable adjustments of effort and focus toward achieving the agreed goals. An adequate breakdown of the different capacity dimensions in this system is desirable to enable targeted adjustments to the CD process.

12. *Ensure partner support to the CD process once the donor-supported intervention ends.* Evidence of achievements potentially supports the commitment of partners to the CD process once the donor support comes to its end. Exit strategies should be devised jointly with the partner organisation(s) in the early phases of the donor support so that the capacities to continue the CD process are addressed adequately and in a timely manner. The possibilities and benefits of imposing obligations on the target organisation(s) extending beyond the end of the intervention need to be considered jointly with the partner(s) (e.g. regarding continued reporting, maintenance of equipment or internal CD management).

11 Recommendations

Informed by the findings of this evaluation, recommendations on how Sida could move ahead with its support to CD are presented in this chapter. These recommendations are intended to clarify and strengthen the position of CD in Swedish development cooperation in general and the work of Sida in particular. Section 11.1 highlights some key aspects of how CD has been dealt with in Swedish cooperation (see Chapter 2), which motivate the recommendations presented in Section 11.2.

11.1 CAPACITY DEVELOPMENT IN SWEDISH AID – KEY POINTS

Based on interviews with Sida staff and the review of Sida documents for contribution management, it appears that CD is nowadays regarded more as a method than an end of Swedish cooperation. The historical perspective of CD in Chapter 2 also suggests that it has lost its former prominence and centrality in Sida's work and is now addressed mostly at the level of individual programmes and projects.

It was also seen that in the current instruments for managing Sida interventions – the Rule for Managing Contributions and the TRAC help texts – the understanding of CD is reduced compared to the OECD-DAC definition, which Sida has formally endorsed. In those instruments, capacity is treated primarily as a precondition for the delivery of the results of interventions, with emphasis on the capacity for internal steering and control.

Observations made in this evaluation corroborate the above picture of the generally weak position of CD, noticeable, for example, in the limited use of the 2011 Guidance, the limited degree of specification of CD results in the results frameworks of most interventions, and in the need for strengthening the knowledge of CD among the staff of Sida and partners. At the same time, the objectives of the Swedish aid policy rest on strengthening institutional capacity in partner countries, something that is only implicitly acknowledged in that policy.

Based on the above, the evaluation team concludes that institutional CD should be reconsidered in Swedish development cooperation. It should be given the position that it merits and that is required for Swedish aid to achieve its stated goals. The ongoing revision of the Swedish aid policy constitutes an opportunity to raise the importance of CD and make this hidden cornerstone visible again in Swedish development cooperation.

11.2 STRENGTHENING SIDA'S WORK WITH CAPACITY DEVELOPMENT

The evaluation team is of the view that Sida's capacity to work with institutional CD must be strengthened. Drawing from the findings of this evaluation, the following measures are recommended to achieve this.

On a structural level it is recommended to:

1. *Highlight CD in the new Swedish aid policy.* CD is not a separate objective of, or dealt with explicitly, in the current Swedish aid policy framework. In its dialogue with the Swedish government, Sida should highlight the importance of CD in the new Swedish development cooperation policies, insisting on the explicit inclusion of CD as both a means and an end of Swedish aid.
2. *Make CD a particular Sida focus area.* Despite the recognition of CD as an important cross-cutting theme, it has lost prominence relative to other domains of Sida's work. CD should be promoted within Sida to the level of a fifth focus area or a comparable thematic hierarchy,⁵⁶ with the aims of expanding the scope of CD at all levels in line with the OECD-DAC definition and raising the priority of the concept within Swedish development cooperation and Sida.
3. *Create a place for CD in the Sida organisation.* Sida does not have a dedicated structure to oversee and develop CD-related work in Swedish development cooperation. A place in the internal

⁵⁶ Focus areas are Sida internal structures headed by a lead policy advisor, the purpose of which consists in increasing knowledge, visibility and impact within priority thematic areas. Four focus areas exist today: gender equality, environment and climate, democracy and human rights, and health.

organisation of Sida should be created to develop methods and guidelines for CD, to promote and follow up CD within all of Sida's work. This structure should be awarded the responsibility and the authority to support and mainstream CD across the entire organisation. This could be done by establishing a lead policy advisor who supports both Sida headquarters and embassy staff. The need to establish focal points at the embassies should be analysed.

4. *Develop a strategy for CD awareness and knowledge.* Sida staff responsible for managing support to CD are often not sufficiently skilled to work with the different dimensions of CD in the different phases of the contributions. To integrate CD in all Sida support, there is a need to increase the awareness and knowledge of CD among Sida staff in Sweden and abroad. A specific strategy for awareness and knowledge creation should be developed. The strategy could include raising the topic at the Sida management days, adding CD to training courses for new staff, and providing specific training on CD for all staff. The latter could be combined with training in other topics such as RBM.
5. *Include CD in National Cooperation Strategies.* CD is not explicitly included or consistently dealt with in all bilateral cooperation strategies. Analysis of institutional CD needs and the definition of objectives and strategies for institutional CD should be included in the Sida proposal for the Swedish government's strategy for each partner country ("strategiunderlag"). It is recommended that CD needs be analysed and CD goals defined for national focus areas (sectors), as well as for key national partners and interventions. For the operationalisation of each strategy, i.e. the planning of the intervention portfolio at country level, Sida should elaborate specific measures for achieving the proposed CD goals and processes for their follow-up.

On a more operational level it is recommended to:

6. *Make CD assessments compulsory for Swedish contributions.* Assessments of existing and necessary capacities of cooperation partners are not always comprehensive or adequately used in the design of interventions. The design of all interventions should include an assessment of the need for CD in terms of both the development

and the maintenance of capacities. The assessments should be the responsibility of the national cooperation partners, if necessary with Sida's participation. Sida should suggest the criteria to be assessed, and specific consultants could be financed to support this assessment. The result of the assessment should be translated into specific institutional CD objectives and be part of the result matrix for the intervention.

7. *Appraise CD assessments, objectives and results frameworks.* Current appraisal procedures focus almost exclusively on the partners' capacity for managing the Swedish contribution, and not for delivering better products and services. Sida's appraisals should include an analysis of the CD assessments made, the CD objectives in the results framework, as well as the consistency and adequacy of proposed actions to achieve the intended CD goals. These analyses must go beyond the current focus on partners' capacity to manage and deliver within the Sida-supported intervention, and include the partners' broader capacity needs and objectives.
8. *Monitor and evaluate CD support specifically.* The M&E of support to CD – notably in terms of the different types of capacity targeted by interventions and using CD-specific indicators and means of verification – is seldom comprehensive and systematic. CD support should be assessed specifically as part of regular M&E and included in annual work plans and reports. This concerns external M&E, as well as Sida's internal processes of Performance Monitoring and Contribution Completion.
9. *Revise the Sida Guidance on CD based on this evaluation.* The 2011 Sida Guidance on CD is of limited usefulness to Sida and partners' staff and provides little practical guidance on how to work with CD in the different phases of contributions. Drawing on the findings of the Joint Scandinavian Evaluation of Support to CD, the revised Guidance should include a general section covering – with examples – how each of the steps in a systematic CD could be undertaken. There is a need for a solid needs assessment/situation analysis that is fully understood by both parties, followed by a comprehensive RBM programme. The general section could be followed by two separate sections: one for

cooperation partners and consultants on how to conduct assessment of CD needs and define objectives and actions; and one for Sida programme officers on appraisal and monitoring of CD.

10. *Assess the need for additional resources to improve CD work.* There are recurrent concerns about the heavy workload of Sida staff both at headquarters and abroad. Implementing the above recommendations will constitute an additional burden, and might not be possible without additional financial and human resources. Resources must be sufficient to hold a quality dialogue with partners, to have time to monitor and follow up, to devise meaningful corrective actions and to learn from experience. Sida should assess the need for such resources and, if deemed insufficient, raise the need for additional resources to improve the effectiveness of Swedish support to CD in its dialogue with the Swedish government.

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Annex 2: Terms of Reference

1 Introduction

Development assistance has always had the ambition of delivering sustainable results, and, by implication, foster endogenous capacities that eventually would make aid redundant. Skills training and technical assistance delivered inside individual organisations have been among the main inputs expected to create capacities that could deliver sustainable outcomes.

Numerous reviews and evaluations have indicated that expectations did not match reality.⁵⁷ Attention has also been drawn to the potential negative effects of excessive reliance on technical assistance and training, such as cost, distortions in local labour markets, disruptions in formal hierarchies, weak and twisted accountability mechanisms, and distorted incentives through e.g. salary supplements and workshop allowances.

Even if the term “technical assistance” is still in use, capacity development (CD) is today seen as a much more comprehensive process in theory and development practice. The mainstream view⁵⁸ has been that capacity development is first and foremost an endogenous process where outsiders can at best contribute, but they can normally not claim attribution. The drivers and constraints to capacity development include incentives and performance in the specific context, as well as the interests and priorities of key stakeholders, which shape the arena for support to CD. However, even if this is a dominant message in evaluations as well as donor guidance, it still seems that these insights have not always been transformed into practice.

⁵⁷ E.g. Arndt, C. Technical Co-operation, in *Foreign Aid and Development. Lessons Learnt and Directions for the Future*. Finn Tarp and Peter Hjertholm (eds). London: Routledge; 2000.

⁵⁸ See DAC. *The Challenge of Capacity Development: Working Towards Good Practice*. Paris, OECD; 2006. See also the five “Perspective notes on Capacity Development” prepared by the OECD/DAC ahead of the 2011 Busan High-Level Forum (<http://www.oecd.org/dac/governance-development/capacitydevelopmentourkeypublicationsanddocuments.htm>) as well as the “Cairo-consensus on Capacity Development” from March 2011 (available on same webpage).

In parallel with the broadened view on capacity development, donors have over the last decades insisted on results-based approaches, also in the area of CD. Despite the focus on results, it has been difficult to provide hard evidence as to whether capacity development support actually contributes to strengthened endogenous capacities and performance. This also means that it has been difficult to verify the mainstream view that more recent forms of support to capacity development – contextually well aligned, results-oriented approaches – are likely to be more effective.

Over the last decade, we have also seen emerging interest in interventions that go beyond the actual institutions expected to improve their capacity. The assumption is that the dominant approach of working from the inside in public sector organisations (“supply side focus”) may be insufficient or even ineffective if not also working on political, legal and other external factors, as well as strengthening the demand for accountability from citizens. This “demand side approach”, while heralded in theory, has not yet demonstrated its effectiveness through evidence-based evaluations.

Another key issue in capacity development is the question of who sets the priorities with regard to the more specific rationale and objectives for capacity development. In line with the Paris agenda, one might expect that the centre of attention would be on strengthening general capacities within given sectors. Nonetheless, efforts to support capacity development may target the capacity of institutions to improve delivery of aid-financed services specifically, or may address aspects of capacity deemed to be of particular importance to donor priorities, rather than aiming at more general capacity development. A distinction between ‘aid effectiveness’ and ‘development effectiveness’ may be relevant here.⁵⁹

Throughout these different developments in the theory and practice of capacity development, an underlying key issue has been the broad range of relations between donors and partners. This touches issues such as characteristics of the relationship between partners with regard to trust, mutual respect and accountability, the legitimacy of donor interventions, the actual roles each partner play and the incentives for both partners to pay attention to the often

⁵⁹ Stern, ED et al. *Thematic Study on the Paris Declaration, Aid Effectiveness and Development Effectiveness*. Ministry of Foreign Affairs of Denmark, Evaluation of the Paris Declaration 2008.

delicate and cumbersome processes of change, and the ‘ownership’ by each partner to the processes and results.

This Joint Scandinavian Evaluation aims to cast light on the issues above. It will consist of three separate, but closely coordinated evaluations covering support to capacity development by Denmark, Norway and Sweden, respectively. These Terms of Reference lays out the evaluation commissioned by Sida and covers Sweden’s support to capacity development. Similar Terms of References, with some agency-specific amendments, have been developed for parallel evaluations commissioned by Danida and Norad. The three evaluations will respond to the same questions, while each agency may prioritise to look into additional areas of particular high interest. The findings across the three evaluations will be presented in a Synthesis Report based on the individual agency reports.

While focus is on the support to CD from the three agencies, the evaluation is based on the recognition that because capacity development is first and foremost an endogenous process, it is not meaningful to look at what the agencies are doing without seeing this in the wider picture of the efforts of the partner institutions and the context within which this takes place. That may point to recommendations about when donor engagement in capacity development in partner institutions is appropriate and legitimate, and under which circumstances donor support to capacity development is likely to be effective.

The field of capacity development is characterised by broadly defined concepts, reflecting the heterogeneity of the field. The OECD/DAC’s definition from 2006⁶⁰ will serve this evaluation: “Capacity is understood as the ability of people, organizations and society as a whole to manage their affairs successfully. ... ‘Capacity development’ is understood as the process whereby people, organizations and society as a whole unleash, strengthen, create, adapt and maintain capacity over time.” In this evaluation, the focus will be on capacity development for organisations – acknowledging that both individual and system capacities may be a part of what is required to make an organisation (or a group of organisations) perform better.

As background notes to the evaluation the Scandinavian agencies have commissioned three studies that will inform the evaluation:⁶¹

⁶⁰ DAC (2006).

⁶¹ See: <http://www.sida.se/English/About-us/How-we-operate/Sida-Evaluation/Ongoing-evaluations/Capacity-development/>.

- Literature Review for the Joint Evaluation on Capacity Development 5
- Methodological approaches to evaluate support to capacity development 6
- Annex I: Approach Paper

The evaluation will be guided by the Approach Paper. The Approach Paper expands on the issues mentioned above and lays out an analytical model and generic theory of change behind capacity development support, to enable a shared approach and methodology findings across the three evaluations.

The primary intended users and audience for this evaluation are management and staff within Sida, as well as Danida and Norad. Intended secondary users are other aid agencies, ministries of foreign affairs, and various intermediaries involved in development cooperation including multilateral institutions and governments and institutions in partner countries. Outcomes of the evaluation will also be communicated to the general public and political systems for accountability purposes.

2 Evaluation purpose

The purpose of the evaluation is to improve decision-making and strategy development regarding support to capacity development in developing countries. The evaluation will in particular assess the *relevance* and *effectiveness* of the Scandinavian agencies' support to capacity development, and will address issues of efficiency. It may also generate knowledge about the sustainability and impact of the support to capacity development.

This purpose has both learning and accountability elements.

With regard to learning, the evaluation aims to produce knowledge that enables policy, strategy and decision makers to design good strategies for support to capacity development and to review, adjust or discard planned and ongoing interventions based on previous experience with support to capacity development.

With regard to accountability, the evaluation aims at assessing results of support to capacity development and to what degree it represents value for money in terms of both relevance, effectiveness and efficiency.

By contributing to a better understanding of how to manage for results in a relevant and adequate manner, the evaluation aims at

improving both learning and accountability in future support to capacity development.

3 Focus areas

The evaluation will look particularly at some focus areas seen as critical dimensions of capacity, capacity development and support to capacity development. They are briefly described below, and further explained in the Approach Paper:

- i. The relevance and opportunity of a “best fit” approach for CD support well adapted to specific intra- and inter-institutional dynamics and the wider context.
- ii. Within the “best fit” dimension, the appropriateness and the legitimacy of external (donor) involvement in different dimensions of capacity development, and whether some processes may be so complex and demanding that the ability of donors to add value is limited.
- iii. The merits of looking beyond the supply side of public sector institutions to foster broader accountability relations or other types of collaboration with e.g. civil society, private sector, media or oversight institutions.
- iv. How a results-focused approach to aid for capacity development can serve to improve learning and accountability among aid agencies in the future.

4 Scope and delimitations

The evaluation addresses aid that has an *explicit* intention to support institutional capacity development in the recipient country, be it as a primary objective or as integrated components of strategies and programmes having other primary objectives. This may include capacity development pursued with targeted inputs provided to specific institutions as well as interventions addressing factors external to the institution (for instance, by stimulating accountability via non-governmental institutions) and capacity development expected to happen as a result of the way support is given (i.e. budget support).

The evaluation will focus on support to public sector institutions. Interventions addressing private and non-profit institutions may be included if directly relevant to public sector capacity or if there are other reasons to assume that examining those interventions can shed light on key aspects of support to capacity development (for example, by demonstrating promising practices).

Selection criteria for which interventions to study in-depth will be decided early in the inception phase based on the portfolio screening described in section 6 (approach and methodology) and Annex II.

When assessing results, this evaluation will focus on the achievement of planned outcomes of donor support, as well as to which degree this correlates with actual capacity development in more general terms, acknowledging that the latter depends primarily on other factors than aid.

5 Evaluation questions

The evaluation will be designed to respond to the following questions, based on the study of selected interventions:

1. How can a generic theory of change for support to capacity development be formulated that would enhance the effectiveness of support to capacity development?
2. What is the relevance of the strategies and initiatives for support to capacity development? E.g. do they primarily aim at improving capacity to manage aid programmes, versus aiming at more general improvement of capacity in a sector or an institution?
3. To what degree are the capacities to manage capacity development processes— e.g. change management competencies, incentives, procedures, guidance, management – effectively in place and adequate among the donor agencies and partner institutions?
4. How have strategies and interventions been designed to fit with context-specific factors such as specific institutional dynamics or the social, cultural, political and legal environment, and to contribute to influencing factors external to the institution(s), such as demand and accountability mechanisms? To what degree are strategies based on evidence on how support to capacity development has worked elsewhere?
5. How do representatives of the partner institutions and/or other stakeholders in partner countries perceive the donors' role in capacity development, and what do they think is the appropriate role of donors in future capacity development?
6. How has results-orientation and results-based management approaches been applied in CD support, and how have they contributed to learning and improved effectiveness?
7. To what degree have interventions achieved the planned results at outcomes level, and to what degree is there a correlation

- between the interventions, and observed improvements in capacity of the partner institutions?
8. What are the possible unintended effects (positive and negative) of support to capacity development?
 9. To what degree can one conclude that interventions to support capacity development have been effective and represent good use of resources (value for money), compared to possible other ways of supporting the same sectors or institutions(s)?
 10. What characterises support to capacity development that is relatively more successful versus strategies and interventions that are relatively less successful?
 11. Under which circumstances, for which aspects of capacity and for which specific inputs may donor support to capacity development be appropriate and effective? Are there situations where the agencies should refrain from being involved in capacity development, and/or modalities and approaches they should no longer apply?

Sida specific evaluation questions:

12. To what degree is Sida following its guidelines to CD support?
13. Are the current CD approaches an effective way to reach the poor (directly and/or indirectly)?
14. What are the CD lessons learnt which Sida could use to move forward working with new actors in development?
15. Given last decade's focus on results-based management, how could Sida work with clearer definitions and reporting on results in CD?

6 Approach and methodology

The nature of the evaluation object poses some challenges with regard to methodology including data issues including questions around whether certain indicators precisely reflect key aspects of capacity development. There are also limitations to the degree to which changes can be attributed to aid; an enormous heterogeneity of aid supported interventions, as well as heterogeneity of organisations and country contexts.

The evaluation will apply an approach that optimises the likelihood of producing evidence-based assessments and that is realistic given the limitations identified above as well as time and resource constraints. The methodological approach is informed by the

methodology study developed for the purpose of this evaluation⁶² and based on the conceptual and analytical models laid out in the attached Approach Paper.

The inception phase will include a preliminary screening of a larger sample of capacity development interventions,⁶³ followed by desk-based study of a smaller sample. This will result in a standardised set of data collected for each intervention. The aim is both to inform the remaining phases of the evaluation, and to compile data from all three Scandinavian evaluations to enable future statistical analysis beyond the assignment laid out in this Terms of Reference. The details for this phase are described in Annex II.

The main evaluation phase will include three country-studies. These will encompass Sweden's support to capacity development over a given time period in the three selected countries. Each country visit will comprise about six to nine work weeks combined for all relevant team members.⁶⁴ The evaluation team will propose the specific design of the country-studies, guided by the Approach Paper (Annex I) and methodology study.⁶⁵

Both the inception phase and the main evaluation phase will be coordinated with the other two evaluation teams and the three Scandinavian clients. Sida will have the final word in approving the methodological approach.

When analysing data, the evaluation will apply theory/-ies of change as one analytical approach. The generic analytical model and specific theory of change outlined in the Approach Paper should be used as a starting point unless an alternative proposed by the consultants has been accepted. The theory of change is (as all theories of change) a hypothesis, and the evaluation aims to test to what degree the interventions under evaluation fit with this hypothesis, followed by suggestions for revised or alternative formulations of

⁶² See: <http://www.sida.se/English/About-us/How-we-operate/Sida-Evaluation/Ongoing-evaluations/Capacity-development/>.

⁶³ Sida will provide a list of interventions to be included in the portfolio screening, including a collection of initial documentation to be reviewed.

⁶⁴ Those six to nine weeks will include all work by team members including senior national experts to be recruited after countries have been selected, but excluding junior assistants or other national support. Sida, however, encourage the participation of junior assistants/support within the country-study teams in order to support national evaluation capacity development.

⁶⁵ See: <http://www.sida.se/English/About-us/How-we-operate/Sida-Evaluation/Ongoing-evaluations/Capacity-development/>.

a theory of change that may serve to explain the findings and provide directions for future CD support.

When assessing results of support to capacity development, focus will be on to what degree programmes achieve their owned planned outcomes, as well as a broader view on to what degree they are likely to have contributed to improved capacity and/or better performance of the institution.

Due to the nature of support to capacity building, where aid interacts with many other internal and external factors that are likely to be stronger determinants for capacity development, in most cases the evaluation will not be able to conclude on attribution. The contribution of aid to observed capacity improvements should be assessed based on the in-depth and country case studies of selected interventions, using theories of change or other analytical approaches.

Capacity can be assessed by looking at organisational capacity parameters (e.g. enhanced systems, processes, skills, management, internal relations etc.) as well as actual performance of the organisation, whether in terms of quality, quantity, cost or relevance or a combination of these. Due to the diversity of the evaluation object, improvements in capacity must primarily be measured against improvement against indicators specific to the interventions and institutions, rather than standardised indicators.

The evaluation team may, alternatively, propose an approach that responds to the purpose in this Terms of Reference in other ways than those laid out above and in the Approach Paper (except for the preliminary portfolio screening and review), demonstrating comparable rigor and ability to address the evaluation questions and focus areas. If it does, it should, to the extent feasible, frame its proposal in ways that are compatible with concepts and models of the Approach Paper, to enable coordination and comparison with the evaluations in the other Scandinavian countries.

7 Organisation

The evaluation shall be managed by Sida, which will have the final word in approval of the methodological approach and deliverables. Sida-financed evaluations should be utilisation-focused, meaning that they are designed and implemented along with the intended users and that intended use is at the centre of the evaluation process.

The mechanism for consultation and quality control will be threefold:

- i. The evaluation Steering Group consisting of representatives from Danida, Norad and Sida. This group is the decision making body in regards to all aspects of the approach and methodology which will cover the joint elements of the evaluation.
- ii. An Advisory Group composed of representatives from partner countries and donor representatives. The role of the group is to guide and provide feedback to the three parallel evaluations during the inception phase, draft and final reports.
- iii. A Sida Reference Group. This group will consist of representatives from Sida with the role to give feedback and advice on the agency specific parts of the evaluation (see the Sida specific evaluation questions, section 5).

Representatives of each evaluation team will meet with the Steering Group shortly after contract signing, at the end of the inception phase, and after country visits, at dates and venues to be decided by the Steering Group. The purpose of the meetings are to share findings and ideas and to discuss key issues to lay the foundation for a Steering Group decision on the way forward, and to coordinate the work between evaluation teams.⁶⁶ The communication between the evaluation team and the advisory group will likely be via email. Each team is accountable only to its contracting authority, which will clarify any issues relating to discussions and decisions in the Steering Group and other forums and how to follow-up.

The consultant, within the management framework defined by the respective evaluation department, will be responsible for the implementation of the evaluation in line with the principles of independence and impartiality. The consultants shall in their proposal also specify how quality assurance will be handled by them.

The evaluation will be organised into four work phases; (i) inception phase; (ii) country visits; (iii) analysis and report writing; and (iv) dissemination. The main parts will be carried out over the period October 2014 – June 2015, while dissemination is planned for fall 2015. Each phase is associated with certain deliverables, specified below.

⁶⁶ The meetings will be held in the different Scandinavian capitals in turn and the teams should budget for one travel to each of the capitals for these meetings.

8 Deliverables and time frame

Unless otherwise agreed during the inception phase, the evaluation will involve the following deliverables, including written products as well as presentations and participation in relevant meetings. All reports shall be written in English and adhere to the OECD/DAC quality standards for evaluation.

a) *Preliminary portfolio screening note*

The team shall deliver a draft, preliminary note from the portfolio screening (Annex II), including identification of samples for the desk-based review and a preliminary indication of countries that seem appropriate for the country-studies.

b) *Inception report*

The team shall deliver an inception report not exceeding 30 pages, excluding annexes, and including, but not necessarily limited to:

- A brief historical background of the agency's work with capacity development and its current approach,
- The results of the portfolio screening and the desk-based review (see Annex II),
- Elaboration on the evaluation approach and evaluation questions and how to respond, including a strategy for all necessary data collection and analysis, and a discussion on limitations,
- Proposed selection and methodological approach for the country-studies,
- A detailed work programme,
- A draft Table of Contents for the main evaluation report,
- A draft communication plan.

c) *Country-studies*

Findings and conclusions from the country-studies shall be presented separately as stand-alone working papers, not exceeding 10 pages excluding annexes. The main contents shall be discussed at wrap-up meetings in each of the countries visited, then revised and submitted to Sida as draft country reports. Each country visit shall deliver at least ten JPEG pictures illustrating Sida's support to CD. The pictures may, for example,

illustrate stakeholders (including beneficiaries), Sida specific solutions, or the bigger picture.

The team leaders will meet with the three agencies in a joint meeting in a Scandinavian capital city to present and discuss the country reports followed by a discussion on commonalities across the country-studies and possible common or joint approaches of relevance to the remaining data collection and analysis. The presentation may include an outreach event to invited participants by the Scandinavian agencies.

d) *Main reports*

The main report shall synthesise results from the inception phase including the portfolio screening, the desk-based review, as well as the country-studies.⁶⁷ Apart from responding to all parts of this ToR and requirements further detailed during the inception phase, it shall to the greatest possible extent present actionable recommendations.

The report shall not exceed 60 pages excluding annexes, and shall include an executive summary, draft acknowledgment as well as a draft back cover text.

An evaluation brief shall be delivered based on the findings from the final report. The evaluation brief shall follow Sida's guidelines for evaluation briefs.⁶⁸

In addition, the team leader shall contribute to the process of producing a synthesis report for the three parallel evaluations carried out by Danida, Norad and Sida. This will include working in close collaboration with the two other team leaders as well as an assigned consultant responsible to coordinate and finalise the synthesis report. It is anticipated that each team leader must allocate one week of work for the synthesis report.

e) *Dissemination of results*

The team leaders shall present the final evaluation report and the synthesis reports at a workshop in a European capital city organised by the Steering Group, as well as a workshop in Stockholm during fall 2015.

⁶⁷ Also see Annex II for reporting guidelines for the portfolio screening and desk-based review.

⁶⁸ Published Sida evaluation briefs can be found at: <http://www.sida.se/English/About-us/How-we-operate/Sida-Evaluation/Evaluation-briefs1/>.

Table 11. Tentative time plan

Time	Activity
Medio September 2014	Signing of contract
Ultimo September	Start-up workshop in a Scandinavian capital to agree on a common way forward as well as the methodology for the joint parts of the evaluation.
15 October	Preliminary portfolio screening note with identification of samples for desk studies and selection of country-studies
15 November	Draft inception report
15 December	Final inception report
Primo December	Inception workshop in a Scandinavian capital to conclude on key issues regarding methodology and present initial findings from the portfolio screening.
Medio December 2014 – March 2015	Country visits
20 March, 2015	Draft country working papers
March/April	Workshop to discuss findings from country visits in a Scandinavian capital city.
20 April	Final country working papers
8 May	Draft evaluation report
29 May	Final evaluation report
June	Provision of inputs to evaluation Synthesis report
30 June	Draft synthesis report
30 August	Final synthesis report
Fall 2015	Two dissemination events: (i) in a European capital; and (ii) in Stockholm.

9 Resources

As per invitation to tender: “förfrågningsunderlag: upphandling 13/001660 Evaluation of Capacity Development”.

10 Team qualifications

As per invitation to tender: “förfrågningsunderlag: upphandling 13/001660 Evaluation of Capacity Development.

11 Annexes

Approach Paper (Note: Annex 2 in this report)

Specification of methodology (Note: not included in this report)

Annex 3: The Approach Paper with the Hypothesis about Donor Support to Capacity Development

Developed by Nils Boesen for the Joint Scandinavian Evaluation of Support to Capacity Development

1 Purpose and scope of the approach paper

This paper outlines key parameters of the joint approach to the evaluations of support to capacity development organized as parallel evaluations commissioned by Danida, Norad and Sida. The purpose of the paper is to guide the evaluation teams in their preparation of the on the overall approach; and to enable a constructive dialogue between the evaluators and the contracting agencies during the evaluation based on a shared general framework.

While the approach paper should guide the evaluations, it is expected and welcomed that evaluation teams suggest modifications and additions, which would add to the insights and robustness of the evaluations.

The Terms of Reference prepared by Danida, Norad and Sida, respectively, define the evaluation object, the scope and delimitations, specific deliverables and timelines, process and contractual aspects. The ToR take precedence over this paper.

After a short summary overview the approach paper outlines:

- A brief overview of the development of thinking of and approaches to capacity development (CD) among donors over the last decades;
- A basic analytical model and conceptualization of capacity, capacity development (CD) and support to CD;
- The key elements of a theory of change about CD that the evaluations will test;
- Elaboration of the four main focus areas of the evaluation(s);
- A brief conclusion.

The approach paper is based on ‘mainstream’ literature on aid to support capacity development, guidance material, recent evaluations and meta-syntheses, including the literature review (Christoplos, Hedquist et al. 2014) made for this evaluation. Particular reference is

made to the series of perspective notes published by OECD in 2011 ahead of the Busan meeting.⁶⁹

2 Summary overview

The Scandinavian Evaluation of Capacity Development consists of three separate, parallel evaluations commissioned by Danida, Norad and SIDA, respectively. It is the desire to be able to draw conclusions across the evaluations of each agency, while each agency will also prioritise particular high-interest areas. A shared overall objective is to enable findings across the three evaluations, hence the joint overall approach outlined in this paper.

The evaluation will focus on interventions that have an *explicit* intention to support CD. It does not matter whether this intention is pursued with targeted inputs provided by the agencies (such as technical advisers, twinning, training etc.) or whether it is expected to happen by efforts of the partners or as an effect of the way support is given (e.g. (sector) budget support justified with its potential to support capacity development).

The evaluation will focus on a variety of modalities deemed significant by the respective agencies, from country/sector based support to regional/global programmes; as well as on a variety of instruments, e.g. twinning/peer based approaches, training, technical assistance and combinations of these and other possible means.

The focus of the evaluation is on capacity of the public sector, but that would include any interventions addressing factors and institutions outside the relevant institutions, if relevant for capacity development in public sector.

As specified in the Terms of Reference (ToR) the evaluation has both an accountability and learning focus. Within the overall key attention to *relevance* and *effectiveness* of the CD support from the agencies the evaluation will consider four issues:

- i. The relevance and opportunity of a “best fit” approach for CD support well adapted to specific intra- and inter-institutional dynamics and the wider context.
- ii. Within the “best fit” dimension, the appropriateness and legitimacy of external (donor) involvement in different dimensions of capacity development, and whether some processes may be so

⁶⁹ <http://www.oecd.org/dac/governance-development/capacitydevelopmentourkeypublicationsanddocuments.htm>.

complex and demanding that the ability of donors to add value is limited.

- iii. The merits of looking beyond the supply side of public sector institutions to foster broader accountability relations or other types of collaboration with e.g. civil society, private sector, media or oversight institutions.
- iv. How a results-focused approach to aid for capacity development can serve to improve learning and accountability among aid agencies in future.

In the language of theories of change, the evaluation would thus start from the hypothesis that CD support from donors is (more) effective when it i) fits the drivers for and constraints to change (“builds on what is there”), ii) donor support is accepted as legitimate and appropriate; iii) uses results sensibly to measure progress, correct course and learn; and iv) looks beyond “supply-side” or “push” approaches that only work from the inside in public organisations. The evaluation will investigate if and how CD interventions adhere to this theory, and if and how the outcomes and impact of the CD and CD support confirms the theory of change.

3 Brief overview of past and current trends in CD thinking

From the 50'ies, development assistance had the ambition of delivering sustainable results (socially, institutionally, economically, technically, politically), and, by implication, foster endogenous capacities. The basic assumption was that capital investments plus transfer of knowledge/skills would suffice. Investment projects and technical assistance (TA) quickly became the dominant cooperation mode. The focus was squarely on the supply side provided by donor agencies – training and experts were the typical “soft” components added to the hardware. Implementation was in donor hands, assuming that learning/skills acquisition/institutional development would happen more or less by itself as a result.

Early reviews did not support that hypothesis – already in 68, the Pearson Commission found that “technical assistance often develops a life of its own, little related in either donor or recipient countries, to national or global development objectives”(Hradsky 2011), and later evaluations (Forss, Carlsen et al. 1988, Berg 1993, Land 2007, JICA 2008) have not found solid evidence of the broader effect of TA on sustainable capacity development. Attention also began to focus on

the potential negative effects of TA (cost, distortions in local labour markets, disruptions in formal hierarchies, weak and twisted accountability mechanisms, distorted incentives through e.g. all kinds of salary supplements, and the proliferation of high-cost lifestyles among expats creating tensions with locals).

Despite the many negative reviews and evaluations of TA, the practice continued (and continues), often for reasons unrelated to capacity development purposes: TA served as implementation agents and safeguards for donor concerns – put bluntly, they were good at spending money and keep some degree of control over how funds were spent (Boesen 2001). Assuming double roles – both acting as implementation agent and as capacity development support adviser – often proved difficult. Despite the introduction of the Logical Framework Approach in the mid-80'ies, with its insistence of starting from objectives and working backwards through outputs to activities and inputs, the focus for “institutional development” continued to be on the input or supply side. Demand was largely reduced to assumptions about political will and absorptive capacity which were rarely properly analysed, or for which systematic evidence were not sought. In the mid-nineties, the disappointments with project-focused development assistance (“islands of success in seas of failure”) and TA led to two, in principle complementary, changes in approach among key multilateral and bilateral donors:

Firstly, programme-based approaches became in vogue (culminating with the Comprehensive Development Frameworks, and later the PRSPs) (Harrold 1995). Simply put, it was assumed that development efforts had to be nationally led and comprehensive, within somewhat consistent (sector) policy frameworks, and with a focus on a broad set of capacities, not least focusing on public financial management capacities, but also on service delivery and regulatory capacities. Results based management approaches came to the fore, as a belated reflection of the wave of New Public Management that had gained prominence in OECD countries. Capacity was assumed to grow out of such programme approaches, which put the partners in “the driver’s seat”, as it was often phrased.

Secondly, as a complementary trend, capacity development became increasingly seen as a methodological discipline on its own, leaning heavily on mainstream approaches from organizational development, human resource development and management disciplines, increasingly tilting towards change management

informed approaches. Some of the literature focused on what donors could and should do, but increasingly the mainstream view has been that CD is first and foremost an endogenous process, where outsiders can at best contribute – but never claim attribution (DAC 2006). However, in practice – when programme based approaches was at its height and the pressures for parallel comprehensive reform efforts that would justify e.g. budget support were most intensive – there were rarely if ever room for the kind of CD support that the methodologies prescribed (e.g. ownership, incrementalism, flexibility, and attention to context, incentives, power, politics and interests). Technocratic, linear blueprint approaches continued to dominate in practice, exacerbated by sometimes very rigid focus on results-matrixes and indicators.

Despite the increasing awareness – also translated into methodologies and guidelines (Boesen 2005, DFID 2007, Boesen 2011, Danida 2011) – that drivers and constraints to change, politics, power and interests matter for development and CD, the practice has seemingly only changed slowly and to a limited degree. The focus on the demand side is well established as theory, but it is difficult to discern it is a constituting element in the actual practice of development agencies. Summing up, for the purposes of the evaluation approach: there has been a two pronged development: one displaying an ever more sophisticated understanding of change/development and the options and limitations of what outsiders can do to support change/reform. Buzz-words here for what outsiders can do are “facilitation”, “brokering”, “leveraging”, “complexity”, “flexibility” and, to some degree “emergence”(Morgan 2004, Andrews, Pritchett et al. 2012). And, on the other hand, an expectation that the broader approach to development assistance – programmes instead of projects, budget support instead of earmarked support – would by itself create space for endogenous CD processes – not so much by what donors would do, but maybe more what they would not do (e.g. distorting incentives in institutions, field TA, micromanage their assistance). The translation of these two trends to actual practice – expressed in the Paris- and Accra-declarations – has at best been uneven, and the trends, in particular regarding programmatic approaches, may well have reversed. Fragile states may be the exception where at least in theory, harmonization and alignment is still in vogue. Unaligned to the changes in declared approaches, methodologies and guidance described above, donors

have on the other hand seemingly continued to pay special attention to those aspects of capacity that were deemed to be of particular importance to the effectiveness of their aid. Policy making, financial management, results based management, monitoring and evaluation as well as anti-corruption and transparency capabilities have ranked high (Independent Evaluation Office and Operations Evaluation Department 2004, Operations Evaluation Department 2004, Boesen and Dietvorst 2007), while broader downstream service delivery capacities (e.g. development effectiveness capacities which are more comprehensive than aid effectiveness capacities) may not always have received the same attention.

4 Concepts and definitions

The CD field uses broadly defined concepts, and there has never been a shared, precisely defined vocabulary. This is, however, not very different from the situation in the academic fields of organisations, institutions and systems where a variety of concepts are used without sharp delimitation of meaning.⁷⁰

OECD/DAC's definition from 2006 (DAC 2006) is the accepted common definition: *Capacity is understood as the ability of people, organisations and society as a whole to manage their affairs successfully... 'Capacity development' is understood as the process whereby people, organizations and society as a whole unleash, strengthen, create, adapt and maintain capacity over time.*"

Evidently, defining "capacity" as "ability" is on the edge of being tautological. More important is the mentioning of "people, organisations and society as a whole", often translated into a request that CD must focus on individuals, organisations and (broader societal) systems or institutions to be effective. On "capacity development", the important point of the definition is the focus on CD as a *process*, and the focus on people, organisations and societies as at same time actors and beneficiaries of CD. That is, the definition of CD allures

⁷⁰ There has been numerous calls for getting to sharper, and shared, concepts. That has for obvious reasons not been successful, but much time has been spent on battles over more or less subtle definitional tweaks. E.g. the difference between *capacity* and *capability*, between *latent* and *actual* capacity, between *organisations* and *institutions*, and, maybe most frequently, between *capacity development* and *capacity building*. Opponents of using the latter – often Europeans – argue that a building metaphor is irrelevant because capacity develops much more organically, and not by engineered design. North Americans often prefer capacity building.

to CD as (largely) an endogenous process – like learning, it can be supported (e.g. by teaching), but the teacher cannot “learn” the student anything – the learning (or change) takes place inside the individual (or organization, or society), and so does CD eventually, because the resulting capacity resides in people, organisations and societies. Attempts to provide alternative definitions often run into problems because they include normative or prescriptive elements or a whole theory of change about how CD happens. This evaluation will therefore stick to the reasonable and intuitively shared idea about “capacity” as the ability to perform (“perform” and “performance” are other terms which have no agreed precise definition). A basic understanding of CD as a process eventually resulting in changed capacity in individuals, organisations or systems/societies is on the other hand critically important because it moves the focus from the teacher (or CD supporter) to the learner (the person or organization or system developing capacities).

Moving beyond the definitions, the next crucial matter is to identify what the desirable *elements or factors* of capacity could be (for different persons, organisations, systems, and for different contexts). A presidential office presumably needs a different set of capacities to perform well than do a primary school, though factors or elements as management, structure, systems etc. are present in both type of organisations. In addition to the capacity factors, a theory of change about capacity development have to identify the *attributes of capacity development processes* are when these are successful – or, reversely, when they are not. That is, a top-down and unconsultative approach to change may work better in the presidential office than in a school. These are the fields where hypotheses and evidence speak, rather than in battles of terminology. This paper will return to these to critical issues after outlining a generic analytical model for CD.

5 The analytical model – the generic cause/effect chain

This section presents an analytical model of organisations and change that is descriptive and thus does not provide answers to which capacity factors to strive for or how to design change processes – but which allows a structured discussion about this in a simple cause-effect chain. The analytical model builds on one of the most frequently (but not always consistently) applied perspective on capacity development and organizational development: *an open systems approach* which sees organisations (and people, and systems) as

open in the sense that they have permeable boundaries and constantly interact with their environment, influencing it and being influenced by it (Harrison 1994, Harrison and Shirom 1999, Boesen and Therkildsen 2004). The generic logic is as follows, at this stage for how capacity leads to impact, without considering the context or environment:

**3. Capacity → 4. Performance/Outputs →
→ 5. Outcomes → 6. Impact**

Note that this is not a project logic, but a generic logic for how people, organisations or systems use their capacity (e.g. a rural health clinic) to perform/deliver services (attend pregnant women) with an outcome (more women give birth in clinics) with an impact (lower maternal death incidence). In this logic, the outputs of capacity is a (continuous, adaptable) *supply* of services (or products, or enforcement of regulations). The outcome is the *use* of these services/products/compliance with regulations (or the *demand* side), leading to an ulterior impact.

Adding the environment or context, the above logical chain underlines that capacity is used (and changed) in a context which it is influenced by and which it – to a certain degree – can influence. Staff paid according to government rules may for example have such a meagre salary that they only pretend to work (“the state pretend to pay us, we pretend to work”) – or really only perform when they have other incentives to do so. The same relation to the environment goes for outputs, outcomes and impact – they are delivered and used in a context, and both outcome and impact depend on context factors (e.g. if women have no means of getting to the health clinic they cannot use the service).

To add the CD perspective, the logical chain expands as follows:

**1. Inputs to CD → 2. CD processes → 3. Enhanced Capacity →
→ 4. Enhanced Performance/Outputs → 5. Enhanced Outcomes →
→ 6. Enhanced Impact, all in 7. Context within and beyond influence.**

Figure 20 illustrates the analytical model, distinguishing between inputs to CD from internal actors and external actors, respectively. This allows a separate look at donor support to CD, and at the relations between the donor(s) and those whose capacities are to be developed. Note that this logical chain is purely conceptual, and therefore referred to as an analytical model rather than a Theory of Change. It does not yet specify a thesis about which inputs to CD

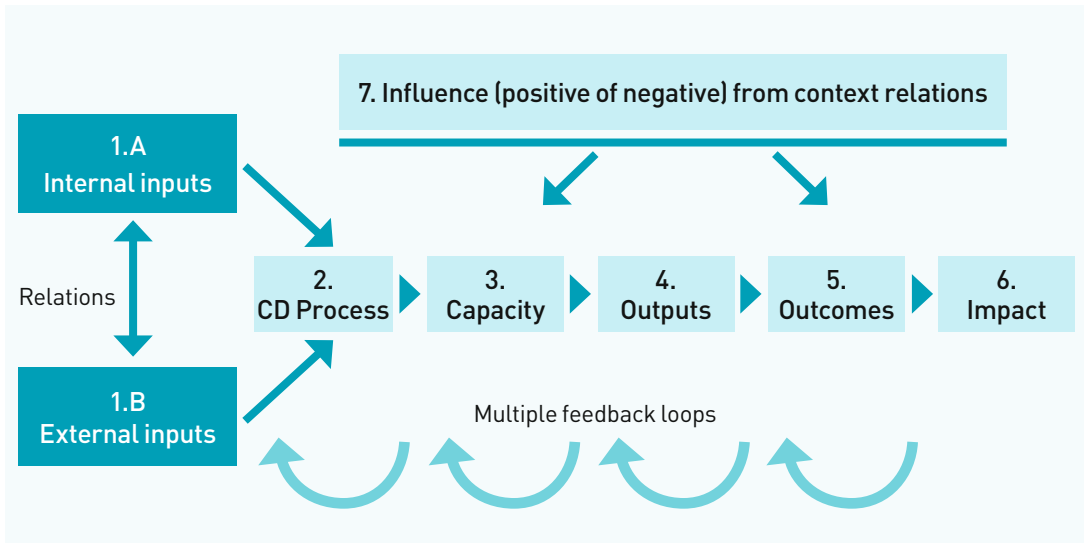


Figure 20. Generic search model for cause-effect relationships in capacity development

(internal or external) that will work, what good or less good CD processes are. It does not detail the factors/element of capacity that are important: it may be “functional capacities” and systems (e.g. a new IT system and the skills to operate it), or more value-based elements (management style, transparency, participation) – and it may well be contested which elements that are important or most important. Better performance is not prescribed either, it can be quantitative and/or qualitative enhanced services/products/ regulations. The analytical model does not specify which context factors that are important for success or failure, and if or how they may be influenced by change agents or other stakeholders. It simply offers a frame for this discussion, arguing that the logic behind CD and CD support goes from inputs to CD processes to ulterior impact.

The analytical model thus focuses on enhanced capacity, which is the intended result of deliberate CD processes. But even that is not at all a given – capacity enhancement may come around “by itself”, without any deliberate or identifiable processes or actors, or with only very limited interventions that claim to be driven by a CD ambition. Using biological metaphors, a plant may grow simply because the environment provides rain and fertile soil, it does not need an expert to tell it how to develop. In the CD literature, this possibility has often been described as “emergence”. Some have even

claimed that it is the dominant way in which capacity develops. This is in clear opposition to those with a more engineering approach who claim that a clear, meticulously planned, measurable, results- and analytically based approach can develop capacities. In this evaluation, both elements of emergent and planned capacity enhancement should be identified – but only in the context of CD support that had the intention to develop capacity. To make the model appropriate for the special case of development cooperation, it is furthermore useful to distinguish between organisation-internal investments in CD, and external support, respectively. This allows looking separately at the contributions of different actors, as well as the relations between them, thereby allowing disentangling the issue of ownership of change processes. In specific terms, this would raise questions about who are doing what, who are deciding what, and in terms of the quality of relations: are the parties seeing each other assuming appropriate and legitimate roles, are they effectively agreeing on objectives of the CD processes, and how should this process be conducted; etc.

The resulting picture, as illustrated above, is the proposed analytical model for the Theory/ies of Change that the evaluation will research.

As underlined, the model is (largely) “empty” except for some fundamental assumptions about organisations (open systems). What the requisite capacity for a given organization or system would consist of, is not detailed. The model on the next page is largely identical with the model behind the Results-Oriented Approach to Capacity Change (ROACH) approach developed by Danida in 2003-2005 (Boesen and Therkildsen 2004). It allows investigating changes in each of the circles, as well as on processes and relations. This is not only relations between possible internal and external inputs to CD processes, but also the relations between the organisation (or system of organisations) and the context, from the formal governance structure to relations to suppliers, to users/consumers and to other relevant stakeholders. Further, as recommended in the ROACH, it allows the description of changes over time – and then afterwards to consider whether the changes in one element can be ascribed causally (partially) to change in another element, both in the linear flow and in relation to other explanatory factors in the context (Boesen, Christensen et al. 2002). Indicators and means of verification of inputs, changes in capacity, outputs, outcomes etc. are

technically readily available, though in practice hard to collect ex post as they are rarely collected at the beginning of capacity development support. However, any evaluation of CD faces a paucity of available data, no matter which model is applied, as will be further discussed later in this paper.

6 A Theory of Change for Capacity Development

What are, then, the *elements of capacity* that are most relevant to a given organization in a given context? What are the *characteristics of the CD processes* actually supported by or imposed by donor agencies? What were they supposed to be (according to methodologies, or an idea of good practice)? What is the balance between internal and external investments in change, what are the relations between those involved (ownership, leadership, resource control etc.)?

In the capacity development literature referred to above there is no consensus on which capacity elements that are most crucial for the performance of an organisation. As briefly discussed above, some donors may tend to focus excessively on the formal capacities that ensure that aid is efficiently used (funds spent on time for the agreed budget items) and has an immediate effect (the envisaged direct outputs have been produced – a bridge constructed, x number of teachers can teach a new math curriculum). This is a narrower set of capacities than what is required to achieve effective development or impact (e.g. ensuring that pupils learn math relevantly when they are in school requires many other things than good financial management and teachers being able to teach the curriculum: parent support, textbooks, incentives for teachers to show up, reasonable student/teacher ratios etc.).

In practice, donors may also consider that they have little to offer regarding the softer, informal and more ‘political’ capacities that their partners need to perform in the context, such as good management, capacity to reach out to stakeholders, and capacity to stay on good terms with the most powerful among the stakeholders. The dialogue between donors and partners may skip such items, which can be sensitive, leading to agreements about the need for “functional” capacities only, even if both parties are aware that they are not sufficient.

There is broader consensus about the parameters that influence effectiveness and efficiency of deliberate CD *processes*. That is, there is implicitly, a Theory of Change about Capacity Development as it can be read out of recent guidance from the European scene (Boesen

2005) and the UN system (UNDP 2007), as well as evaluations. This Theory of Change can be summarized as follows:

- Capacity development is largely an endogenous process, strongly conditioned by the structural, social and institutional drivers of and constraints to change which changes over time. CD and external CD support is more likely to be successful when it builds on what is there, and is driven, managed and owned by local stakeholders in and around the relevant organisations.
- Successful CD processes tend to be adaptive and flexible, even in terms of moving goalposts, as CD nearly invariably takes place in a context of messiness and complexity, where a mix of formal and informal governance and accountability mechanisms (including loyalty based and patrimonial mechanisms) shape incentives. Successful CD processes tend to work on a mix of both internal and external factors, and on both formal and informal, and functional and political aspects of the organization(s) and their immediate context.
- Results can meaningfully be measured both at the level of changes in capacity (better systems, more efficient structures, better performing individuals, better communications, better adaptation and resilience etc.) and at the level of organisational performance (changes in outputs, whether quality, quantity, cost or relevance or a combination of these).
- External support can, consistently with the above, expectedly only *contribute* to capacity and performance enhancements because so many other factors are in play to make CD success. They could still make the critical difference, but other forces have to push in the same direction. relational issues between development agencies and partners in relation to CD support is therefore of critical importance, including the perceived legitimacy of each partner's actions or inactions in the eyes of the other partner.
- A clear focus on achieving measurable changes in organizational performance is useful. This aspect, which is one of the four focus areas of the evaluation, is further discussed in section 8 below.
- External inputs like training, TA and “knowledge transfer” need intrinsic qualities to be effective, but their effectiveness depends most of all of the strength of demand from the partners.⁷¹

⁷¹ Peer learning approaches, and some ‘South-South’ approaches, are arguably more effective because they fit demand better and are thus in this way of higher relevance and quality – but the presence of demand is the key issue for making any supply effective.

This Theory of Change for Capacity Development is a hypothesis only. The evaluation will focus on specific sub-sets of questions to test whether practice aligns to this theory, and whether or not there is a correlation between interventions that align to this theory and the effectiveness of the capacity development support provided by donors.

7 Unfolding the “best fit” and legitimacy focus areas: complexity of capacity, adequacy of CD processes and donor responsiveness

What does it mean to hypothesize that a “best fit” support from donors to CD is likely to be more effective than a “blueprint approach” where a purportedly “best practice” is sought introduced as a blanket replacement of the existing capacities? While the idea may sound intuitively right, it is helpful to break it down into key dimensions that can be identified and measured during the evaluation. This also helps avoid stereotyped discussion – there may be many ways to skin a cat, but applying some international standards, e.g. measuring if a science laboratory is performing acceptably, is done in one, standardized way, according to what can rightly be called a blueprint – or best practice standard. On the other hand, there is no blueprint for a “best” political system – nor for how a political system is developed or changed. The same goes for CD processes – there is no “best practice” for how to conduct reform processes or major organizational change processes.

A key dimension of relevance for the “best fit” in relation to capacity is the level of *difficulty or complexity* of the capacity itself. Thus, the capacities required to produce simple iron rods are less sophisticated and simpler than capacities required to produce computer processors. A number of factors related to the “nature” of the capacity itself influence the difficulty or complexity:

- the *specificity* of the products/services that the capacity will be used to produce/deliver (Israel 1987). Higher specificity eases CD (e.g. the capacity to deliver a school lunch is easier achieved than the capacity to produce internationally approved PhD graduates). “Capacity for good policymaking” is on the other hand not a set of easily specified skills and business processes, while e.g. simpler surgery is performed according to very specific, standardised processes.

- The *scope* or *distribution* of the capacities. A complex task like getting monetary policies right can be successfully performed by a small group of highly qualified economists, provided they have the support of the government leadership. Such capacity can rather easily be developed (or outright bought) – there are several examples of countries “fixing” their monetary (and also fiscal) policy by recruiting small teams of economist from the diaspora. On the other hand, getting quality education in most classrooms in a country – a very complex and widely distributed task – is an enormous capacity development challenge, depending on various systems governed by widely different governance mechanisms (from teachers to textbooks and buildings, to budget allocations and parent involvement – etc.). Conversely, producing school meals at all schools or conducting a vaccination campaign demands much “simpler” capacities and CD processes, even if it is across a country, because it does not depend much on other organisations or systems.
- The *incentives to performance*. At the level of staff this is often about a combination of remuneration, status and recognition, perceived risks and gains in relation to these factors, and intrinsic motivation. Typically, in many developing countries, the combined incentives can be weak at a systemic level (salary conditions in the public sector, perceptions of risks and opportunities) – making CD efforts targeted at individual organisations susceptible to failure because the general context conditions for successful CD are not conducive.
- The *interests of elites*. New capacities to e.g. tax the wealthy, or make land markets transparent and competitive, threatens interests of powerful elites. The capacities in question may be simple or complex, but the fact that they may not be in the interest of elites will make them much harder to develop. Both CD and reforms are generating winners and losers. The more CD and reform threatens the power and interests of elites (inside and around an organization, in a community, in a sector or at national level), the more resistance will change be met with and the more difficult will it be to develop capacities and transform it into performance (Robinson 2006).
- The *affinity* of the capacities (and products/services) with the dominant social and cultural norms and values. Going against the deeper grain of a society is simply more difficult than going

with it. Examples abound around e.g. gender equality objectives which, despite declared intentions, often move much slower ahead than wished for.

In summary: Capacity development is easier the more specific the capacities, the less the systemic dependencies, the stronger the incentives, the less against powerful elite interests and the more in tune with the grain of society. A prime example: the capacity to use cell phones far beyond their initial focus has grown largely by itself, quickly and easily. On the other hand, despite massive donor support over 25–30 years, public financial management in many African countries still displays serious weaknesses.

The complexity and difficulty of developing certain capacities has often led donors to pursue “paths of least resistance”. They seldom if ever meet opposition to support that will increase budgets and staff, or provide new buildings, infrastructure, computers and vehicles. Training and various forms of study and knowledge acquisition options are also most often welcomed, and even sought for. The problem with these forms of “simple” support – which have been the backbone of donor approaches to CD since the 60ies – is that they have generally not proven effective, because there were also other capacities needed – those harder to develop.

Thus, when it comes to changing priorities, incentives, management or organizational culture this will most often meet stronger resistance, posing much bigger demands to the capacity development or change *processes*. To put it simple: if a certain new stage of capacity is complex and/or difficult to reach, it demands more power (effort, time, resources, allies...) of the capacity development process to get there.

The change (and reform) *processes* (with or without the participation of a donor) can be assessed on their *adequacy* to the task in hand – that is, the adequacy to the complexity of the capacities to be developed:

- *Level of effort*: Depending on the complexity of the capacity to be developed, and the process required to achieve it, the combined efforts of the partners and the donors may be grossly underestimated, relatively balanced or apparently too much and/or too costly. Most often, evaluations report that change and reform processes underestimated the time and effort required to push

through resistance, upgrade capacities and transform it into performance.

- *Availability of champions:* Champions are often identified as external leaders with the power to get support for the change and overcome (or, as things go, adapt to...) the resistance. While there is often a focus on individuals, it may be wiser to look for stakeholder coalitions and groups of champions whose combined power and engagement is bigger than the power of those resisting change.
- *Change agents:* Credible change processes need credible and legitimate change agents, with access to bosses, networks, technical, managerial, political, communicative and financial resources. Donors often come in here, supplying technical and financial resources – but it may be in a poor match with the other resources needed, and e.g. donor-contracted technical assistants acting as de facto heads of programme management units often lack the legitimacy and ability to act on the informal lines.
- *Time-horizons and rhythms of change processes:* Time-horizons can be overtly short, or far too long – and the rhythms would usually give room for victories, highlights, pauses and adaptations to a changing context.
- *Big bang or incremental approaches:* Linked to the previous bullet, CD and reforms can adopt all-in-one-go approaches or sequence and scope reforms in stages. Most literature would say that successful reforms most often follow the latter approach.⁷²
- *Clarity of vision and results.* There is little evidence in literature that CD and reform normally follow the proclaimed intentions, and little advice that this should be the recommended course of action. But there is some evidence that a level of obsession with progress and results by the key change agents and sponsors helps (Collins 2001). This should not be confused with formal results-matrixes.

⁷² The incremental approach was tested in a PFM reform in Bangladesh some years ago, where a number of successive "platforms" of reform achievements was defined ex ante, with the idea that the reformers and their donors would only proceed to the next platform once the previous one had been reached. In PFM support to at least Mozambique it was at some point around 2000 argued that reform should start with "simple" processes before addressing the more "difficult" ones.

Finally, the donor support should be assessed by its *responsiveness* to the situation, including the following:

- *The degree of legitimacy of the donor intervention, and ‘donor-steering’*: This sensitive, but crucially important issue is often phrased in terms of the level of ownership by the partners, and often left aside without a more refined analysis or attention. A more detailed analysis would look at to what degree the donor has been invited as a legitimate partner, and to what degree the donor adapts to the rules of the house, and what the incentives for the partner are to invite the donor into the CD process.⁷³ This is maybe one of the most important classifiers of donor support to CD, catching the degree to which donors steer. In the extreme, donors can attempt to singlehanded drive reform through project documents they have written themselves, a Project Implementation Unit, donor-recruited TA etc. At the other extreme they can offer passive accompaniment to a pot of money put at the disposal of the partner to achieve (or for achieving) pre-defined CD results specified by the partner. In between, but towards the less intrusive, catalytic and leveraging approaches (e.g. bringing stakeholders together, arranging (South-South) exchanges; making knowledge/experiences available, supporting local CD institutions) have gained prominence in recent years.
- *Grasping the setting*: Often linked to the bullet above, donors may put few or many resources into understanding the setting (all the parameters outlined above in relation to change and change processes). Getting to a “best fit” approach evidently requires a good understanding also of what is going on “behind the façade”.⁷⁴
- *Clarity of vision and results*: Earlier evaluations and portfolio screenings have quite consistently found that CD has been under-specified to a degree where it has been difficult to assign any real accountability for results afterwards.
- *Level of attention*: While the initial specification of CD is often low, the follow-up on CD support and results (evidenced in reports, changes to approaches/activity plans, budgets etc.) may often be conspicuously absent – for reasons that may reflect the initial lack

⁷³ An African minister was once quoted for saying that “capacity development was like having donors in the bedroom”.

⁷⁴ An African minister was once quoted for saying that “capacity development was like having donors in the bedroom”.

of shared aspirations and clarity of roles, processes and main results.

- *Incentives*: Donor staff and representatives face multiple incentives in their relations to their own organisations and to the partners. Incentives can put disbursement higher than CD support; compliance higher than real results; risk aversion higher than risk taking; and short term ease of doing business over getting things right for the long term.

While there is no simple typology with distinct “species” of CD and CD support coming out of the lists of significant factors above, there are three important dimensions of CD processes and donor support, respectively, that will shape if and how the donor support is a good fit to the situation:

- the *complexity* of the capacity or performance strived for;
- the *adequacy of the CD process*; and
- the *responsiveness of donor support*.

The theory would be that the higher the complexity of the capacity to be developed, the more sophisticated should the approach to change be, and the higher the required responsiveness of the donor support. These dimensions (and the underlying factors) thus serve as a framework for assessing the “best fit” question which is a core theme of the evaluation.

By looking at these dimensions the evaluation may cast light on whether some CD ambitions are so complex that the ability of donors to respond is simply not available. The tools at hand (externally acquired resources, dialogue, presence, money) and the position of donors (outsiders, operating in a mix of own domestic politics, diplomacy, politics in the partner country, and international development fashions and fads) may simply not be adequate to contribute effectively to complex, path dependent and messy development processes whose time perspective is several decades rather than short term donor cycles (Booth and Cammack 2013).

In the evaluation language, the above discussion touches in particular on *relevance* and *effectiveness* of Nordic CD support. Relevance is thus not about the need – any organization can in principle get better, anytime, everywhere – but how the donor support fitted to the situation and whether that lead to the intended results.

8 Unfolding “looking beyond internal capacity” and “working with results” focus areas

Looking beyond internal capacity

Traditionally, donor support to CD has targeted the “internal machinery” of public sector institutions. New skills, systems, organizational infrastructure, strategies etc. etc. were assumed to address the “capacity deficit” and thereby lead to enhanced performance. It was, implicitly or explicitly, assumed that the governance arrangements around public sector organisations that shaped incentives were either grossly adequate, or, if inadequate, then beyond the reach and influence of the organization itself and the donors supporting it. Attempts to address public sector wide incentive problems (through salary decompressions; merit-based recruitments and promotions; financial management improvements and anti-corruption initiatives etc.) were sought addressed through national public sector reforms.

This basic perception that “supply-side” CD support to the internal workings of individual organisations would be effective was increasingly questioned through the 90’ies. The 2004-World Development Report (World Bank 2004) summarized this new look introducing a strong focus on the accountabilities and governance mechanisms of public sector organisations, in particular those charged with delivering basic services. The main argument was that the formal, top-down “principal-agent” mechanisms where politicians and ministers were supposed to hold front-line service providers accountable were not effective. This “long route accountability” should be complemented by “short route accountability” where the services users would also act as principals holding providers to account. Water Users Committees, Teacher-Parent Associations, citizen scorecards and publishing of budgets, accounts and results were the key ingredients in a wave of attempts to “work from the outside-in” – or “pull-approaches”, as complementary alternatives to “push-approaches” working from the inside. These approaches also found their way into CD guidance of e.g. Danida, the European Commission, ADB and others (Boesen and Therkildsen 2004, Boesen 2005, ADB 2006).

The present evaluation will look at if and how CD support from the Nordic countries has sought to support CD processes not only from the inside, but also through such “pull-approaches” that would

strengthen oversight, accountability and transparency. This could be through capacity development support to external stakeholders that should and could oversee and hold public sector organisations to account, thereby providing incentives for these organisations to perform better. Apart from direct users of services it could be oversight institutions such as General Auditors, elected councils and anti-corruption bodies.

It should of course not be assumed *ex ante* that such support would have the desired effects – recent research (Booth and Cammack 2013) has been questioning the effectiveness of such measures, in particular if they are seen as an alternative, rather than a complement to other CD measures. The focus in this evaluation is thus not at all to see “pull-approaches” as a possible “magic bullet” for CD, but to ascertain if and how CD support has departed from a comprehensive analysis and understanding of the multiple internal and external factors that shape capacity and performance.

Working with results

The fourth focus area of the evaluation approach is how CD support from the Nordic donors has worked with results and indicators – how were these formulated up front during design or inception phases; were baselines identified; and how was the follow up in reporting and in terms of adjustments of plans and future results-planning?

This focus area touches a much larger and sometimes very heated debate about the merits of results-based management (RBM) as this came to the fore as an essential part of the New Public Management (NPM) wave that started in OECD countries in the 80’ies. RBM was seen as a means to displace old-fashioned rules-and-regulation based public administration with a system that would give managers concrete targets to achieve – and more freedom to choose how to achieve them. Academic reviews have clearly demonstrated that this is much easier said than done – RBM has advantages but also disadvantages (Hood 1991, Pollitt and Bouckaert 2004), and NPM-type reforms may be particularly difficult to pursue in developing countries (Schick 1998, Schick 2004).

The focus here is, within this broader RBM perspective, more narrowly on how CD support has actually used results and indicators – or not done so. All Nordic agencies have had and has a focus on results and evidence – but particularly in relation to CD it has been a frequent finding that results are not used consistently, and not

in accordance with the stipulations of e.g. the standard Logical Framework Approach prescriptions which Norad spearheaded in the 80'ies and both Danida and Sida have subscribed to (NORAD 1990, Danida 1996, Boesen, Christensen et al. 2002, Norad 2008, Kruse and Forss 2014).

The frequently observed paucity of evidence when it comes to the effectiveness of CD support is part of the rationale for this focus area of the evaluation. Looking at how results have been planned, and how evidence has been collected is expected to cast further light on whether this paucity can be confirmed, and why results and evidence are used – or not used – the way they are in CD support.

Results orientation is indeed useful for CD. Specific capacity and performance results serves clarify directions for those involved. Explicit ideas of cause-effect relations – that is, results at different levels as per the analytical model in this paper or a similar model – would help focus minds and actions of the important things that will have the desired effects, rather than unimportant (but maybe uncontroversial) activities that do not add value to the capacity or performance of an organization. Monitoring the progress would be essential for meaningful learning to take place, enabling managers to modify processes and align expectations to current realities.

It has been pointed out that results-orientation as a formal system only may not have effects except reinforcing a “tick-the-box” culture. If a donor intervention is not perceived as legitimate by a partner, and if the partner and/or the donor does not have an organizational culture and a management that is results-focused, then formal requirements (often posed by the donors) should not be expected to work. Literature on the other hand indicates that impatient leaders with a personal drive for achieving daily results are better at transforming organisations (Collins 2001). The evaluation should look at results-orientation around CD support also in this broader perspective, looking at the availability or lack of formal instruments of RBM and evidence in the wider context of whether and how results matters to leaders and organisations.

9 Conclusion

The approach paper has identified broad definitions of CD taken from OECD/DAC and widely accepted among DAC members. It has outlined an analytical model that requires the evaluation teams to distinguish between inputs to CD, CD or change processes, the

intended resulting capacity, and the performance and wider outcomes that this capacity would contribute to. Within this analytical model the approach paper has hypothesized a Theory of Change that reflects mainstream views about capacity development: that it is more relevant and effective when it seeks an optimal fit to the context; when the role donors play is legitimate; when the CD process looks beyond the internal factors in public sector organisations; and when there is a sensible results-orientation. The core evaluation questions outlined in the ToR also points beyond the four focus areas outlined in this paper, and it is expected and welcomed that the evaluation will identify other key attributes of successful CD support or key attributes of unsuccessful support. The approach paper sets a basic analytical frame for looking at and analyzing the evidence, and for addressing some of the key tenets of contemporary thinking about capacity development.

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Annex 4: Persons Interviewed for this Evaluation

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Pen Sameth – Vice head of DOE

Lim Sokhom – Vice Section of Personnel

Masakrong Lower Secondary School (LSS) and SSC, Stong district

Yan Limlun – Director of school

Saroeun Sotheavy – Teacher

Mao Boren – Teacher

Kong Phearin – Teacher

Pech San – Chairperson of the SSC

Tith Chak – Member of SSC

MoEYS, Battambang Province*POE and POE Offices*

Ngy Set – Director

Thok Buntheoun – Deputy Director

Phok Rithea – Head of Personnel Office

Kong Rachana – Vice Head of Admin Office

Mak Meng – Vice Head of Planning Office

Hing Kim Hoeurn – Head of Primary Office

Sin Sovuth – Head of Accounting Office

Kao Kimchan – Vice Head of Youth Office

Chheng Veasna – Head of Early Childhood Education Office

Teoung Seyha – Officer of Early Childhood Education Office

Sampoeuv Loun DOE

Sao Sary – Vice Head

Som Bunnarin – Officer of Personnel Section

Tim Bunrith – Officer of General Education section

Ourng Son – Officer of Secondary Section

Chambak Lower Secondary School (LSS) and SSC, Sampoeuv Loun district

Heuon Vantheab – Director of school

Sin Sovannak – Teacher

Chor Sam Oeun – Teacher

Som Sophara – Teacher

Tep Mab – Head of the SSC

Kamrieng DOE

Nop Theoun – Head of DOE

Pech Prang – Vice Head of DOE

Theoun Sopath – Officer of Secondary Section

Reoun Chanrith – Officer of Planning Section

Samsep Lower Secondary School (LSS), Kamrieng district

Sun Koroya – Director of school

Reoun Saroeuy – Teacher

Khoun Thai – Teacher

Khan Savat – Teacher

Rern Sarat – Teacher

Theoub Buntheorun – School Secretary/ Cashier

Lorn Sopheak – Teacher

Chap Voreleak – Teacher

Kenya**ORGANISATION, NAME & POSITION****Embassy of Sweden**

Anders Rönquist – Head of Development Cooperation

Duncan Marigi, Elisabeth Folkunger, Anne Ljung – Programme Managers

Japheth Kiara – Natural resources consultant

Police Reform Programme

Victor Okioma – Secretary/Administration – Ministry of Interior/OOP

Eliud Kinuthia – Co-ordinator – Police Reforms Secretariat

King'ori Mwangi – Head/Kenya Police Reforms, Bruce House

Fred Mwei – Head/Administration Police Reforms, Jogoo House

Tabitha Ndanu – Reforms/Administration Police

M.M. Mwinyi – Director of Planning/ Administration Police

Joshua Arende – OCS/Kikuyu Police Station

Evens Omanga – NPS Kikuyu

NALEP

Mary Kamau – Director/Extension Services/ Ministry of Agriculture
 Albin R. Sang – Deputy Director Livestock Production
 Samuel Matoke – Deputy Director Production/Dairy Development
 Mikael Segerros – Programme Advisor/ASDSP
 Benjamin Ndegwa – NRM, ASDSP
 S. W. Fwamba – Capacity Dev Officer, ASDSP
 Bernard Mwangangi – Value Chain Officer, ASDSP
 David Nyantika – National Capacity Dev Coordinator – Irrigation/Mechanization,
 Ministry of Agriculture

NALEP Machakos

Patrick Munyua – ASDSP County Coordinator
 Patrick V. Kibaya – Monitoring and Evaluation Officer, ASDSP
 Simon N. Mwangi – Capacity Dev/Research/Extension, ASDSP
 Petronilla W. Nduthu – Environ & Social Inclusion, ASDSP

NALEP Kiambu

Ms Abigail Taabu – County Coordinator ASDSP
 Ms Faith W. Kariuki – Crops Officer
 Ms Lydia W. Mariga – Subcounty Livestck Production Officer
 James W. Kariuki – Subcounty Livestck Production Officer

NALEP Homa Bay

Anne Ludenye – ASDSP County Coordinator
 Julius D. Ocharu – ASDSP
 Rose Apodo

Kenya Water and Sanitation Programme

Jeremy Notley – Chief Technical Adviser KWSP
 Mr Kinuya – Technical Coordination Manager WRMA
 Mr Kyengo – Deputy Director State Department for Water
 Jacqueline Musyoka – WSTF

Water Resources Management Association Kisumu

Reuben Ngesa – 0717825876
 Lencer Opiyo – Community Development Officer

Annex 5: Sampled Interventions

The evaluations of the eight CS interventions are reported in the respective working papers, which may be requested from Sida at sida@sida.se (case number 13/001660). The grey shading indicates inclusion in each phase.

Table 12. Interventions included in the Portfolio Screening (PS), Desk-based Review (DBR) and Country-studies (CS), in alphabetical order of the country name.

Name of the intervention	Country	PS	DBR	CS
Afghanistan Sub-National Governance Programme 2012–2014	Afghanistan	Grey	Grey	Light Blue
Basic Education and Gender Equality Programme	Afghanistan	Grey	Grey	Light Blue
Support to Basic Education and Gender Equality in Balkh, Jawzjan, Saripul and Samangan Provinces	Afghanistan	Grey	Light Blue	Light Blue
Cooperation between Albania's General Tax Directorate and Swedish Tax Agency, Phase II	Albania	Grey	Grey	Light Blue
Third Primary Education Development Project	Bangladesh	Grey	Light Blue	Light Blue
Health, Population and Nutrition Sector Development Programme	Bangladesh	Grey	Light Blue	Light Blue
Capacity Development to Strengthen the Management of Contaminated Sites in the Republic of Belarus, Phase I	Belarus	Grey	Light Blue	Light Blue
	Bolivia	Grey	Light Blue	Light Blue
Support to the Instituto Nacional de Estadística 2010–2012	Bolivia	Grey	Light Blue	Light Blue
Support of Small Grants Programme "Be the Change!"	Bosnia and Herzegovina	Grey	Light Blue	Light Blue
Municipal Programme on Solid Waste Management in BiH	Bosnia and Herzegovina	Grey	Grey	Grey
Municipal Training System Project, Phase II	Bosnia and Herzegovina	Grey	Grey	Grey
Partnership in Statistics in BiH, Phase III	Bosnia and Herzegovina	Grey	Grey	Grey

Name of the intervention	Country	PS	DBR	CS
Partnership for Strengthening of BURS Tax Administration Capacity	Botswana			
Capacity Development Partnership Fund	Cambodia			
Programme for Development of Quality Assurance	Cambodia			
Capacity-building of the Georgian leadership community for improved decision-making and negotiation skills	Georgia			
Support to World Bank Global Facility for Disaster Reduction and Recovery 2010–2012	Global			
Aviation Environment Project for Capacity Building of Human Resources in the State Ministry of Environment for Air Transport Sector Environmental and Health Impact	Indonesia			
Kenya Water and Sanitation Programme	Kenya			
National Agriculture and Livestock Extension Programme, Phase II	Kenya			
Swedish Support to Police Reforms in Kenya	Kenya			
Statistics Development at the Statistical Office of Kosovo	Kosovo			
Community-based Recovery and Development	Liberia			
Support to Country Support Teams for Decentralisation	Liberia			
Partnership in Statistics: A Cooperation Project between the Statistical Office of the Republic of Serbia and Statistics Sweden	Serbia			
National Audit Office Development Project Phase II	Tanzania			
Tanzania General Budget Support 2005-2012	Tanzania			
Turkish-Swedish Partnership for Local Governance 2011–2015	Turkey			
Support to the Health Sector Strategic Plan (HSSP II) 2008–2011	Uganda			
Swedish Environmental Protection Agency's Cooperation in Ukraine 2009–2013	Ukraine			

SUMMARY OF THE EIGHT COUNTRY-STUDY INTERVENTIONS

Municipal Programme on Solid Waste Management in BiH

The Municipal Programme on Solid Waste Management in BiH was announced in 2009 as a 4.5-year programme to improve solid waste management systems in BiH, with the dual aim of improving environmental conditions in the country and fulfilling requirements for EU accession. It had two main components, namely those of

capacity development relative to SWM service design and provision, and support to investments in SWM infrastructure and equipment. Key beneficiaries have been municipalities in both the Federation of Bosnia and Herzegovina and Republika Srpska, with a total of 44 municipalities having benefitted from the programme. These municipalities were selected based on their proximity to six regional landfills – the establishment of which is being promoted by both entities, with support *inter alia* from the World Bank – that also received investment support through the programme. The programme also had two other smaller components, namely one of providing legal and institutional support to canton, entity and state governments; and one for public awareness raising, which materialized through two entity-level campaigns conducted in 2013. With a total budget of SEK 100 million, the programme had its start in January 2010, and following an extension of 11 months, will be formally closed on May 31st 2015. At the time of the in-country visit, all activities had been completed and Sida and its consultant Grontmij were in the process of resolving some outstanding issues and reporting.

Partnership in Statistics in BiH, Phase III

In 2005 Statistics Sweden, the three BiH statistics institutes (BiH Agency for Statistics, Federal Institute for Statistics, and Republika Srpska Institute for Statistics) and representatives from other bodies initiated a consultation to determine the focus area and modalities for Swedish support to the BiH statistics sector, in anticipation of a bilateral twinning project. From the outset the deliberations followed closely the work of the EU relative to statistics in BiH, given the priority of contributing to the alignment of BiH statistics with EU norms, in view of future accession. The first phase of the Partnership in Statistics in BiH programme was initiated in 2007, with initial focus on agricultural, environment, energy, labour market, forestry, fishery and gender statistics, together with statistical methodology. General capacity building was a complementary measure including *inter alia* English language training, project work, report writing, presentation techniques and efficient mass media relation. Towards the end of the first phase, the components of statistical business register, agro-monetary and business statistics were added as a measure to bridge two EU projects. A shorter second phase covered the period 2010-2011, short-term economic statistics

having been added on request of the beneficiaries, while energy and forestry were suppressed due in part to budget restrictions. With the aim of continuing to support the development of a sustainable statistical system aligned with EU requirements, a third phase was launched in the winter of 2012 with four main components, namely labour statistics, environmental statistics, statistical methodology and a so-called general capacity building component, which included the widely acclaimed trainee programme that had been launched already in phase I. The third phase came to its end on January 31st 2015, the decision not to continue the bilateral support in its current form having been taken in late summer 2014.

Municipal Training System Project in BiH

The Municipal Training System Project in BiH was launched in its first phase in 2007 as a country-wide intervention to support the development of a competent and professional municipal-level administration by means of a training system elaborated and implemented through a bottom-up approach. Having civil servants and municipality staff as its end beneficiaries, the intervention sought to ensure that the training provided by different organisations aligned with the needs and priorities of municipalities, met established quality standards, ensured that basic and priority capacities of local employees were built and that continued CD would be pursued. That first phase concentrated on the elaboration and adoption of training strategies for both entities, development of the training system proper, support to the delivery of the first training programmes in already establishment training facilities, strengthening municipal human resources management functions, and capacitation of local training providers. The second phase, running between March 2012 and March 2015 and with a total budget of SEK 16.8 million had two main components: an *internal* one directed at strengthening the training system established in each entity during phase I, through support to the core structures, functions and policies of the training system, support to capacity development of BiH local governments, and support to the creation of tools for the training system; and an *external* component designed to support the enabling environment of the training system through measures to improve the range and capacity of training providers and the engagement of external stakeholders through outreach activities. The intervention has been implemented by UNDP in both phases.

National Agriculture and Livestock Extension Programme

The National Agriculture and Livestock Programme was agreed on between the Kenya Government and Sweden in 1999. NALEP Phase I was initiated in 2000 and ended in 2006; Phase II commenced in 2007 and should have ended in 2011, but some few activities were still being closed in the first half of 2015. A new programme, the Agricultural Sector Development Support Programme (ASDSP) with support from Sida and the Government of Kenya was launched in 2012 as a follow-up of that second phase of NALEP.

The second phase of NALEP, which was the object for this evaluation, was initiated at a period when the Government was implementing the Economic Recovery Strategy for Wealth and Employment creation (2003 – 2007), whose preparation was succeeded by the preparation of the Strategy for Revitalization of Agriculture and the National Agriculture Sector Extension Policy.

Kenya Water and Sanitation Programme

The Kenyan water sector had faced multiple challenges in its effort to meet the water needs of the country over the years. The Kenya Government Vision 2030 estimates abstraction from surface and underground sources could increase seven fold and six fold respectively by 2015 with the right investments and policies. But the restructuring started already in 2002 with a major restructuring in order to put in place a new institutional framework set out in the Water Act of 2002. The period since 2004 has seen the establishment of all the new institutions introduced in the Water Act 2002, and their commencement of implementation of their respective mandates in the sector.

The Kenya Water and Sanitation Project has since 2005 been one of two key development partner programmes that have supported the strengthening and make the new institutions operational, the other having been the KfW-funded and GIZ-implemented Kenya Water Sector Reform Programme. KWSP was a partnership between the Government of Kenya, Sida and Danida, with four main thematic components: (i) rural water supply and sanitation; (ii) water resources management; (iii) water sector reform; and (iv) flood and drought mitigation. It ended in 2010, and had a two-year bridging phase from 2011-2013 with another set-up.

Swedish Support to Police Reforms in Kenya

The Kenyan Minister of State for Provincial Administration and Internal Security placed the first request for funding in 2009. This happened as a consequence of the Police Sector Reform the implementation of which required donor assistance with regard to the establishment of systems and structures, knowledge and skills, and equipment and infrastructure. The request comprised six reform areas for support. A twinning agreement between the Kenya Police and the National Police Board in Sweden came into place with a Swedish adviser based in Kenya. The adviser was mandated to support the Police Reforms Implementation Committee, its Secretariat and the Police Reform Units with strategic guidance for the management, coordination, implementation and monitoring of reforms. Moreover, he was intended to contribute to increasing and strengthening collaboration, coordination and communication between the Kenya Police and the Administration Police. The Swedish support has been used primarily for curriculum development and implementation of the community policing concept into the two police services. It also included a pilot community policing initiative in Kikuyu, training in project management, training in forensics, and a feasibility study on training of police officers (dog handlers) at the Dog Unit at the Kenya Police service. Funding was granted for one-year periods stretching into year 2014, totalling SEK 17 million over the four-year period.

Capacity Development Partnership Fund

The Education Capacity Development Partnership Fund is a multi-donor fund managed by UNICEF and supported by Sida, EU and UNICEF. Its overall objective is to contribute to the Royal Government of Cambodia's implementation of the National Strategic Development Plan (2009 – 2013); and the Ministry of Education Youth and Sports' implementation of the Education Strategic Plan and achievement of the Education for All and related Millennium Development Goals through the implementation of the Master Plan for Capacity Development in the Education Sector 2011-2015. The CDPF covers capacity development at four levels: (i) sector institutional capacity in planning and managing policy and regulatory reforms for improved sector performance, coordination and outcomes; (ii) central MoEYS capacity in planning and management processes for improved sector performance and system

modernisation; (iii) organisational capacities at provincial and district level for improved service delivery in line with national reforms; and (iv) school management and education service delivery through increased community involvement and governance arrangements.

CDPF is governed by a steering committee made up of senior managers in the Ministry and Sida, is chaired by the Ministry and co-chaired by EU. The first phase of CDPF was implemented between 2011 and 2014, a second phase of having started in 2015. It is the first experience of aligned joint donor funding in the education sector in Cambodia.

Programme for Development of Quality Assurance

The Programme for Development of Quality Assurance is a twinning cooperation between the Swedish Schools Inspectorate and the Cambodian Ministry of Education, Youth and Sports for capacity development for quality assurance in the education sector in the country. The origin of the cooperation was the decision made by the Government of Cambodia to introduce a new systemic school inspection system. After a baseline study conducted in 2012, the two parties signed the Memorandum of Understanding for the programme in 2013. This has a duration of three years and has a total budget of SEK 13.1 million financed by Sida.

The overall objective of the QA programme is to increase the capacity of the Ministry and educational system to deliver quality education services across the country. The expected outcome is the establishment of a system for quality assurance that enhances students' achievement by improving the quality of learning. The system should contribute to the implementation of the education law, curriculum and other policy documents and report back results, trends and development needs to the government. The capacity building of the Ministry and the development of the quality assurance system are carried out by four joint working groups with staff from the Ministry, the Swedish School Inspection and Statistics Sweden. Each working group is responsible for specific parts of the new system. The work method involves short term technical assistance as well as interchange visits to and from Sweden. The emphasis is joint cooperation around a process driven by the Ministry where Cambodian nationals perform most of the work.

Annex 6: Factor Scores and the Scoring System

The judgement criteria and the meaning assigned to the minimum and maximum scores for each of the factors used in the assessment of the four hypothesis components (i.e. evaluation focus areas) are described in Table 13.

Table 13. Description of the judgement criteria and maximum and minimum scores for the factors under each hypothesis component / focus area.

Component / Factor	Judgement criteria and extreme scores
Adequacy (Focus area 1)	
/ A1: Level of effort	<p>Judgement criterion: Degree of correspondence between the effort by the donor and the partners and the perceived capacity(ies) that the intervention aims to develop.</p> <p>Score 5: Adequate level of effort in all components of the intervention</p> <p>Score 4: Adequate level of effort in more than half of the components of the intervention</p> <p>Score 3: Adequate level of effort in about half of the components of the intervention</p> <p>Score 2: Adequate level of effort in less than half of the components of the intervention</p> <p>Score 1: Level of effort insufficient for the complexity of the capacities to be developed across all components of the intervention</p>
/ A2: Use of champions	<p>Judgement criterion: Identification and employment of individuals or organisations with the aim of supporting and overcoming resistance to change processes that the intervention aims to promote.</p> <p>Score 5: Champions used to full potential and supporting CD processes</p> <p>Score 4: Champions used in some components and supporting CD results, but not to full potential</p> <p>Score 3: Some champions identified and used, with some effect on results. Role and capacity not systematically defined or prepared for.</p> <p>Score 2: Some champions used, with minor effect on results. Unclear and undefined role.</p> <p>Score 1: No identification or use of champions.</p>

Component / Factor	Judgement criteria and extreme scores
/ A3: Use of change agents	<p>Judgement criterion: Identification and employment of individuals in the partner organisations with the aim of supporting change processes in the organization(s), including beyond the duration of the intervention.</p> <p>Score 5: Change agents used to full potential and supporting CD processes</p> <p>Score 4: Change agents used in some components and supporting CD results, but not to full potential</p> <p>Score 3: Some change agents identified and used, with some effect on results. Role and capacity not systematically defined or prepared for.</p> <p>Score 2: Some change agents used, with minor effect on results. Unclear and undefined role.</p> <p>Score 1: No identification or use of change agents.</p>
/ A4: Timing & scheduling	<p>Judgement criterion: Adequacy of the start date, scheduling and duration of the intervention relative to the objectives of the intervention and the context of its implementation.</p> <p>Score 5: Perfectly adequate choice of start date, scheduling and duration of the intervention</p> <p>Score 4: Good start date, scheduling and duration relative to most component of the intervention. Minor misalignments relative to external processes with minor negative impacts on CD results.</p> <p>Score 3: Generally adequate start date, scheduling and duration relative to most component of the intervention. Some misalignments relative to external processes with negative impacts on CD results.</p> <p>Score 2: Generally inadequate start date, scheduling and duration relative to most component of the intervention. Important misalignments relative to external processes with negative impacts on CD results.</p> <p>Score 1: Inadequate choice of start data, scheduling and duration of the intervention, with major negative impacts on CD results.</p>
/ A5: Staging	<p>Judgement criterion: Degree of adoption of a staged, incremental approach to capacity development, taking into account the capacity of the recipient organization(s) to absorb the intended changes.</p> <p>Score 5: Rhythm of CD process perfectly adjusted to the capacities to be developed and the recipient's absorption capacity</p> <p>Score 4: Rhythm of CD process well-adjusted in the majority of the components of the intervention, relative to partners' absorptive capacity</p> <p>Score 3: Rhythm of CD process well-adjusted in about half of the components of the intervention, relative to partners' absorptive capacity</p> <p>Score 2: Rhythm of CD process largely unadjusted to partners' absorptive capacity, vis-à-vis the capacities to be developed</p> <p>Score 1: Abrupt / all-in approach to capacity development fully unadjusted to partners' absorptive capacity</p>

Component / Factor	Judgement criteria and extreme scores
/ A6: Clarity of CD results	<p>Judgement criterion: Degree of specification and understanding by the donor and the partners of the capacity development results of the intervention.</p> <p>Score 5: Clear and shared vision of the targeted capacity development results</p> <p>Score 4: Clear and shared vision of CD results in most components of the intervention</p> <p>Score 3: Clear and shared vision of CD results in about half of the components of the intervention</p> <p>Score 2: Largely unclear and not shared vision of CD results</p> <p>Score 1: Unclear vision of the targeted capacity development results</p>
Responsiveness (Focus area 2)	
/ R1: Legitimacy of donor	<p>Judgement criterion: Acceptance by the partners of the role of the donor and the type and extent of support granted, considering the objectives and type of activities in the different components of the intervention.</p> <p>Score 5: Acceptance of and satisfaction with the role of the donor and the support in all components and by all partners of the intervention. Donor fully legitimate.</p> <p>Score 4: Acceptance of and satisfaction with the role of the donor and the support in most of the components and by most partners of the intervention. Legitimacy largely ensured.</p> <p>Score 3: Acceptance of and satisfaction with the role of the donor and the support in about half of the components and by about half of the partners of the intervention. Legitimacy compromised in the remaining half.</p> <p>Score 2: Acceptance of and satisfaction with the role of the donor and the support in a small number of components and by only a few partners of the intervention. Legitimacy largely compromised.</p> <p>Score 1: Complete rejection of the role of the donor and the support</p>
/ R2: Sida's and partners' understanding of setting	<p>Judgement criterion: Degree of understanding by the donor and partners of the conditions in the partner organization(s) and the broader societal context, and how these might affect the results of the intervention.</p> <p>Score 5: Complete understanding of the setting and how it affects CD results</p> <p>Score 4: Good understanding of setting, with minor weaknesses affecting intervention results</p> <p>Score 3: Medium understanding of setting, but with important gaps and shortcomings that affect intervention results</p> <p>Score 2: Largely insufficient understanding of context, with major weaknesses severely affecting intervention results</p> <p>Score 1: No understanding of the setting and how it affects CD results</p>

Component / Factor	Judgement criteria and extreme scores
/ R3: Clarity of CD results	<p>Judgement criterion: Degree of specification and understanding by the donor and the partners of the capacity development results of the intervention.</p> <p>Score 5: Clear and shared vision of the targeted capacity development results</p> <p>Score 4: Clear and shared vision of CD results in most components of the intervention</p> <p>Score 3: Clear and shared vision of CD results in about half of the components of the intervention</p> <p>Score 2: Largely unclear and not shared vision of CD results</p> <p>Score 1: Unclear vision of the targeted capacity development results</p>
/ R4: Follow-up of CD support	<p>Judgement criterion: Extent of development and use during implementation of procedures to follow the progress and achievements in terms of the capacities targeted by the intervention.</p> <p>Score 5: Comprehensive and consistently applied procedures for follow-up of CD, with specification of all targeted capacities</p> <p>Score 4: Comprehensive procedures for follow-up of CD, largely but not fully covering all targeted capacities</p> <p>Score 3: Procedures for follow-up of CD elaborated and implemented, with some degree of specification of targeted capacities</p> <p>Score 2: Simple procedures for follow-up of CD elaborated and implemented, but without specification of targeted capacities</p> <p>Score 1: No procedures for follow-up elaborated and implemented</p>
/ R5: Incentives for donor staff	<p>Judgement criterion: Existence and use of incentives promoting or hindering the commitment or the possibilities of donor staff to work towards the achievement of the capacity development results targeted by the intervention.</p> <p>Score 5: Incentives in place and used that fully support working towards CD results</p> <p>Score 4: Incentives generally supportive of working towards CD results, but relatively minor disincentives</p> <p>Score 3: Incentives with neutral effect relative to staff working towards CD results</p> <p>Score 2: Incentives generally preventing staff to work towards CD results</p> <p>Min. score 1: Incentives entirely contrary to working towards CD results</p>
Pull-push-Approach (Focus area 3)	<p>Judgement criterion: Degree of balance between push / supply-side and pull / demand-side elements adopted in the intervention, e.g. in terms of programme components and activities, budget, number and type of cooperation partners.</p> <p>Score 5: Balance between push- and pull-approaches.</p> <p>Score 4: Largely balanced approach with minor predominance of one type of approach.</p> <p>Score 3: Unbalanced approach with clear predominance of one type of approach.</p>

Component / Factor	Judgement criteria and extreme scores
	<p>Score 2: Largely unbalanced approach, with almost exclusive use of one type of approach.</p> <p>Score 1: No balance (only pull- or pull-approaches employed).</p> <p><i>Note: The analysis of the role of internal and external actors in the CD processes was assessed separately by the evaluation team and not used to determine the score. The adequacy of the balance between pull- and push-approaches relative to the targeted capacities and the context of the interventions was analysed as part of the assessment of the relevance of the degree of balance for the observed CD results, and was therefore not used to determine the scores.</i></p>
Results-orientation (Focus area 4)	
/ RO1: Clarity of intervention logic/ToC	<p>Judgement criterion: Comprehensiveness and coherence of the logical framework of the intervention, considering the formulation of CD outcomes, outputs, targets and activities, and corresponding procedures for follow-up.</p> <p>Score 5: Clear and comprehensive intervention logic</p> <p>Score 4: Complete intervention logic with all main elements in place, only minor shortcomings</p> <p>Score 3: Intervention logic in place, but lacking some elements or linkages between them</p> <p>Score 2: Rudimentary intervention logic lacking important elements</p> <p>Score 1: No explicit intervention logic</p>
/ RO2: Quality of monitoring system	<p>Judgement criterion: Comprehensiveness and coherence of the procedures for monitoring progress and achievements, in particular in relation to CD, and considering the alignment with the intervention logic and the practical application during implementation.</p> <p>Score 5: Monitoring procedures in place and used, covering all capacities targeted by the intervention</p> <p>Score 4: Monitoring procedures largely in place, but some shortcomings in their use and/or coverage of CD processes and results</p> <p>Score 3: Monitoring procedures in place, but with important shortcomings in terms of use and/or coverage of CD processes and results</p> <p>Score 2: Rudimentary monitoring procedures, insufficiently developed and used relative to CD processes and results</p> <p>Score 1: No monitoring procedure elaborated or used</p>
/ RO3: Quality of reporting on CD	<p>Judgement criterion: Timeliness, comprehensiveness and usefulness of reporting, in particular in relation to CD, and considering the alignment with the monitoring procedures defined for the intervention.</p> <p>Score 5: Timely, comprehensive and useful reporting on all relevant capacity dimensions</p> <p>Score 4: Reporting in general timely, comprehensive and useful, but with some minor shortcomings relative to CD processes and results</p>

Component / Factor	Judgement criteria and extreme scores
	<p>Score 3: Reporting with some shortcomings in terms of timeliness, comprehensiveness and usefulness, notably with respect to CD processes and results</p> <p>Score 2: Reporting with major shortcomings in terms of timeliness, comprehensiveness and usefulness, notably with respect to CD processes and results</p> <p>Score 1: No reporting</p>
/ R04: Quality of knowledge management	<p>Judgement criterion: Existence of procedures for sharing, learning from and acting on the information produced within the scope of the intervention, in particular in relation to CD.</p> <p>Score 5: Knowledge management procedures in place enabling learning and accountability</p> <p>Score 4: Knowledge management generally adequate, enabling learning and accountability, but with minor shortcomings</p> <p>Score 3: Knowledge management procedures in place, but with important shortcomings for the management of CD processes</p> <p>Score 2: Knowledge management procedures with major shortcomings impairing an adequate management of CD processes</p> <p>Score 1: No knowledge management procedures</p>

Table 14 compiles all scores given to the factors and hypothesis components, as well as to the degree of achievement of CD results of the eight interventions included in the country-studies.

Table 15 immediately below provides a brief motivation for each of these scores.

Table 14. Summary of scores for all factors and hypothesis components, and degree of achievement of CD results, including average for each of the eight country-study interventions

Component / Factor	Intervention								Avg.
	SWM	PIS	MTS	NALEP	KWSP	PRK	CDPF	QA	
CD Results	4.0	3.5	4.0	4.0	3.0	3.0	3.0	4.5	3.6
Adequacy	3.5	2.5	4.0	3.2	2.7	2.8	2.9	3.7	3.2
/ A1: Level of effort	4.0	4.0	5.0	4.0	3.0	3.0	3.0	4.0	3.8
/ A2: Use of champions	1.0	1.0	1.0	2.0	1.0	2.0	1.0	1.0	1.3
/ A3: Use of change agents	3.0	2.0	3.0	4.0	2.0	3.0	3.5	4.0	3.1
/ A4: Timing & scheduling	5.0	2.0	5.0	4.0	4.0	3.0	3.0	4.0	3.8
/ A5: Staging	4.0	3.0	5.0	3.0	4.0	4.0	4.0	5.0	4.0
/ A6: Clarity of CD results	4.0	3.0	5.0	5.0	2.0	2.0	3.0	4.0	3.5
Responsiveness	4.0	3.4	4.2	4.4	3.2	3.0	3.9	4.4	3.8
/ R1: Legitimacy of donor	4.0	4.0	4.0	5.0	5.0	4.0	3.0	5.0	4.3
/ R2: Understanding of setting	4.0	4.0	5.0	5.0	4.0	3.0	5.0	5.0	4.4
/ R3: Clarity of CD results	4.0	3.0	5.0	5.0	2.0	2.0	3.0	4.0	3.5
/ R4: Follow-up of CD support	4.0	2.0	3.0	4.0	2.0	3.0	4.0	4.0	3.3
/ R5: Incentives for donor staff	4.0	4.0	4.0	3.0	3.0	3.0	4.0	4.0	3.6
Push- / pull-approach	2.0	1.0	2.0	3.0	3.0	3.0	3.0	1.0	2.3
Results-orientation	2.8	2.3	2.5	3,3	2,5	2,0	3,0	4,0	2,8
/ R01: Clarity of intervention logic/ToC	4.0	3.0	4.0	4.0	3.0	2.0	3.0	4.0	3.4
/ R02: Quality of monitoring system	3.0	2.0	2.0	4.0	3.0	2.0	3.0	4.0	2.9
/ R03: Quality of reporting on CD	2.0	2.0	2.0	3.0	2.0	2.0	3.0	4.0	2.5
/ R04: Quality of knowledge management	2.0	2.0	2.0	2.0	2.0	2.0	3.0	4.0	2.4

Table 15. Motivation of the scores for each of the country-study interventions

Municipal Programme for Solid Waste Management in Bosnia and Herzegovina (SWM)

A1 – Level of effort: 4

The project set out to address an issue requiring a rather varied set of capacities (i.e. complex in the words of the approach paper), and decided to focus on a sub-set of these with which it could work and on which a basis for further development of SWM systems could be elaborated. The technical capacity provided by Sida/Grontmij proved to be adequate for the technical CD requirements of the project. Geographical dispersion of the project appears to have strained the Sida/Grontmij team somewhat, given the apparent inability towards the end of the project to deal with problems that could have benefited from more regular presence at the municipalities where such problems arose. The capacity of the project team was reduced during the fourth year of the project due to an unanticipated prolonged absence of the team leader.

The project did not address issues of incentives of partners to perform, as it was beyond its powers. The project is not regarded as raising any issues relative to the interests of elites or alignment with dominant social norms or values. These last three aspects do not appear to have played any relevant role in the way the project operated or the results it achieved.

A2 – Use of champions: 1

The intervention has not worked through any champions at any of the different administrative levels.

A3 – Use of change agents: 3

The intervention focused on providing capacity to staff in the municipalities and respective utility companies who could subsequently act as change agents relative to the development of the SWM system. However, the project did not provide these individuals any specific capacity in organisational change management, instead implicitly assuming that the technical capacity provided by the intervention would equip them sufficiently to introduce and manage change in their organisations.

The intervention has not employed change agents at higher administrative levels.

A4 – Timing and scheduling: 5

A5 – Staging: 4

[Joint motivation for A4 and A5] The timing of the project was adequate given policy developments and support by other donors, as was its rhythm, but criticism has been directly at the decision to expand the number of project municipalities, which has limited the support given to first-phase municipalities and resulted in the late-comers having less time to consolidate changes while the project was still running (e.g. some municipalities have received equipment only after the formal end of the activities of the project, and hence will not receive any project support when they actually start using the equipment donated by the project).

A6 – Clarity of CD results: 4

The vision of the results to achieve at municipal level was clear from the outset, and was made explicit inter alia in the Capacity Building Programme and the Performance-based Monitoring Plan elaborated during the Inception Phase. The same cannot be said of the results to be expected from the awareness raising and the legal-institutional components, which were never elaborated in an equally explicit and clear manner. These latter two components constituted relatively minor components of the intervention, and hence do not affect the score as much.

R1 – Legitimacy of donor: 4

Sida/Grontmij have overwhelmingly been accepted as a legitimate partner for the task at hand; in addition to the good relationship established with its partners during the project, there are repeated requests at its end to continue the collaboration. This has, according to most of the interviewees, not always been the case with other donors. Key to the acceptance of the Sida/Grontmij intervention appear to have been the technical quality of the support provided and the fact that the project enabled municipalities – and to a lesser extent partners in higher administrative levels – to adopt strategies and plans relevant to their specific situation (the most visible have been the SWM plans elaborated by municipal staff, but even the content of the events in the legal-institutional component was largely determined by BiH partners). Ownership of intervention design and results by state- and entity-level ministries has been significantly lower, which may be interpreted as a reaction to the explicit intention of the intervention to concentrate the support on the municipalities.

R2 – Understanding of setting: 4

Sida/Grontmij have demonstrated a generally adequate understanding of and ability to work in the specific political and administrative context of BiH, and work with municipalities have, in most cases, advanced with any major concerns. (The initial imposition of the BiH procurement system, which has been repeatedly criticised, may be interpreted as lack of understanding of the reality of public procurement, but may equally be interpreted as an attempt to actually test the system and see if and how it could work).

R3 – Clarity of CD results: 4

The vision of the results to achieve at municipal level was clear from the outset, and was made explicit inter alia in the Capacity Building Programme and the Performance-based Monitoring Plan elaborated during the Inception Phase. The same cannot be said of the results to be expected from the awareness raising and the legal-institutional components, which were never elaborated in an equally explicit and clear manner. These latter two components constituted relatively minor components of the intervention, and hence do not affect the score as much.

R4 – Follow-up of CD support: 4

Generally adequate attention has been provided to developing individual capacities, providing specific technical solutions for municipalities and municipal utility companies. Attention has also been paid to issues of HRM, organisational structure or administrative and financial management, which, according to interviewees, are generally of adequate standard throughout BiH. CD was monitored regularly at the level of tangible outputs or outcomes of the employment of the new capacities and not at the level of acquisition of the capacities. There was very little attention paid to systematic follow-up of the multiple dimensions of organisational or institutional capacity.

R5 – Incentives for donor staff: 4

While there is no evidence of missing or misplaced incentives affecting the commitment of Sida or Grontmij staff to achieving CD results, the last year of the project has been marked by a growing mutual discontent on the perceived degree of engagement in the project, which may be due to diminishing incentives/motivation to solve outstanding problems. This is Sida's view, not shared by Grontmij.

Pull-push Approach Score: 2

The intervention was mostly supply-side driven, with design and implementation determined by Sida in consultation with public authorities in BiH. The public awareness component might be regarded as an attempt at having a demand-side influence the functioning of SWM systems in BiH, but this was not only a minor component and one that had very limited effect.

R01 – Clarity of intervention logic: 4

The intervention lacked a clear results logic in its original project document, but this was rectified during the inception phase with the production of the Performance Monitoring Plan, which contained a well-articulated and comprehensive ToC. Monitoring plans were produced accordingly at the targeted municipalities. A similarly well-elaborated logic was never produced for the awareness raising and legal-institutional components of the intervention.

R02 – Quality of CD monitoring system: 3

The monitoring system for municipal-level performance was carefully elaborated and implemented at the participating municipalities, although some inconsistencies have been recorded in terms of actual monitoring work and reporting by them. Only a few CD dimensions have been monitored, the municipal KPI-based system focusing primarily on issues of the performance of SWM systems, not on the different individual and organisations capacities developed. The monitoring of the awareness raising and the legal-institutional components has neither been clearly elaborated nor systematically performed. The Sida external monitoring consultant did not monitor the capacities targeted by the intervention.

R03 – Quality of reporting on CD: 2

The only systematic reporting related to the capacities developed in the project have been the periodic reporting by municipalities based on the KPI-system embedded in the SWM plans, which, as mentioned above, mainly focused on issues of performance of the SWM system, and encountered some inconsistencies in its practical application. No other regular and systematic reporting of CD took place.

R04 – Quality of knowledge management: 2

Knowledge management and learning involving Sida and partners only takes place at annual project advisory board meetings. Partners at local level do not take part in these and have little or no opportunities to review results and engage directly with Sida. Difficult to assess all instances of use of information produced in the project.

Partnership in Statistics in BiH, phase III (PiS)**A1 – Level of effort: 4**

On a technical level, Sida/SCB has been able to provide the necessary expertise, although occasionally with small delays due to unavailability of specific experts. The same has not been true in terms of capacity to work with higher-level management change, due likely to a combination of lack of willingness from partner institutes, and lack of capacity to influence at that level on the part of Sida/SCB. The time-horizon was adequate at start, but negatively influenced by other priorities at the institutes, which could have been anticipated and dealt with at the outset.

A2 – Use of champions: 1

The intervention did not make use of any champions.

A3 – Use of change agents: 2

The project has worked with and through staff at the partner institutes, who have been the main internal change agents with respect to technical issues. However, it is not clear how the role of these individuals as *de facto* change agents will unfold in the future, after completion of the intervention, as their responsibilities in this domains have not been explicitly addressed – for the most part these individuals were focal/contact points for specific components of the intervention, and not explicitly tasked with advancing CD-related activities beyond those directly implemented by the intervention. No training in domains related to change management was provided.

A4 – Timing and scheduling: 2

The timing has been inadequate and rightly criticised as it led to the intervention coinciding with the national population census, which severely affected the availability of resources at the partner institutes to engage in intervention activities. The decision to have phase III follow directly from phase II can be justified with the desire to ensure better continuity between the two phases, but the consequences of this decision proved too negative for the results.

A5 – Staging: 3

The project did not employ an explicitly incremental approach, and this might not have been necessary given the technical capacities to be developed. Such an approach could have been beneficial for the work with top level management, but the actions in this component suffered more from a general lack of direction than from an inadequate sequencing of activities.

A6 – Clarity of CD results: 3

Vision and results were clear with respect to the technical dimensions, less so with respect to the managerial ones.

R1 – Legitimacy of donor: 4

The Sida/SCB support has been regarded as very valuable and necessary by the three partner institutes, and the project has been designed with their priorities in mind. At the level of managerial change, the support does not seem to have attained the entry points and legitimacy it needed to make changes.

R2 – Understanding of setting: 4

Sida/SCB are well familiarised with the specific context of BiH, specifically with respect to its statistics sector. The project has targeted competence development needs that are known to be necessary for the institutes to attain longer-term goals, and the project had a clear set of activities and set goals related to these. The understanding of the availability of top management to engage in change processes, and the ability to select the best entry points for this work appear to have been weaker points on the part of Sida/SCB.

R3 – Clarity of CD results: 3

Vision and results were clear with respect to the technical dimensions, less so with respect to the managerial ones.

R4 – Follow-up of CD support: 2

Follow-up of CD was generally lacking, without any systematic monitoring of the capacities acquired by individuals trained in the project, let alone of those at organisational level.

R5 – Incentives for donor staff: 4

SCB has had occasional difficulties in recruiting its own staff for missions in BiH, which may result from either lack of own capacity to provide external support, or insufficient incentives to own staff to engage in such missions. On the whole, however, there is no evidence of generalised shortage or inadequacy of incentives for Sida/SCB staff to work towards CD results.

Pull-push Approach Score: 1

Only push-approach was employed, as the intervention only worked with the producers of statistical information, not its receivers/users or directly with any oversight institution.

RO1 – Clarity of intervention logic: 3

The initial intervention logic contained in the project document was vague and lacking essential elements. This was subsequently corrected in the 2012 and 2013 RBM workshops, which produced clearer and more easily actionable logical frameworks. Their actual use remained uncertain, though.

R02 – Quality of CD monitoring system: 2

No systematic monitoring of CD was ever established, despite elements of it having been described in the frameworks developed at the RBM workshops. Periodic monitoring presumably based on observation was conducted by SCB staff and used in the reporting to Sida, but without systematic reference to the different capacities developed at individual, institute or statistics system level.

R03 – Quality of reporting on CD: 2

Following from the above, reporting did not follow any systematic procedure for monitoring CD progress and results. The periodic reporting to Sida contained mostly the observations by SCB staff, with very few references to actual evidence.

R04 – Quality of knowledge management: 2

Knowledge management and learning involving Sida and partners only takes place at annual project advisory board meetings. There were doubts about the extent to which project reports are shared and discussed with management at the partner organisations and a clear discontent on the part of the Federal Institute for Statistics (FIS) and the Republika Srpska Institute for Statistics (RSIS) due to the decision about the continuation of the project being taken without their knowledge and involvement.

Municipal Training System Project, phase II (MTS)**A1 – Level of effort: 5**

The 'subject' of the intervention is very complex, considering its internal organisational structures as well as the numerous external factors. The latter in case of BiH are very complex and very influential. The level of effort by Sida/UNDP has matched requirements of the proposed CD.

A2 – Use of champions: 1

The intervention has not employed any champions.

A3 – Use of change agents: 3

The intervention has implicitly used change agents, without explicitly providing them with any change management capacitation. Some of these individuals have been supported by the intervention in initiatives to further develop training systems at their work places. This support has been predominantly technical.

A4 – Timing and scheduling: 5

The intervention has been perfectly aligned with the ongoing public administration reform process in the country, and addressed a component of this reform that was seen as lagging behind. With its two phases, the intervention is regarded as having had the necessary duration so far.

A5 – Staging: 5

The incremental approach to municipality training system development realised through two phases where the first phase was focused on creating strategic and regulatory framework and second phase focused on trainings are assessed as very adequate.

A6 – Clarity of CD results: 5

The achievements in terms of CD have been clear from the beginning, and consistent throughout the two phases of the intervention.

R1 – Legitimacy of donor: 4

Ownership by all local partners is assessed as high throughout the entire intervention. The intervention has had limited success in involving mayors, which may point at somewhat reduced ownership by top political spheres, at least in the municipalities.

R2 – Understanding of setting: 5

Both Sida and UNDP had good holistic understanding of the situation and influence of all relevant factors and stakeholders, and this was used in design and implementation.

R3 – Clarity of CD results: 5

The achievements in terms of CD have been clear from the beginning, and consistent throughout the two phases of the intervention.

R4 – Follow-up of CD support: 3

While there have been some attempts to monitor and report on achievements in terms of the capacities acquired as a result of the intervention, this has not yet been adequately implemented. Reporting remained mostly narrative and focused on operational achievements throughout both phases.

R5 – Incentives for donor staff: 4

Incentives have been adequate for Sida/UNDP to work towards agreed CD results. No specific incentives for this project.

Pull-push Approach Score: 2

There has not been any explicit engagement of end-users of the municipal services that the intervention ultimately aimed at improving. The Civil Service Agency, which is mandated to oversee matters concerning local level administration in BiH, has been a key partner in the intervention, but has been employed mostly as partner in the development and delivery of the training system, not in monitoring/controlling it. The CSA did however occasionally act as oversight institution, but this is not a role that the intervention has explicitly made use of.

The intervention has largely been supply-driven (push-approach).

RO1 – Clarity of intervention logic: 4

The intervention has had an unusually well-elaborated logical framework, the weaker point of which was the absence of a clear schedule and procedures for monitoring data collection and analysis.

RO2 – Quality of CD monitoring system: 2

It is unclear how regular monitoring was done, and whether it followed the Project Results and Resources Framework, as reporting does not follow its content.

RO3 – Quality of reporting on CD: 2

Reporting did neither follow the elements of the Project Results and Resources Framework, nor contain any detail on the multiple dimensions of capacity that the intervention sought to develop.

RO4 – Quality of knowledge management: 2

There is no evidence of a knowledge management system having been used at Sida or UNDP for learning from the results and experience of this project. Contact between Sida and partners at central and entity level only on annual basis at advisory board meetings. No evidence of Sida sharing knowledge with and learning from partners at municipalities where project was implemented.

National Agriculture and Livestock Extension Project, phase II (NALEP)**A1 – Level of effort: 4**

The level of effort was relatively commensurate with capacity in phase 2. NALEP 2 built on capacity developed in Phase1 which also benefitted from previous programme. Trained Staff (with basic training) available locally while government resources for sector development also available;

A2 – Use of champions:2

No evidence of clear champions except individual members of government who prioritised extension services in ERSWEC and SRA.

A3 – Use of change agents: 4

Successful establishment of rural stakeholder-based extension services providing necessary support to farmers, and compensating weaknesses of government extension services. NALEP has become synonymous with rural extension services in Kenya.

A4 – Timing and scheduling: 4

NALEP 2 demand driven and aligned to Country and sector strategy. With this the timing of the programme implicitly came to correspond with the government timing of the implementation.

A5 – Staging: 3

No incremental of big-bang approach. But pace adequate as programme designed and implemented in a fast pace but taking due cognisance of capacities and demands as identified in annual work plans;

A6 – Clarity of CD results: 5

The outcomes and goals clear at design stage in line with national sector goals.

R1 – Legitimacy of donor: 5

Programme developed to support national strategy – NASEP. Swedish participation welcomed and legitimate throughout, attested by support that extends to this day (e.g. ASDSP).

R2 – Understanding of setting: 5

Each of the phases of NALEP informed by earlier SIDA interventions while NALEP proposal negotiated with a reform-minded government. Sida responded to a request for capacity to implement the strategy. Sida's did thus fully understand the setting.

R3 – Clarity of CD results: 5

Note: Same as A6, please see above.

R4 – Follow-up of CD support: 4

Effective during the entire NALEP period

R5 – Incentives for donor staff: 3

Work plans and action plans geared towards achieving the goals of CD, which indirectly worked as incentives. Field staff informed that the substantial achievements was what made them accept that other incentives were not in place.

Pull-push Approach Score: 3

Involvement of critical stakeholders is pivotal at design and implementation stages; In NALEP2 action plans and budgeting (use of a participatory approach) provided an avenue for both donors and beneficiaries to draw and implement activities with better chances of success. Programme included component for empowering communities to demand better extension services.

R01 – Clarity of intervention logic: 4

Results well defined. Final results framework developed following a series of iterations and improvements.

R02 – Quality of CD monitoring: 4

Monitoring effective in NALEP 2, although breakdown of capacities not comprehensive. NALEP 1 more of policing;

R03 – Quality of reporting on CD: 3

Programme reporting timely at all stages, but monitoring system not applied in periodic reporting.

R04 – Quality of knowledge management: 2

Both SIDA and Management structure put in place are able to relate to and handle reports, while there are no systems and resources to respond to challenges which emerge in the reports. There is effective follow-up of decisions made.

Kenya Water and Sanitation Programme (KWSP)**A1 – Level of effort: 3**

The level of efforts from the embassy side was in accordance with the hands-off approach, while the partner level was affected by a negative attitude towards the implemented changes, which resulted in staff distancing themselves from the activities and changes. The problem was later overcome, but delayed results. The possible available capacities were not effectively utilised.

A2 – Use of champions: 1

There was no use of champions

A3 – Use of change agents: 2

There was unintended use of change agent, namely specific members of government. These played an important role in initially profiling and pushing the programme.

A4 – Timing and scheduling: 4

The timing was very good as the programme responded to governmental need for implementing new policies and acts. The phasing of the programmes (three years) without having a longer conditional vision – maybe 10 years – to fully establish and internalise the changes makes the programmes lose powers towards the end, while having to build momentum again when the next phase has been agreed. Valuable energies and continuity gets lost, which is damaging when development concerns systems and structures.

A5 – Staging: 4

The programmes had a gradual approach, which has to be balanced with the timing not to lose momentum. Time was provided to overcome barriers, change in political landscape etc.

A6 – Clarity of CD results: 2

The vision was clear, while the road to the vision was unclear and not fully accounted for in results framework, use of monitoring and in the reporting – the latter never reporting against the vision or on CD specific achievements

R1 – Legitimacy of donor: 5

The programme was fully owned by the partner, also when facing internal resistance against the programme. This resulted in changed structures, moving of staff, staff “clans” etc. The structure and the included staff are now all working as initially intended. Sida is regarded as instrumental in this process, a welcome and legitimate partner to support the intended CD processes.

R2 – Understanding of setting: 4

Overall Sida has a very good understanding of the setting, which has also enabled a smooth continuation when barriers arose. It would have been more effective, though, to have wider assessments, which can define potential barriers, as this would reduce unintended reactions and effects during implementation.

R3 – Clarity of CD results: 2

The distinction between CD results and other results is not clear. This makes monitoring report mainly on more direct technical results such as constructions, provision of equipment, kilometres of water pipes provided etc. although this part made up approximately 20-25% of the efforts/inputs in time and funds. It was therefore not possible to directly assess the outcomes of the programme. The assessment is partly based on a direct reporting, interviewee replies and conclusions made from the recorded achievements – the latter proving that some new capacities must have been place.

R4 – Follow-up of CD results: 2

Apart from the formalised and compulsory follow-up in terms of NSC meetings, there is no formal follow-up e.g. discussions of reported progress and challenges when reports are submitted. If contacted Sida provides the required support to the extent possible. The devolved levels were never engaged in monitoring or learning from monitoring.

R5 – Incentives for donor staff: 3

Unless the involved staff have a personal interest in gaining professional experience with CD, there are no specific incentives to Sida staff. The working conditions and environment, salary and “working towards results”-culture at Sida generally constitute adequate incentives, but the currently heavy workload constrains possibilities to engage with the project and partners.

Pull-push Approach Score: 3

The trained beneficiaries provided some pressure for having a conducive programme environment. They partly acted as the pull factor, at times in a very challenging work environment. No external institution was supported to oversee the Water Resources Management Authority or the overall sector performance.

R01 – Clarity of intervention logic: 3

Despite the little use of RBM, the intervention logic was quite clear and comprehensive involving all levels of stakeholders in the implementation.

R02 – Quality of CD monitoring system: 3

The monitoring was initially not in place, but came later focusing on inputs-outputs and little on results in terms of outcomes and impact. Although starting early, it might have been worthwhile to later amend the logframe and monitoring to fit the new criteria.

R03 – Quality of reporting on CD: 2

The reporting was timely, but did only account little for CD interventions and results. The reporting was characterised as cumbersome by partners and Sida staff. The reporting was not done systematically against targets and had no CD specific findings

R04 – Quality of knowledge management: 2

There was no formal knowledge management system in place – neither at Sida, nor at partner level. But clear learning from evaluations was found as experience from phase came to form the foundation for the next.

Swedish Support to Police Reform in Kenya (PRK)

A1 – Level of effort: 3

The Kenyans made a good effort to identify shortcomings in the police forces, in terms of competencies and structures. They also looked for the most suitable partner for various shortcomings. However, the steering tools for the Swedish funded programme were inadequate.

A2 – Use of champions: 2

In the community policing component a few partners became influential champions, such as religious groups and the Red Cross, but their action was constrained by low engagement of other key partners (e.g. in government). Their use was not strategically planned or prepared for.

A3 – Use of change agents: 3

Some high level government members acted as change agents and played a role in the attaining project results. Their role was not strategically planned for and their capacity to work as change agents was not adequately assessed or developed.

A4 – Timing and scheduling: 3

The start of the programme was almost perfect in terms of timing. The duration (one year at the time, times four) was much too short from a CD perspective but understandable from an “accountability” perspective as the government of Kenya were late in coming forward with the management capacity required.

A5 – Staging: 4

The programme was quite flexible and adjusted to the Kenyan ability to absorb the assistance. Very slow initially, before the necessary management came on-board, but once basic structures were in place the implementation pace increased.

A6 – Clarity of CD results: 2

There is a logframe in the project document and some intended results (at the output level) are stated. However, the RBM as a system is poor having unclear outputs and outcomes, which reduces clarity.

R1 – Legitimacy of donor: 4

The Kenyans had defined the problem areas, where they needed assistance and by whom. They also played a key role in the annual planning of the Sida funded programme. Sida was a legitimate partner invited to help government with a set of priority reforms.

R2 – Understanding of setting: 3

The setting was rather unclear to both parties (Sida and the Kenyans) as the merging of the two police forces was a complex matter. However, Sida had taken part in discussions and had studied the Ransley report that contained a (not comprehensive) problem analysis and a strategic plan for the way forward.

R3 – Clarity of CD results: 2

Note: See A6 above.

R4 – Follow-up of CD results: 3

The follow-up by Sida consisted of reading and commenting on the rather poor progress reports written by the TAs. There were some concerns from the Sida side and hence extensions were given one year at a time.

R5 – Incentives for donor staff: 3

No particular incentives specific for this programme, positive or negative. Generically Sida staff has an adequate incentives package in terms of salary, work conditions and environment. There is an explicit institutional orientation towards achieving results, although much time is spent on administering and the internal reporting of projects.

Pull- push Approach Score: 3

The community policing project has a clear pull-approach as there are community groups meeting with the local police station on a monthly basis, in order to determine progress, problems and what measures to be taken. Other components of the police reform programme are clearly push oriented.

R01 – Clarity of intervention logic: 2

RBM efforts are there (as from year two) but they are rather poor. Outputs and outcomes are generally poorly defined and there are few useful key performance indicators.

R02 – Quality of CD monitoring system: 2

As the RBM is poor, monitoring is difficult. Little focus on results and more focus on activities in the reporting. Budget follow-up appears to be OK from Sida and RPS.

R03 – Quality of reporting on CD: 2

There are progress reports but they are irregular and do not address “progress” in a systematic manner. A template would be required.

R04 – Quality of knowledge management: 2

There is no clear evidence of knowledge management *systems* in PRK. However, there are quite a number of “lessons learnt” during this programme. These have had a positive impact on annual plans for years 2, 3 and 4.

Education Capacity Development Partnership Fund (CDPF)**A1 – Level of effort: 4 (national level) 2 (subnational level)**

CDPF addresses complex CD issues in relation to specificity of the products and services and the scope of the capacities to be developed. Bot aligned and contradictory incentives to performance can be found like the MoEYS organisation is being changed to be able to implement and use the systems and skills developed within CDPF and the top leadership motivates management to implement the programme. On the other hand the combined incentives at systemic level (salary scales, top down decision making culture) constitute a general barrier to CDPF. Part of the capacities to be developed like decentralised planning is somewhat contrary to the dominant social and cultural norms. Although programme management and MoEYS top leadership have insights into the complexity of the CD at hand CDPF’s outcomes have not been defined. Assuming that CDPF should support achievement of the Master Plan for Capacity Development, it appears that the budget and time estimated to achieve the result is too low. Simultaneously, considerable support and effort has been undertaken at national level MoEYS and to some but lesser degree at province level. At national level the effort is rather aligned to the complexity of the capacities to be developed. However, activities at subnational level are inadequate to achieve the expected results as expressed in annual plans. The adequacy of level of effort therefore varies between national and subnational levels.

A2 – Use of champions: 1

The intervention does not seem to involve external champions. The process is driven internally from the partner institution as well as supported by the donors. It is assessed as 1.

A3 – Use of change agents: 4 (national level) 3 (subnational level)

Change agents have been considered in the design as well as in the implementation of CDPF, with particular individuals or key departments at MoEYS involving both middle and top management.

A4 – Timing and scheduling: 4 (national level) 2 (subnational level)

CDPF started at an adequate time, needs were there, the process with the new capacity development plan was initiating. Duration was however a bit short compared to needs on national level but inadequate considering the subnational levels of district and schools.

A5 – Staging: 5 (national level) 3 (subnational level)

Design and implementation of CDPF has considered timing factors and basic idea is to develop the capacities of the partner institution to manage its CD at central level MoEYS and to some less degree on province level. At national and subnational (province only) CDPF uses an incremental approach where training in management and planning of key staff in the partner organisation is prioritised to build internal capacities and adequate rhythms of change process in the CD of the MoEYS. On subnational levels of district and schools the approach has been a mix of big bang and incremental approach. Certain activities decided from the top are supported at subnational level and limited analysis of change approach has been done.

A6 – Clarity of CD results: 4 (national level) 2 (subnational level)

Clarity of vision and results has been varied depending on the actor with national levels quite aware and clear on results. At subnational level there is limited or no clarity of the overall CD results to be achieved. Moreover, key actors and top management within MoEYS (partner institution) are concerned about the results and pushing the programme forward. At subnational levels there appears to be less concern particularly since they lack information about the programme.

R1 – Legitimacy of donor: 4 (national level) 2 (subnational level)

Overall the partner institution owns the CDPF and defines the scope and content of the programme. Steering is chaired between donors and MoEYS. This mix of ownership and joint steering appears to have been positive for CD results. On subnational level there is limited ownership of CDPF since all matters are decided at the national level.

R2 – Understanding of setting: 5

Sida as well as the other donors have long experience of the education sector in Cambodia. They have experienced staff with sector competence involved in the programmes. The knowledge of CD is however somewhat more limited in some of the donors' staff. Through the Master Plan for Capacity Development, donors as well as the national partner organisation have a good understanding of the setting overall.

R3 – Clarity of CD results: 4 (national level) 2 (subnational level)

Note: Same as A6, please see above

R4 – Follow-up of CD support: 4

Sida as well as the other donors follow up CDPF's results through the joint steering group. Donors seem to dedicate time to analyse CDPF and the CD results achieved. The follow up is made more difficult as a result of deficiencies in the RBM approach of CDPF.

R5 – Incentives for donor staff: 4

CDPF seems to be an important priority for Sida and it appears that Sida staff value the programme and Sida management expresses clear interest. Since CD results are the main objective of CDPF there is an incentive to achieve CD results. However, other donors involved reported that incentives to achieve good CD results were sometimes not there, and that innovative approaches were not regarded as important. The interest of the specific desk officer was cited as an important ingredients to support CD.

Pull-push Approach Score: 3

CDPF's design mainly focused on improving the supply side of the institution (a push approach) particularly at national level, but aspects of demand/pull approach can be found in the programme. Intents to work with pull and push approaches in CDPF can be found at the subnational level through efforts to strengthen the provincial Education Sector Working Groups (ESWG) and the Joint Technical Working Group (JWTG), a provincial inter-sectorial working group. However, so far the JWTGs do not seem to perform as expected and there is a limited connection between the provincial NGOs and the MoEYS (POEs). The push and pull approach is therefore not working in practice. At school level, the programme includes a combined pull and push approach through school development plans and training of School Support Committees.

R01 – Clarity of intervention logic: 3

CDPF phase 1 does not have a comprehensive ToC and final outcome indicators are lacking. But the programme is based on the Master Plan for Capacity Development which contains outcome indicators at a general level and CDPF's intervention is aligned with the masterplan as well as the annual workplan of the MoEYS. Moreover, CDPF has annual outcome indicators for each result area. Intervention logic is clearer at national level but needs based analysis based on definition of CD capacity development needs are not there.

R02 – Quality of CD monitoring system: 3

CDPF has a monitoring system (M&E systems) and it is used to follow up results on annual basis. The system has strengths as well as weaknesses.

R03 – Quality of reporting on CD: 3

Reports are made but due to deficiencies in the monitoring system and the clarity of the intervention logic affect the quality of the reporting on CD. Moreover reporting is mostly used at national level and do not benefit subnational levels.

R04 – Quality of knowledge management: 3

CDPF uses lessons learnt from reports and from monitoring to improve aspects of the programme. But the system for knowledge management has several weaknesses.

Programme for Development of Quality Assurance (QA)**A1 – Level of effort: 4**

The QA can be considered a medium complex with a scope and distribution of capacities involving various departments and also the service to be provided by MoEYS is not very specific but wide. Furthermore, incentive system is generally a problem due to low salaries but on the other hand MoEYS has taken action to align incentive system with CD goals of QA. Particular problem for QA has been the no payment of training per diem which is contrary. Part of the capacities to be developed like detailed measuring is somewhat contrary to the dominant social and cultural norms. In general the QA programme cover all the areas needed for the development of the quality assurance system. Moreover efforts are sufficient in several areas but limited in the development of system (cost of software) and the cost of training of inspectors. Furthermore, the involvement of subnational levels could have supported a better system as well as a more adequate system and facilitated the acceptance of the system and the implementation. Expected outcomes are too optimistic to achieve during the project period and therefore the level of effort was not adequate.

A2 – Use of champions: 1

The intervention does not seem to involve external champions. The process is driven internally from the partner institution as well as supported by the donors.

A3 – Use of change agents: 4

Change agents have been considered in the design as well as in the implementation of QA, with particular individuals and key departments at MoEYS involving both middle and top management.

A4 – Timing and scheduling: 4

QA started at an adequate time, needs were there. With time and organisational change the new inspection system has become even more of a top priority in MoEYS. Duration was however a short compared to the expected CD results particularly institutionalisation of the developed system and becoming the only national system used.

A5 – Staging: 5

QA definitely uses an incremental approach where to build internal capacities in MoEYS to develop and use the new quality control system at national levels. The programme strategy is to advance and follow the rhythm of the MoEYS capacity.

Design and implementation of CDPF has considered timing factors and basic idea is to develop the capacities of the partner institution to manage its CD at central level MoEYS and to some less degree on province level. At national and subnational (province only) CDPF uses an incremental approach where training in management and planning of key staff in the partner organisation is prioritised to build internal capacities and adequate rhythms of change process in the CD of the MoEYS. On subnational levels of district and schools the approach has been a mix of big bang and incremental approach. Certain activities decided from the top are supported at subnational level and limited analysis of change approach has been done.

A6 – Clarity of CD results: 4

Clarity of vision and results has been there at all levels within the two twinning partners School Inspection and MoEYS. Sida as a donor has also clear understanding. Moreover, key actors and top management within MoEYS (partner institution) are concerned about the results and pushing the programme forward.

R1 – Legitimacy of donor: 5

Overall the partner institution owns the QA and defines the scope and content of the programme. Steering is chaired between Swedish twinning partner and MoEYS but done as an equal relationship. On subnational level there is limited ownership of CDPF since all matters are decided at the national level.

R2 – Understanding of context: 5

Sida has a long experience of the education sector in Cambodia. Sida has experienced staff with sector competence involved in the programme leading to quality dialogue. The knowledge of CD is however somewhat more limited in some of the donors' staff.

R3 – Clarity of CD results: 4

Note: Same as A6, please see above

R4 – Follow-up on CD support: 4

Sida follows up QA programme results and participates in the steering committee. Sida seems to dedicate time to analyse QA and the CD results achieved.

R5 – Incentives for donor staff: 4

QA seems to be an important priority for Sida and it appears that Sida staff value the programme and Sida management expresses clear interest. Since CD results are the main objective of QA there is an incentive to achieve CD results.

Overall, donor's role is highly legitimate, and the donor has long experience of the sector and rather good grasp of the situation. Incentives for desk officers to support TA are there. Appears that personnel interest and conviction have been important as well as a strong support from Sida management in Cambodia. Sida has taken time to participate in design and follow up.

Pull-push Approach Score:1

QA do not consider the pull and push approach at all. It only focuses on the push approach i.e. developing the capacity of the partner institution.

R01 – Clarity of intervention logic: 4

QA has a relatively clear intervention logic (result framework) with outcome indicators covering the four result areas. There are annual outcome indicators for each result area which have been aligned with the overall outcome indicators. Intervention logic has clear line between expected outcomes and produced outputs.

R02 – Quality of CD monitoring system: 4

QA has a monitoring system (M&E systems) and it is used to follow up results on annual basis as well as comparing annual results with the overall expected results of the programme.

R03 – Quality of reporting on CD: 4

Reports are made and used by project participants and stakeholders. The reports are clear and show the results achieved. Risks and mitigation measures are also identified.

R04 – Quality of knowledge management: 4

QA programme uses lessons learnt from reports and from monitoring to improve aspects of the programme. The system seems to be sufficient to support an adequate implementation and facilitates the achievements of results.

Support to Capacity Development – Identifying Good Practice in Swedish Development Cooperation

This report presents an evaluation of Sida support to capacity development. The purpose was to generate knowledge that will enable the evidence-based design of strategies for capacity development, provide evidence of the extent to which Swedish support to capacity development has been relevant, effective and efficient, and to generate knowledge about the impact of capacity development interventions. The evaluation includes an analysis of documentation from 29 projects, followed by country-studies in Bosnia and Herzegovina, Cambodia and Kenya.

The evaluation concluded that Sida supported interventions have made a very important contribution to capacity development results in partner organisations and that the Swedish support, in general, was adequate for the requirements of the capacity development processes. In addition, a set of good practices relative to donor support to capacity development in partner organisations was elaborated. The evaluation notes that fostering capacities in partner countries has been a recurrent objective of Swedish development cooperation, but that in the last decade capacity development has lost part of the centrality it previously had in Sida's work.

The Sida evaluation is part of an evaluation conducted jointly with Denmark and Norway. The three parallel evaluation reports were produced based on the portfolio of each agency, and will be summarised in a joint synthesis report to be delivered in 2016.



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