Outcome Harvesting Evaluation of Social and Behavior Change Capacity Strengthening Activities in Nepal

Final Report March 2020





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Acronym List

DHO	District Health Office
FWD	Family Welfare Division
GON	Government of Nepal
HC3	Health Communication Capacity Collaborative
HCD	Human-Centered Design
HD	Health Directorate
HFI	Health Facility In-Charge
ID	Identification
IEC	Information, Education, and Communication
IOM-CDPH	Institute of Medicine Central Department of Public Health
IR	Intermediate Result
KOICA	Korea International Cooperation Agency
M&E	Monitoring and Evaluation
MoHP	Ministry of Health and Population
MoSD	Ministry of Social Development
NHEICC	National Health Education Information and Communication Centre
OM	Operations Management
SBC	Social and Behavior Change
SBCC	Social and Behavior Change Communication
SSBH	Strengthening Systems for Better Health
USAID	United States Agency for International Development

Executive Summary

Overview

The USAID-funded Breakthrough ACTION Nepal project (January 2018–March 2020) aimed to **strengthen the institutional and technical capacity of the Government of Nepal (GON) to design, implement, evaluate, and coordinate effective social and behavior change (SBC) programs.** Within a recently federalized health system, Breakthrough ACTION Nepal worked at the federal, provincial, and municipality levels, with a focus on four select urban and rural municipalities in Karnali Province. Capacity strengthening activities were informed by the SBC Capacity Ecosystem[™] framework, which encourages a focus not just on individual-level capacity, but capacity at the organizational and system levels as well. As a result, Breakthrough ACTION Nepal activities focused on individual, organizational, and system-level competencies and included:

Designing, implementing, and evaluating SBC programs (Intermediate Result 1)	Coordination of SBC programming (Intermediate Result 2)
 Clarification of roles and responsibilities related to SBC Data scoping Refinement of federal guidelines for SBC implementation Enhancing accessibility to quality media, materials, and implementation guidelines Development of the SBC Palika Package (a compilation of resources and tools that will serve as a guide for integrating SBC into annual work plans at the municipal level) Development of participatory SBC action plans through a learning-by-doing approach 	 SBC capacity mapping and situation analysis Coordinating and strengthening systems and platforms at the federal level Joint monitoring and supportive supervision Updating technical messaging Strengthening the ongoing technical review process Strengthening linkages with nontraditional health partners Knowledge management and sharing with stakeholders at multiple levels

Evaluation Approach

To evaluate Breakthrough ACTION Nepal's accomplishments over the implementation period, the team used a post-hoc, qualitative evaluation technique known as "Outcome Harvesting." Outcome Harvesting is a complexity-aware methodology that is particularly useful when evaluating capacity strengthening projects, considering their complex theories of change, as well as projects being implemented in settings characterized by uncertainty (such as Nepal, where changes to the federal system continue to keep the health system in flux).

This evaluation was guided by the following research questions:

1. In what ways have the GON and other Breakthrough ACTION partners demonstrated important changes in their capacity for improved SBC, at both the local and federal levels, since the start of the Breakthrough ACTION project?

- 2. To what extent did the identified Breakthrough ACTION Nepal project outcomes exceed or fall short of the project's objectives?
- 3. How sustainable are the outcomes to which the Breakthrough ACTION Nepal project contributed?

For Outcome Harvesting, an outcome is defined as "a positive or negative change that occurred in the behavior of a system, organization, or key individual." The Outcome Harvesting process worked backwards to identify and verify outcomes at the end of the project through an in-depth document review and key informant interviews with stakeholders at the federal, provincial, and local levels. After drafting potential outcomes based on internal and external documentation, the evaluation team worked backwards to clarify the specific contribution of Breakthrough ACTION Nepal to each outcome. All outcomes in the final list reported here were both internally and externally verified.

Outcomes were categorized by level within the SBC Capacity Ecosystem[™] (individual, organizational, or system) where the changes in capacity took place. Outcomes were then analyzed thematically to identify dominant themes across verified outcomes. Outcomes were also categorized by intermediate result (IR) and assessed based on their sustainability to inform conclusions about the success of Breakthrough ACTION Nepal activities

and how to build upon such work in the future.

Key Findings

Thirty-eight outcomes of the Breakthrough ACTION Nepal project were identified and verified internally and externally.

Individual-level outcomes. Five outcomes reflected individual-level outcomes. These outcomes involved application of individuals' increased SBC capacity to identify opportunities within their existing roles and improve their engagement in SBC processes.

Organization-level outcomes. Most outcomes demonstrated capacity changes at the organizational level (n=28). The outcomes that occurred illustrate various partners and beneficiaries contributing to improved and more effective SBC processes. These outcomes included examples of:

- Partners planning, implementing, and engaging in SBC programming to meet their communities' needs;
- Partners coordinating to achieve the shared goals of improving health in their communities.

The SBC Ecosystem defines **individual-level outcomes** as those that describe a change in the SBC-related capacity of individual(s) within organizations.

individual(s) within organizations. Organization-level outcomes describe a change in the SBC-

Organization-level outcomes describe a change in the SBCrelated programmatic, institutional, or financial domains within organizations and governments.

System-level outcomes describe a change in the structures and networks connecting and supporting SBC professionals and partners across multiple organizations.

System-level outcomes. At the system level, five outcomes demonstrated improved coordination and collaboration between governmental stakeholders at different levels or between SBC partners. These system-level outcomes show the stakeholders' capacity to identify gaps and opportunities for SBC and to continue collaborating to address their communities' needs.

Across outcomes at the individual, organizational, and system levels, shared themes in changes in capacity emerged. The nine emergent themes identified were:

- Using/Expanding Breakthrough ACTION Approaches/Products (n=19)
- Planning and Implementing Evidence-Based SBC (n=16)
- Identifying Gaps or Opportunities Around SBC (n=16)
- Recognizing the Value of SBC (n=12)
- Changing Practice/Policy/Structure to Support/Sustain SBC (n=11)
- Improved Practices for Monitoring and Evaluation of SBC (n=9)
- Improved Coordination Amongst Stakeholders (n=8)
- Investing in SBC (n=8)
- Advocating for SBC (n=2)

Half of the outcomes reflected improved capacity of Breakthrough ACTION partners in using/expanding Breakthrough ACTION approaches/products (50%). Outcomes were also commonly related to improved capacity in planning and implementing evidence-based SBC (42%) and identifying gaps or opportunities around SBC (42%).

Twenty-three outcomes represented GON stakeholders' demonstrated capacity toward designing, implementing, and evaluating SBC programs (IR1). Six outcomes provided examples of how stakeholders within the GON have been coordinating and collaborating around SBC processes (IR2). As Outcome Harvesting enables the collection of both intended and unintended outcomes of projects, some outcomes (n=11) identified did not neatly fall under the pre-defined intermediate results of the Breakthrough ACTION Nepal project, but were related to the overarching goal of strengthening the institutional and technical capacity of the GON to design, implement, evaluate, and coordinate effective SBC programs.

Twenty-three outcomes were identified as sustainable according to the criteria used by the evaluation team: 18 were sustainable changes in practice and five sustainable changes in policy. Sustainable outcomes reflect the potential for lasting capacity shifts around SBC from the final list of outcomes. Sustainable outcomes were identified across all three levels of the SBC Capacity Ecosystem[™].

Conclusions

Evidence gathered and verified as part of this post-hoc, qualitative Outcome Harvesting evaluation provided multiple examples of contributions that Breakthrough ACTION Nepal made in influencing capacity shifts among its primary beneficiaries and other SBC partners.

In particular, governmental stakeholders at federal, provincial, and local levels demonstrated numerous ways in which they gained capacity in 1) designing, supporting, and implementing evidence-based SBC and 2) fostering multisectoral collaboration to address their communities' needs. These changes reflected multiple dimensions of SBC capacity and mapped on to the competencies targeted by Breakthrough ACTION Nepal. Despite the project's short duration, a number of sustainable changes at the individual, organizational, and system levels were identified, suggesting the potential for changes in SBC capacity to be sustained following the end of the project.

Together, the multidimensional outcomes captured through the Outcome Harvesting process provide evidence of Breakthrough ACTION Nepal's success in meeting its goals. Despite the short duration of the project and the timing of the evaluation, these findings demonstrate that strategic investment in strengthening the capacity of government and partner organizations can have verifiable, sustainable, and positive impacts over time.

Chapter 1: Introduction

This report describes results from a complexity-aware, qualitative evaluation, referred to as "Outcome Harvesting," of the Breakthrough ACTION Nepal System Strengthening project, beginning with an introduction to the project. Following an overview of the Nepali health system within the new federalist system, we describe the SBC Capacity Ecosystem[™] that guided programmatic activities and outline major project-led activities.

Breakthrough ACTION Nepal

The USAID-funded Breakthrough ACTION Nepal project (January 2018–March 2020) aimed to **strengthen the institutional and technical capacity of the Government of Nepal (GON) to design, implement, evaluate, and coordinate effective social and behavior change (SBC) programs**. Within the recently federalized health system, Breakthrough ACTION Nepal worked with the GON to identify the gaps and opportunities around SBC and to achieve the following intermediate results (IRs):

- IR1: Enhance the capacity of the GON to design, implement, and evaluate SBC programs
- IR2: Enhance the coordination of SBC programming

Breakthrough ACTION Nepal, a 27-month project, was implemented in partnership with the National Health Education Information Communication Center (NHEICC) and the Family Welfare Division (FWD), and in collaboration with USAID's Strengthening Systems for Better Health (SSBH) project, Suaahara II project, UNICEF, and other partners. Breakthrough ACTION aimed to strengthen the SBC system in Nepal so that stakeholders can address the health needs of local households and communities to ultimately improve outcomes across family planning, maternal, newborn, child, and adolescent health; and nutrition.

Breakthrough ACTION activities focused on the federal and provincial levels and on four municipalities within the districts of Surkhet and Jumla of Karnali Province, with one rural (*gaupalika*) and one urban (*nagarpalika*) municipality in each district.

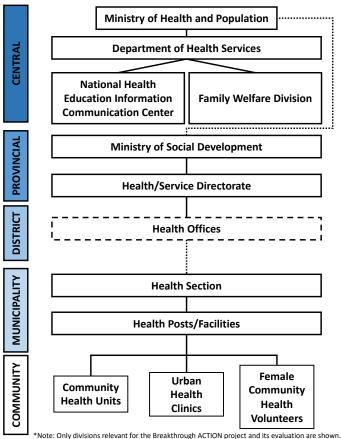
The Health System in Nepal

Nepal now has three tiers of government comprising one federal, seven provincial, and 753 local or municipal governments. As with other sectors, the health sector has undergone significant changes after federalism. Per the new constitution, local governments now have the authority to plan and execute health programs according to their communities' needs.

In the area of health promotion and communication, the NHEICC, which acted as the focal point for all health promotion and communication activities, remains at the central level. However, central government entities' roles are often now limited to preparing policies, plans, and guidelines. Structural changes at the ministerial and departmental levels have also taken place.

This recent governmental transition presented both opportunities and challenges for the health system in Nepal. Lack of clear authority and lack of clear demarcation of authorities, roles, and responsibilities have led to gaps in service delivery, program execution, and information flow. Temporary staffing or delayed staff deployment led to vacant positions (or positions filled by undertrained personnel) and understaffed health offices at the municipal or provincial levels. Changes in health structures at the local level, such as the abolishment and the reemergence of the district health offices, is ongoing. These characteristics of the health system during this transitional phase have become real challenges not yet overcome by the system.

Figure 1 illustrates the current divisions within the Nepal health system as relevant to the Breakthrough ACTION project and this evaluation. Please note that only divisions relevant for the Breakthrough ACTION project and this evaluation are highlighted. This diagram is not meant to be comprehensive/reflective of the entire system. Furthermore, it is reflective of the system at the time of the evaluation (December 2019 to January 2020). Please note that there are no direct lines of authority implied by this Figure (i.e. there are no direct lines of authority of the federal level over the provincial level, or the provincial level over the local levels).





This diagram is not meant to be comprehensive/reflective of the entire system.

Figure 1. Structure of Nepal's Health System (as of February 2020). Please note that there are no direct lines of authority across levels of governments.

SBC Capacity Ecosystem[™] Framework

Breakthrough ACTION Nepal worked within the changing context outlined above to strengthen capacity in SBC for health among key stakeholders at the local, provincial, and federal levels. The project drew on the SBC Capacity Ecosystem[™] framework (Figure 2a; Annex 1) to organize its capacity strengthening approach. Effective SBC requires 1) a supportive system, 2) capable organizations, and 3) skilled individuals to implement SBC interventions leading to improved health and well-being among families and communities. An effective capacity strengthening approach therefore integrates efforts at the individual, organizational, and system levels.

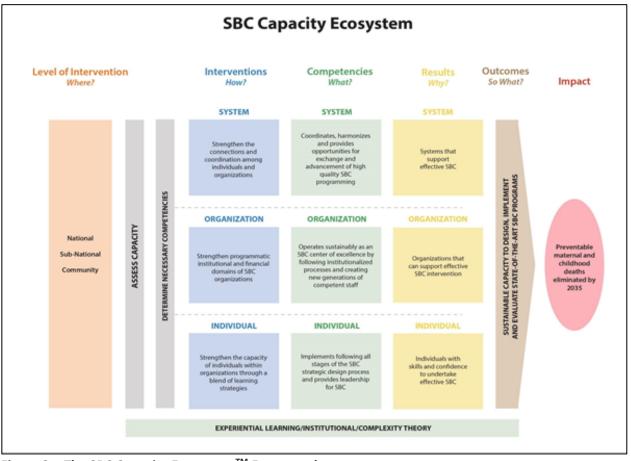


Figure 2a. The SBC Capacity Ecosystem[™] Framework

Breakthrough ACTION Nepal Activities

Breakthrough ACTION Nepal worked with individuals, organizations, and systems at the federal, provincial, and municipality (rural and urban) levels to enhance SBC programming capacity within the larger SBC system in Nepal. Project activities focused on competencies at the individual, organizational, and system levels as outlined in the figure below.

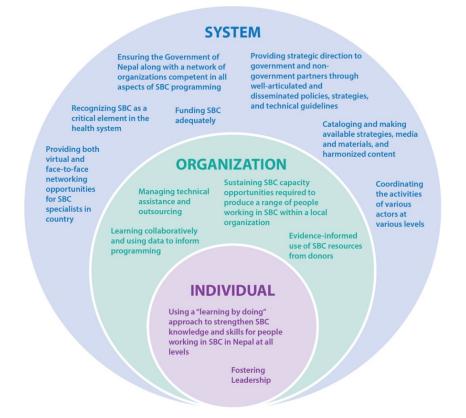


Figure 2b. Competencies for Strengthening Social and Behavior Change Capacity in Nepal

To address these competencies, Breakthrough ACTION Nepal conducted activities related to IR1 (enhance the capacity of the GON to design, implement, and evaluate SBC programs) and IR2 (enhance the coordination of SBC programming). Table 1 lists some of Breakthrough ACTION Nepal's activities.

Table 1. Illustrative Activities Related to Breakthrough ACTION Nepal's Intermediate Results

Activities Related to IR1

Clarify roles and responsibilities related to SBC within the GON for designing, implementing, and monitoring health communication and linkages between the federal and subnational bodies.

Conduct data scoping exercises at the federal, provincial, and palika levels (needs assessment).

Refine federal guidelines for SBC implementation.

Enhance stakeholder accessibility (at all levels) to high-quality media, materials, and implementation guidelines.

Develop the SBC Palika Package (a compilation of resources and tools that will serve as a guide for integrating SBC into annual work plans at the municipal level).

Strengthen government technical capacity through face-to-face and virtual networking opportunities for SBC specialists.

Develop participatory SBC action plans.

Refine SBC Palika Package for use in other palikas and recognition systems (sustainability).

Activities Related to IR2

Conduct rapid SBC capacity mapping and situation analysis led by the NHEICC.

Coordinate and strengthen existing systems and platforms at the federal level.

Provide virtual and face-to-face networking and capacity strengthening opportunities for SBC specialists at all levels.

Conduct joint monitoring visits and supportive supervision.

Update the technical messaging content in media and materials for family planning and maternal, newborn, child, and adolescent health.

Strengthen the ongoing technical review process.

Work with the NHEICC, palika, or other subnational government stakeholders to link with private sector and nontraditional health partners (e.g., universities, BP Koirala Institute of Health Sciences).

Knowledge management and knowledge sharing with stakeholders at local, provincial, and federal levels.

Organization of Report

This chapter provided an in-depth overview of the Nepal health system in the new federalist system, and detailed the guiding IRs, conceptual framework, and activities of the Breakthrough ACTION Nepal project. In Chapter 2, we outline the research questions guiding this post-hoc, qualitative evaluation, and provide an overview of the methodology used. In Chapter 3, we outline key findings, with a focus on outcomes identified at the individual, organizational, and system levels. We then draw on these outcomes to address the evaluation's guiding research questions. In the final chapter (Chapter 4), we discuss the results in light of ongoing governmental changes in Nepal and highlight limitations of the methodology.

Chapter 2: Methodology

This chapter describes Breakthrough ACTION Nepal's evaluation approach, introduces the research questions guiding this evaluation, and provides an overview of the Outcome Harvesting methodology.

Overview of Breakthrough ACTION Nepal's Evaluation Approach

Amidst ongoing governmental changes, Breakthrough ACTION Nepal continually innovated and adapted its capacity strengthening approach to meet the shifting needs of the GON and other key partners. In order to understand the project's influence on the behaviors of SBC partners, professionals, and organizations within the SBC for health system in Nepal, Breakthrough ACTION Nepal drew on multiple methods to assess programmatic achievements. First, project staff conducted a participatory SBC capacity self-assessment with key partners at the federal, provincial, and local levels to assess changes in capacity from the beginning to the end of the project. To understand the quantitative changes in capacity captured by these SBC capacity assessments, qualitative key informant interviews with key stakeholders were conducted, using a "most significant change" methodology, to gather stories that highlighted—in participants' own words—the changes that occurred following Breakthrough ACTION Nepal activities.¹ To complement these approaches, and recognizing the need for an evaluation method capable of employing a more nuanced and flexible way to measure capacity strengthening achievements, Breakthrough ACTION Nepal also utilized a post-hoc, qualitative evaluation approach known as "Outcome Harvesting." Outcome Harvesting is a complexity-aware methodology that is particularly useful when evaluating projects with complex theories of change (e.g., those working to strengthen capacity), that are being implemented in settings characterized by uncertainty. Outcome Harvesting offers a more robust and systematic way to assess capacity outcomes for development projects such as Breakthrough ACTION Nepal.

Outcome Harvesting enables projects to uncover both anticipated and unanticipated outcomes of their activities, while also specifying the relative contribution of the project to those outcomes. By externally and independently verifying each outcome, Outcome Harvesting takes a rigorous, systematic approach to program evaluation. Results from this evaluation, in combination with evidence from most significant change stories collected and changes in SBC capacity measured among key stakeholders, together paint a clearer picture of the achievements of the Breakthrough ACTION Nepal project.

¹ See Breakthrough ACTION Nepal's Most Significant Change Evaluation Report for further discussion of this methodology and key findings.

Guiding Research Questions

The following three questions guided the Outcome Harvesting evaluation in Nepal:

- 1. In what ways have the GON and other Breakthrough ACTION partners demonstrated important changes in their capacity for improved SBC, at both the local and federal levels, since the start of the Breakthrough ACTION project?
- 2. To what extent did the identified Breakthrough ACTION Nepal project outcomes exceed or fall short of the project's objectives?
- 3. How sustainable are the outcomes to which the Breakthrough ACTION Nepal project contributed?

Methodology Overview

An **outcome** is a positive or negative change that occurred in the behavior of a system, organization, or key individual. Breakthrough ACTION's efforts that influence change must have taken place prior to the outcome. Each outcome needs to have also had a plausible and logical link between the change and Breakthrough ACTION's contribution, but Breakthrough ACTION could not have had direct control over those outcomes.

The Outcome Harvesting process requires the evaluators to work backward to assess the contributions of the project toward each outcome, as well as the importance For each outcome, the Breakthrough ACTION evaluation obtained information to answer the following questions:

- **Outcome description:** "Who did what, when, and where that was qualitatively different than before?"
- Importance of the change: "Why does this outcome represent progress toward local structures and organizations being able to take the lead in responding to their communities' needs?"
- Breakthrough ACTION's contribution: "How and when did Breakthrough ACTION's capacity strengthening activities contribute to (but not directly control) that change, however unintended or partial that it may have been?"
- Others who contributed: "Which other actors and factors, apart from Breakthrough ACTION, contributed to the outcome and what was the type of their contribution?"

of achieving the outcome.² During this process, the evaluation team conducts a document review and key informant interviews with local staff and partners, who serve as essential and valuable sources of information.

After completing the harvest, the evaluation team verifies the outcomes with knowledgeable external sources in order to obtain the final list of vetted outcomes. The analysis of patterns among the final list of outcomes can help uncover which project activities yielded success and how to build upon that work in the future. Outcomes are grouped by level of the SBC Capacity Ecosystem[™] (individual,

² Wilson-Grau, R., & Britt, H. (2012). *Outcome harvesting*.

https://www.outcomemapping.ca/download/wilsongrau_en_Outome%20Harvesting%20Brief_revised%20Nov%20 2013.pdf

organizational, or system), organized by theme, and classified by IR for the purposes of analysis. Outcomes are also assessed for sustainability, defined as:

- **Sustainable Practice**: The outcome reflects institutionalized or systematic behavior change in an individual, organization, or system that occurred either repeatedly over the course of the project or six months prior to the evaluation.
- **Policy**: The outcome describes a change in SBC planning procedures or policy.

Figure 3 maps out the steps of the Outcome Harvesting process.

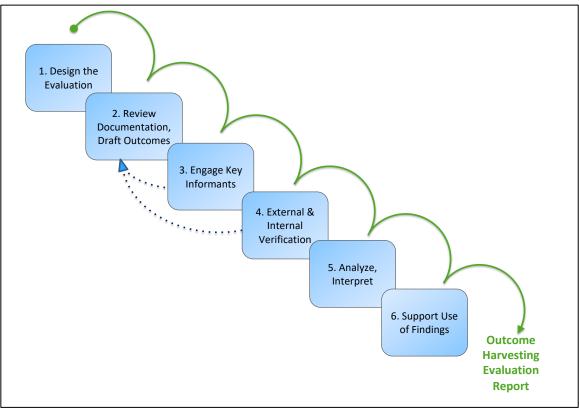


Figure 3: The Six Steps to the Outcome Harvesting Evaluation Process

Outcome Harvesting in Nepal

An evaluator external to the Breakthrough ACTION Nepal project led the Outcome Harvesting evaluation. After agreeing on the evaluation objectives and the intended users of the evaluation findings, the Breakthrough ACTION Nepal staff received training on Outcome Harvesting and engaged in the process of harvesting outcomes. A local independent consultant supported the external evaluator to complete the internal and external verification process for each outcome identified during the evaluation.

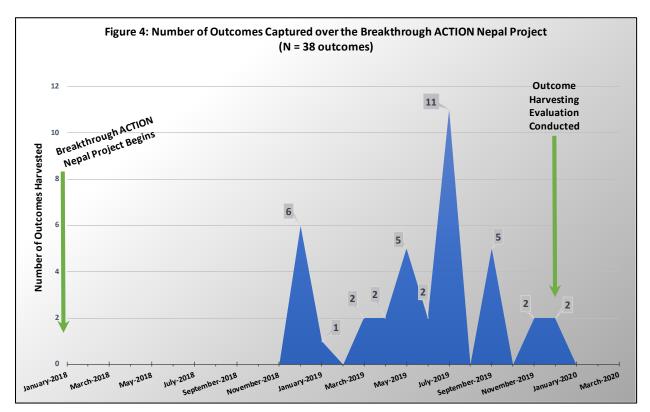
For more detail about the process of implementing Outcome Harvesting in Nepal, see Annex 2.

Chapter 3: Key Findings

This chapter presents the results of the evaluation conducted in Nepal. Following an overview of verified outcomes captured during Outcome Harvesting, we discuss results in relation to each of the project's guiding research questions.

Overview and Timing of Outcomes

The evaluation harvested a total of 38 verified outcomes. (See **Annex 3** for the complete set of outcomes.) **Figure 4** highlights the number of outcomes captured (N=38) and approximately when the outcome/change occurred during the project period. Outcomes occurred over the course of the project period, with the first outcomes documented taking place in fall 2018.



The harvested outcomes described in the findings of this evaluation represent the results of various workshops, technical assistance and guidance, and advocacy on the part of the Breakthrough ACTION Nepal field team. The lag in the time between the start of the project and the first few outcomes captured highlights the period of implementation of Breakthrough ACTION activities with the stakeholders. The time lag noted is expected in capacity strengthening projects, where it takes time for beneficiaries to be able to demonstrate shifts in their capacity and functioning since becoming involved in the project activities.

Overview of Outcomes by Levels of the SBC Capacity Ecosystem[™]

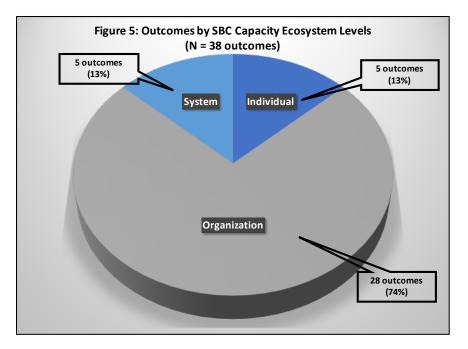
As previously mentioned, the SBC Capacity Ecosystem[™] demonstrates how interventions can effect change at three levels: individual, organization, and system. Improved capacity at the individual level can lead to organizational shifts over time, which then in turn lead to better systems.

The SBC Ecosystem defines **individual-level outcomes** as those that describe a change in the SBC-related capacity of individual(s) within organizations.

Organization-level outcomes describe a change in the SBC-related programmatic, institutional, or financial domains within organizations and governments.

System-level outcomes describe a change in the structures and networks connecting and supporting SBC professionals and partners across multiple organizations.

<u>The vast majority of outcomes represented demonstrated capacity change at the organizational level</u> (n=28; illustrated in the figure below). The other outcomes comprised five individual-level outcomes and five system-level outcomes. See **Figure 5**.



In the following sections, we describe outcomes by level of the SBC Capacity Ecosystem[™] starting from the ground up: 1) individual-level outcomes, 2) organization-level outcomes; and 3) system-level outcomes. Outcome identification (ID) numbers are based on level of the SBC Capacity Ecosystem[™]. For example, Individual outcomes have I.#, organizational have O.#, and system-level outcomes have S.#.

Individual level

The evaluation identified five outcomes that described capacity change among individuals (see **Table 2**). The observed outcomes involved application of individuals' increased SBC capacity to identify opportunities within their existing roles and improve their engagement within SBC processes.

ID#	Outcome Description	Breakthrough ACTION Nepal Objectives
1	Individual-Level Outcomes	
1.1	Since December 2018, the Panchapuri mayor and deputy mayor used the monitoring checklist data and monitoring reports to take note of feedback to better target activities to its beneficiaries.	IR1
1.2	Since December 2018, elected representatives in all four palikas have continued to participate in community interactions to understand local-level barriers to institutional delivery, even in hard-to-reach communities.	IR2
1.3	Since April 2019, health coordinators in all four palikas are now consistently entering data into the health management information system and performing routine data quality checks.	IR1
1.4	In May 2019, the health directorate director in Province 7 advocated to all the attending health personnel from Province 7 during the SBC capacity strengthening exercise for health to facilitate allocating a budget for SBC activities from the ward level.	None
1.5	In December 2019, the mayor and health coordinator in Panchapuri attributed increases in their indicators around growth monitoring and antenatal care visits to incorporating health promotion and health education provided by a health worker to the pregnant women's group and the healthy mothers group.	IR1

Table 2: Description of Breakthrough ACTION Nepal Individual-Level Outcomes by Project Objectives	;
(n=5)	

Organization level

The 28 outcomes that occurred at the organizational level (**Table 3**) illustrate various partners and beneficiaries contributing to improved and more effective SBC processes. The outcomes demonstrate how partners planned, implemented, and engaged in SBC programming toward meeting their communities' needs. Some of the outcomes also highlight partners coordinating to achieve the shared goals of improving health in their communities. What makes these organization-level outcomes is the shift in the functioning of these "organizational" processes involving various stakeholders, and the stakeholders acting as a unit or in representation of that unit to influence these processes.

 Table 3: Description of Breakthrough ACTION Nepal Organization-Level Outcomes by Project

 Objectives (n=28)

ID#	Outcome Description	Breakthrough ACTION Nepal Objectives
0	Organization-Level Outcomes	
0.1	Since December 2018, the health coordinator in Panchapuri has been using the monitoring checklist consistently during the monthly meeting to coordinate with health workers and to discuss issues with the mayor and deputy mayor.	IR1, 2
0.2	Since implementing the monitoring checklist and engaging in community interactions to recognize gaps [December 2018], the health section in Panchapuri has incentivized postnatal care community outreach visits of their health workers .	IR1
0.3	Since December 2018, the health coordinator, ward chair, and health section chair in Barahatal have been using data from the monitoring checklist during meetings for the discussion of budgets to monitor, evaluate, and improve their programs.	IR1
0.4	Since January 2019, as a result of participation in the SBC materials review workshop, NHEICC has been continuing to revise materials based on the updates identified during the review workshop.	IR1
0.5	In March 2019, in Guthichaur, the health coordinators created new monitoring checklists to monitor the supply chain, logistics stock, and monitoring of plans after the Operations Management (OM) committee identified the need for checklists in other areas.	IR1
O.6	Since March 2019, Sudurpaschim province (Province 7, far west) has requested Breakthrough ACTION for technical assistance with SBC and with the development of a province-level SBC health promotion strategy that did not exist before.	None
0.7	In April 2019, the Panchapuri health section and health coordinators developed an integrated monitoring checklist , adapting their central checklist and using the monitoring and supervision checklist as an example to monitor all other health programs and activities.	IR1
0.8	Since May 2019, the pregnant women's groups in Guthichaur and Barahatal have been continuing their monthly meetings without Breakthrough ACTION support.	None
0.9	Since May 2019, health facility in-charges have now been actively participating in the seven-step annual planning and budgeting process for the first time in all four municipalities.	IR2
0.10	Since May 2019, the rural municipality of Tila has replicated the Deputy Mayor with Pregnant Women program ³ after the deputy mayor of Tila visited Guthichaur and observed the program and recognized its value.	IR1

³ Please note that "Deputy Mayor with Pregnant Women" is the name of the program being implemented.

ID#	Outcome Description	Breakthrough ACTION Nepal Objectives
0.11	On June 10, 2019, the Korea International Cooperation Agency (KOICA) Nepal requested Breakthrough ACTION Nepal to facilitate a capacity building session on SBC materials development, organized by the Health Insurance Board and KOICA Nepal.	None
0.12	Since July 2019, the Health Directorate in Karnali Province has adapted and incorporated the SBC components of the monitoring and supervision checklist to their existing monitoring checklists for all health areas.	IR1
0.13	Since July 2019, as part of the Deputy Mayor with Pregnant Mothers program in Chandannath and Guthichaur, the community interactions are being done more formally and are used to motivate pregnant women to come to the facility by providing them with the invitation letters.	IR1
0.14	Since July 2019, the deputy chair in Barahatal has now allocated budget of 50,000 rupees for each pregnant women's group in 10 wards to support women with limited resources. The budget helps pregnant women afford their trip to the health facility in the ambulance and also provides pregnant women with financial incentives when they give birth at the facility.	IR1
0.15	Since July 2019, the Barahatal municipality bought two ambulances as part of the Deputy Chair with Pregnant Women program to help women with limited resources make the trip to giving birth at the health facility.	IR1
O.16	Since July 2019, in Barahatal as part of the pregnant women's group , the women now support one another after birth at the facility by providing the new mothers with nutritious food and clothing either at their own expense or using funds allocated at the ward level if the women can't afford to do it on their own.	IR1
0.17	Since July 2019, the health sections in Panchapuri mandated the health facility in-charges to invite the ward chairs to all the community interactions seeing how the ward chairs were making a difference during the Breakthrough ACTION-led community interactions and subsequent discussions.	IR2
0.18	Since July 2019, the Panchapuri municipality has allocated 50% of their total health budget to go towards institutional delivery and antenatal care after those were identified as key gap areas for improving health in their communities during their work with Breakthrough ACTION.	IR1
0.19	In July 2019, all four focal municipalities (Chandannath and Guthichaur in Jumla; Panchapuri and Barahatal in Surkhet) included SBC for health in their annual plans and allocated funding for SBC in their local budgets for the first time ever.	IR1

ID#	Outcome Description	Breakthrough ACTION Nepal Objectives
0.20	In July 2019, Karnali province included health promotion in their annual plans and allocated funding for health promotion in their local budgets.	IR1
0.21	In July 2019, the Ministry of Social Development (MoSD) in Karnali province applied the P-Process^{4,5} in their annual budgeting and planning process .	IR1
0.22	In September 2019, the Manmohan College and the Institute of Medicine (IOM) secured an agreement with Breakthrough ACTION Nepal for internship opportunities for two bachelors-level public health students and two masters-level health promotion and education students interested in learning more about SBC and health promotion.	None
0.23	Since September 2019, UNICEF has requested technical assistance from Breakthrough ACTION towards generalizing and adapting the SBC Palika Package for use in their districts and organized a training of trainers session using their own resources.	None
0.24	Since September 2019, Suaahara has adapted certain components of the SBC Palika Package and rolled them out in their implementing areas.	None
0.25	Since September 2019, IPAS has undertaken their own materials review and compilation process around safe abortion information, education, and communication (IEC) materials involving various partners and stakeholders and have since created a catalogue of the materials and submitted to NHEICC to share with other stakeholders and partners.	None
O.26	Since November 2019, in Ward 5, and subsequently in other wards in Panchapuri, the health sections mandated at least one health worker (nurse/midwife) to attend the healthy mothers group as a way to improve the health education after seeing the effectiveness of the pregnant women's group and of the community interactions.	IR1
0.27	Since November 2019, the working group formed under the guidance of IOM-CDPH and Breakthrough ACTION Nepal is continuing to work on data scoping.	None
0.28	On December 11, 2019, the MoHP endorsed the SBC Palika Package and recommended its use to other palikas , allowing for the MoHP logo to be included in the SBC Palika Package.	None

⁴ Note: The P-Process is a five-step process used to guide planning for SBCC programs.

⁵Johns Hopkins Center for Communication Programs. (2013). *The P process. Five steps to strategic communication*. Available at:

https://www.thecompassforsbc.org/sites/default/files/strengthening_tools/P%20Process%20Eng%20%26%20Fr.p df

System level

At the system level, a total of five outcomes demonstrated improved coordination and collaboration between various stakeholders within the GON as well as between other SBC partners (**Table 4**). Of note is Outcome S.2 below, where improved collaboration resulted in a structural change of adding heaters in birthing centers to promote and support pregnant women delivering at the health facilities. This outcome required coordination and engagement at different levels—including elected representatives and health officials—to create a structural change. The elected representatives participated in the community interactions and learned about this gap and coordinated with the health officials to budget for and address the gap. Another important outcome (S.5) captured the elected representatives and the health sector in Panchapuri continuing to coordinate towards the application of SBC approaches on their own to address other community issues such as child marriage, polygamy, and chaupadi.⁶ These system-level outcomes show the stakeholders' capacity to identify gaps and opportunities for SBC and to continue collaborating to address their communities' needs.

(11-5)		
ID#	Outcome Description	Breakthrough ACTION Nepal Objectives
S	System-Level Outcomes	
S.1	Since December 2018, palika-level elected representatives and health coordinators in Chandannath and Guthichaur have been consistently using the monitoring and supervision checklist to monitor their own SBC activities.	IR1
S.2	Since May 2019, the mayor and deputy mayor of Guthichaur added heaters in all three of their birthing centers after it was identified as a key reason why pregnant women don't go to the birthing centers during the community interactions.	IR1
S.3	Since June 2019, the Panchapuri rural ministry, elected officials, health coordinators, ward chairs, and stakeholders are coordinating better around the discussion of community issues.	IR2
S.4	Since July 2019, partners such as Suaahara, UNICEF, and WHO have been coordinating to share and adapt their IEC materials amongst one another.	None
S.5	Since September 2019, the Panchapuri elected representatives and the health sector are applying SBC approaches towards addressing other community issues such as child marriage, polygamy, and chaupadi.	IR1

Table 4: Description of Breakthrough ACTION Nepal System-Level Outcomes by Project Objectives
(n=5)

⁶ Chaupadi refers to the practice of isolating women during menstruation. Isolation can include being prevented from participating in household activities, staying outside of the home during menstruation, etc.

Demonstrated Changes in SBC Capacity

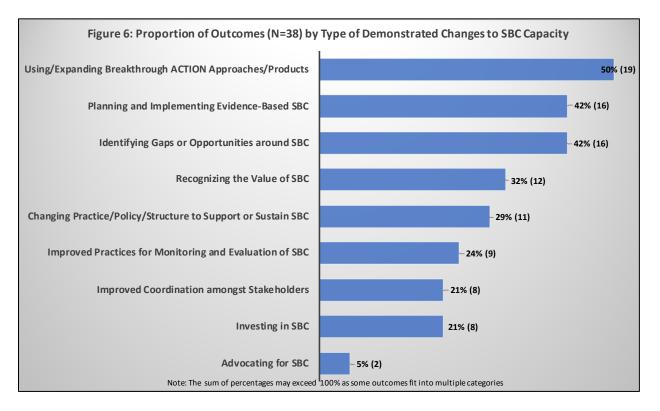
In this section, we explore results of this Outcome Harvesting evaluation in reference to the first guiding research question: "In what ways have the Government of Nepal and other Breakthrough ACTION Nepal partners demonstrated important changes in their capacity for improved SBC, at the local and federal levels, since the start of the Breakthrough ACTION project?"

The 38 verified outcomes harvested during this evaluation illustrate changes in SBC capacity among Breakthrough ACTION Nepal partners over the project period. To better understand the demonstrated changes in capacity, an iterative thematic analysis of verified outcomes and Breakthrough ACTION's contributions allowed for the identification of nine distinct themes. Each theme represents a type of demonstrated change in SBC capacity (in other words, how SBC capacity changed). Themes are not mutually exclusive, meaning that a single outcome often corresponds to multiple themes.

The nine emergent themes identified were:

- Using/Expanding Breakthrough ACTION Approaches/Products
- Planning and Implementing Evidence-Based SBC
- Identifying Gaps or Opportunities Around SBC
- Recognizing the Value of SBC
- Changing Practice/Policy/Structure to Support/Sustain SBC
- Improved Practices for Monitoring and Evaluation of SBC
- Improved Coordination Amongst Stakeholders
- Investing in SBC
- Advocating for SBC

Figure 6 depicts the distribution of outcomes by theme. Half of the outcomes reflected improved capacity of Breakthrough ACTION partners in using/expanding Breakthrough ACTION approaches/products (50%). Outcomes were also commonly related to improved capacity in planning and implementing evidence-based SBC (42%) and identifying gaps or opportunities around SBC (42%).



The following sections provide an overview of emergent themes and their associated outcomes. Evident throughout the analysis was the fact that individual themes often co-occurred or clustered with other themes. As a result, each section examines a set or cluster of themes.

Planning, implementing, and monitoring better SBC

The following emergent themes are discussed in this section:

- Planning and implementing evidence-based SBC
- Using/expanding Breakthrough ACTION approaches/products
- Improved practices for monitoring and evaluation of SBC

As outlined above, Breakthrough ACTION Nepal brought primary beneficiaries, program implementers, decision-makers, and partners together through a series of formative events, capacity workshops, and exercises to identify gaps and opportunities for SBC within the new health system. The process introduced Breakthrough ACTION stakeholders to tools, methodologies, and skills toward designing, planning, and implementing evidence-based SBC. One of the main objectives of the Breakthrough ACTION Nepal project was to improve the capacity around design, implementation, and evaluation of SBC programming (IR1), and outcomes in this section provide examples of how stakeholders have been doing just that.

In December 2018, Breakthrough ACTION Nepal led a coordinated effort to help government stakeholders understand health issues within their communities. Elected representatives and health

officials participated in Breakthrough ACTION's capacity mapping; monitoring, evaluation, and learning workshops and exercises; and community interactions. These interactions allowed for elected representatives and health officials to come together and understand their communities' issues and work together to discuss solutions and plans for action. Next, during implementation, elected representatives and health officials built on the success of these community interactions by using them to motivate pregnant women to go to the health facilities (Outcome 0.13). The pregnant women's groups in Guthichaur and Barahatal (Outcome 0.8) serve as another example. These women's groups were designed to address gaps in maternal and child health identified in these communities. While these activities started with Breakthrough ACTION's support, now the activities are continuing without Breakthrough ACTION's involvement. Also, elected representatives in Barahatal allocated budgets to support women's groups and women (Outcome 0.14) toward the goal of increasing deliveries at the health facilities. During the latter half of 2019, Barahatal even used the budget for the Deputy Mayor with Pregnant Women program to buy two ambulances (Outcome 0.15) to support women with limited resources for their trip to give birth at the health facility.

Multiple outcomes demonstrated how improved planning for, implementing, and monitoring of SBC activities took place using the approaches and tools introduced to them by Breakthrough ACTION. Monitoring and supervision checklists codeveloped with key stakeholders under the Breakthrough ACTION project were recognized as a key tool to help stakeholders monitor the SBC activities in their communities and routinely discuss gaps as they emerge. Stakeholders in all four focal municipalities not only continue to use the checklists (Outcomes I.1, O.1, O.2, S.1) but they have used them to improve their SBC programming (Outcomes O.2, O.3). They have also identified opportunities to develop similar checklists for other activities outside of SBC or to incorporate the SBC components into their existing checklists (Outcomes O.5, O.7, O.12).

Identifying opportunities for SBC and recognizing its value

The following emergent themes are discussed in this section:

- Identifying gaps or opportunities around SBC
- Recognizing the value of SBC

In order to plan, implement, and monitor better SBC, stakeholders need to be able to identify the existing gaps and/or opportunities for SBC. This requires the ability to recognize where it is valuable to use SBC approaches. Above, we highlighted several outcomes where partners and stakeholders themselves identified new opportunities for application of SBC approaches (e.g., outcomes related to the use of monitoring checklists). For example, during the implementation of the checklists and community interactions, the health section in Panchapuri decided to provide incentives to health workers for postnatal care community outreach visits as a way to address a key gap in continuity of care around maternal and child health in their community (Outcome O.2). This outcome demonstrates not only planning and implementation of better SBC, but also the ability to recognize an opportunity for SBC.

Other examples where stakeholders identified barriers and addressed them with an SBC approach include:

- The mayor and deputy mayor of Guthichaur adding heaters to all their birthing centers after it was identified from their community interactions as one of the key reasons why pregnant women did not go to the birthing centers (Outcome S.2).
- In Panchapuri, elected representatives and the health sector applied SBC approaches to address other community issues such as child marriage, polygamy, and chaupadi (Outcome S.5). This example highlights the ability of stakeholders to recognize the value of SBC and to identify opportunities for the application of SBC approaches and processes more broadly.

The evaluation also captured an outcome illustrating how Breakthrough ACTION inspired SBC partners to strengthen their own SBC systems. During the program, in an effort to select existing high-quality materials, Breakthrough ACTION Nepal and NHEICC catalogued some 200 materials spanning multiple health areas, and collaborated with many key government, non-governmental organization, and international non-governmental organization partners to review and revise them. Inspired by the process, IPAS recognized the gap in their own work and followed the same process to review and select their own materials relevant to their own work (Outcome 0.25). The selected materials are now available on the NHEICC website. Other stakeholders and partners have illustrated their recognition of the value of SBC by requesting technical assistance from Breakthrough ACTION around SBC approaches and tools (Outcomes 0.6, 0.23).

Even though Breakthrough ACTION was implemented in four focal municipalities, one of the goals was to develop a system that other municipalities would want to use. The evaluation indicated that the process could be relevant to other palikas because some other municipalities started to use it organically. For example, the rural municipality of Tila decided to replicate the Deputy Mayor with Pregnant Women program after the deputy mayor of Tila observed the program and saw its value during one of her visits to Guthichaur (O.10). Upon request, Breakthrough ACTION provided technical assistance to Tila towards the initial activity implementation, but the deputy mayor of Tila on her own had recognized the gap and opportunity for such a program.

Improved coordination amongst stakeholders

The following emergent theme is discussed in this section:

• Improved coordination amongst stakeholders

One of the key objectives of Breakthrough ACTION involved improving the coordination of government entities around SBC (IR2). During Breakthrough ACTION's capacity strengthening and technical assistance events, various governmental and non-governmental stakeholders came together and were able to recognize the value of collaboration across the different levels of the government and the health system. The engagement of provincial and local health staff together created opportunities for them to see the value in collaborative efforts. For example, the health facility in-charges (HFIs) and health officials came together and went through the P-Process and the seven-step annual planning and budgeting process during Breakthrough ACTION activities. From this experience, the health officials in all four palikas were able to see the importance of involving HFIs in the process. While their participation was already part of these processes, in at least two palikas they were not actively attending. Building on the coordination and collaboration modeled by Breakthrough ACTION Nepal, HFIs in all four palikas are now actively participating in the seven-step process (Outcome O.9). This has improved the coordination among these units within the health system. Similarly, in Panchapuri the health sections have mandated the HFIs to invite the ward chairs to attend all the community interactions to identify and discuss community health issues (Outcome O.17).

In addition, the evaluation documented system-level outcomes related to improved coordination among different actors, e.g., the Panchapuri rural ministry, elected officials, health coordinators, and ward chairs (Outcome S.3); and SBC partners such as Suaahara, UNICEF, and WHO towards sharing and adaptation of IEC materials (Outcome S.4). These higher-level outcomes within the SBC Capacity Ecosystem[™] demonstrate the building of networks and collaboration that may be able to sustain SBC efforts beyond the Breakthrough ACTION project.

Supporting, sustaining, and investing in SBC

The following emergent themes are discussed in this section:

- Changing practice/policy/structure to support/sustain SBC
- Investing in SBC

Outcomes harvested and verified in this evaluation documented examples of stakeholders both using SBC approaches to address their communities' needs and investing in policy or structural changes to support specific health behaviors. Examples include 1) elected representatives adding heaters in all their birthing centers in Guthichaur (Outcome S.2) and 2) the allocation of budget in Barahatal to support women with limited resources giving birth at the health facilities (Outcomes 0.14, 0.15).

In addition to the allocation of funds for specific activities or improvements to health facilities, other outcomes demonstrated budget allocations for SBC/health promotion in general during the annual planning in the four focal municipalities and in Karnali province (Outcome O.19, O.20). This marked the first time a budget had been allocated for SBC at the provincial level or in each of the four focal municipalities. In the past, budgets for SBC/health promotion were allocated only at the federal level, which did not always guarantee SBC funding availability at the provincial and local levels.

Advocating for SBC

The following emergent theme is discussed in this section:

• Advocating for SBC

Two outcomes demonstrated increased advocacy for SBC. The Province 7 health directorate director and the MoHP not only recognized the value of SBC and have been involved in the processes of improved SBC, but have also advocated for SBC to others.

- The health directorate director of Province 7 spoke regarding the importance of budgeting for SBC even at the ward level (Outcome I.4).
- The MoHP, after its involvement in various activities and interactions during the Breakthrough ACTION project, endorsed the SBC Palika Package and advocated for its use to be expanded to other palikas (Outcome 0.28).

Together, the changes in SBC capacity described above demonstrate the diverse ways the GON and other SBC partners have improved evidence-based SBC programming, begun to recognize opportunities for SBC and its value, strengthened coordination and harmonization of SBC activities, supported and invested in SBC, and advocated for SBC within a changing health system.

Harvested Outcomes and Breakthrough ACTION Nepal's Objectives

In this section, we explore results of this Outcome Harvesting evaluation in reference to the second guiding research question: "To what extent did the identified Breakthrough ACTION Nepal project outcomes exceed or fall short of the project's objectives?" To do this, we examined the extent to which identified and verified outcomes fell within the project's objectives. Outcomes were classified based on the explicit wording of each project IR. **Table 5** illustrates the breakdown of outcomes by relevant project IR.

Breakthrough ACTION Nepal IRs	Outcomes Classification by IRs
	n (% of total outcomes)
IR1: Enhanced capacity of the GON to design, implement, and evaluate SBC programs	23 (61%)
IR2: Enhanced GON coordination of SBC programming	6 (16%)
None (Not specific to Breakthrough ACTION Nepal IRs)	11 (29%)

Table 5: Breakthrough ACTION Nepal Outcomes by Intermediate Results (N=38)

Note: Some outcomes related to more than one IR; therefore, sum of percentages may exceed 100 percent.

As Outcome Harvesting allows the capture of both intended and unintended outcomes, some outcomes (n=11) did not neatly fall under the IRs of the Breakthrough ACTION Nepal project.⁷ For example, some of these outcomes represented capacity shifts in partners outside of the GON. The outcomes under IR1 (n=23) represented GON stakeholders' demonstrated capacity toward designing, implementing, and

⁷ For example, some of these outcomes represented capacity shifts in partners outside of the GON. As IRs specified GON, these outcomes are classified as not falling under that IR even if the project had intended audiences outside of the GON.

evaluating SBC programs. Several examples of the objective IR1 are highlighted in the planning, implementing, and monitoring evidence-based SBC subsection above. Please refer to **Annex 3** for the full list of outcomes and their categorization by IRs.

Outcomes classified under IR2 (n=6) illustrate how stakeholders within the GON have been coordinating and collaborating around SBC processes (IR2). First, several outcomes (Outcomes O.1-3, S.1) demonstrate coordination to identify gaps and opportunities of SBC programming to meet their communities' needs (e.g., elected representatives working with their health sections and coordinators to discuss problems, identify solutions, and invest in SBC programming). This also includes elected representatives noting the importance of being personally involved during community interactions designed to understand community needs and barriers. Second, Breakthrough ACTION activities and workshops brought together stakeholders that then saw the importance of coordination and the diverse perspectives each of them brought to the table. These stakeholders continue to utilize these collaborative efforts to continue not only the established SBC activities, but also to design and implement new SBC activities within their communities (Outcomes O.1, O.17, S.3, S.5). Outcomes such as I.5 also illustrate how stakeholders have been able to better coordinate efforts to understand how ongoing SBC activities are impacting key health indicators in their communities. In this way, these stakeholders are making such connections for themselves to be able to monitor and evaluate progress over time.

Multiple outcomes were relevant to both IRs, illustrating that the capacity of partners was built, demonstrated, and sometimes systematized and sustained through coordination toward improved SBC programming. Overall, the distribution of outcomes across the IRs provides evidence, from this post-hoc qualitative evaluation, of Breakthrough ACTION Nepal's progress towards its expected result of increasing capacity of the GON to design, implement, evaluate, and coordinate SBC programming.

Sustainability of Outcomes

In this section, we explore results of this Outcome Harvesting evaluation in reference to the third and final guiding research question: "How sustainable are the outcomes to which Breakthrough ACTION Nepal contributed?" The evaluation posed the question of sustainability to illustrate potential for lasting capacity shifts around SBC from the final list of outcomes. Sustainability was assessed using criteria as shown in the box to the right.

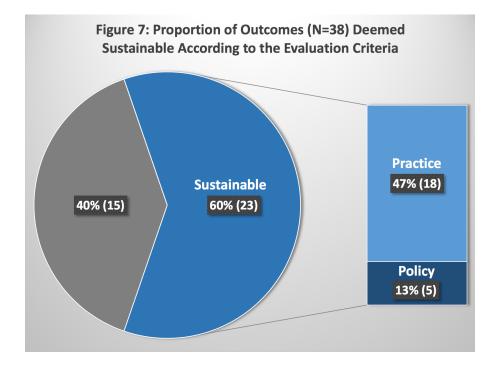
Sustainable Outcomes

For the purpose of this evaluation, sustainability of an outcome was based on a demonstrated sustained change in practice or policy, according to the criteria below:

Practice: The outcome reflected institutionalized or systematic behavior change in an individual, organization, or system that occurred either repeatedly over the course of the project or six months prior to the evaluation.

Policy: The outcome described a change in SBC planning procedures or policy.

Overall, the evaluation identified 18 sustainable outcomes representing sustainable changes in practice and five outcomes deemed sustainable changes in policy (**Figure 7**). Those categorized as not sustainable in the figure below were not deemed sustainable based on the criteria described above.



Although the short duration of the Breakthrough ACTION Nepal project requires a specific and limited definition of sustainability (see above), the project was able to influence sustainable change across all three levels of the SBC Capacity Ecosystem[™].

- Sustainable outcomes at the individual level. Three out of the five individual-level outcomes were deemed sustainable changes in practice, since 1) they reflected on the overarching engagement and involvement of these individuals within the SBC processes and 2) the individuals had continued these practices for at least six months (Outcomes I.1-3). Two of these outcomes involved elected representatives continuing to participate in community interactions and being directly involved in addressing their communities' needs based on the gaps/barriers identified through the process.
- Sustainable outcomes at the organizational level. At the organizational level, nine outcomes were determined to be sustainable changes in practice. These included continued practices of monitoring SBC activities (0.1-3) and coordination and collaboration (0.8-9, 0.13, 0.17). All five of the outcomes sustainable through policy were within the organization level of the SBC Ecosystem. Budget allocations for specific SBC programs or for SBC programming at the provincial and local level more broadly fell under these policy changes and were deemed sustainable because they reflected on the commitment to sustain SBC work, at least for the period for which the allocations happened (0.14-15, 0.18-20).
- Sustainable outcomes at the system level. Four out of the five system-level outcomes were categorized as sustainable changes in practice. The majority of these reflected on sustained coordination amongst various stakeholders and partners around planning and implementing

SBC (Outcome S.1, S.3-4). These are noteworthy because improved coordination can lead to stronger relationships between stakeholders—strengthening the current collaboration and creating the foundation for future partnerships around evidence-based SBC. These sustainable changes met the Breakthrough ACTION Nepal project's objectives and efforts toward improving coordination, planning, and implementation of SBC activities at the local and federal levels in Nepal.

Unfortunately, the evaluation cannot be conducted months after the project's end to assess long-term sustainability. As a result, if an outcome highlights a structural change or a change that has been systematically maintained/supported, we interpret this as suggesting that the improved capacity would likely endure beyond the end of the Breakthrough ACTION Nepal project. The partners' continued recognition of the value of SBC and its implementation towards addressing their communities' needs highlights the likelihood of the sustainability of the capacity built. (See **Annex 3** for which outcomes were deemed sustainable.)

Chapter 4: Discussion

The SBC capacity strengthening efforts of Breakthrough ACTION Nepal yielded a multitude of outcomes over the course of the project. The harvested outcomes confirmed that Breakthrough ACTION Nepal influenced capacity shifts among its primary beneficiaries and other SBC partners. In particular, the GON across various levels demonstrated numerous ways in which it gained capacity in designing, supporting, and implementing evidence-based SBC, and fostering multisectoral collaboration to address communities' needs.

Breakthrough ACTION outcomes also showed that the project met the country-specific objectives of strengthening the capacity of its SBC partners. Outcomes showcased partners' improved capacity toward identifying gaps and opportunities for SBC and designing and implementing evidence-based SBC. Breakthrough ACTION activities also influenced changes that improved coordination and planning of SBC within the various levels of the health system and between partner organizations. Through several outcomes, the evaluation process highlights how the GON started to shift its role in designing, planning, and even investing in SBC. While the short duration of the project limited the scope of the types of sustainable outcomes captured, sustained changes in practice as well as policy at the individual, organization, or system levels reflected partners' increased capacity and commitment to evidence-based SBC.

It is important to consider these findings within the context of the ongoing changes taking place to the health system in Nepal under the new federal system. These changes limited the impact of Breakthrough ACTION's capacity strengthening efforts as GON staff moved around the new levels and offices within the system and as the roles, responsibilities, authorities, and even priorities evolved over the course of the Breakthrough ACTION project. This uncertainty may also have influenced sustainability of the outcomes identified. Though this evaluation employed its own criteria to assess sustainability for this report, the actual sustainability of Breakthrough ACTION's efforts is highly dependent on the actualization of the processes of the current health system, which remains in flux.

Limitations

It is important to note two key limitations of the Outcome Harvesting evaluation conducted in Nepal.

First, the short duration of the project meant that the demonstrated changes in capacity were mostly at the individual and organizational levels of the SBC Capacity Ecosystem[™]. However, the evaluation still documented five system-level changes. The short project time frame did not allow for the evaluation to capture capacity demonstrated over a longer period of time, resulting in improved systems developed or implemented toward fostering and supporting use of evidence-based SBC. There were a few outcomes where Breakthrough ACTION staff were requested to provide technical assistance toward the end of the project. Outcomes resulting from capacity built from those final requests were not captured in this process due to the timing of this evaluation. In addition, the endorsement of the SBC Palika

Package and UNICEF's commitment to adapt and train others on the SBC Palika Package also came during the last few months of the project. There could be many potential outcomes in the future from the package being adapted and used in various other palikas across the country of Nepal. However, these were processes still materializing at the time of the Outcome Harvesting evaluation, and so the evaluation did not capture any potential outcomes resulting from these activities. The Breakthrough ACTION Nepal team continued to disseminate the SBC Palika Package through a variety of channels and mechanisms—both in person and digitally—through March 2020. Outcomes resulting from these activities were not harvested due to the timing of this evaluation.

Second, due to the evaluation's occurrence at the end of the project, it was limited in its ability to observe actual sustainability. A significant number of outcomes were captured less than six months before the evaluation that could not be deemed sustainable by the criteria applied. However, even with our rigorous, limited definition of sustainability, the evaluation deemed many of the outcomes as sustainable shifts in practices—and policy, in some few cases—that may continue to inform the Breakthrough ACTION partners' work and the SBC landscape in Nepal after the end of the Breakthrough ACTION project. Future evaluations should consider ways to measure change once the project has ended.

Conclusion

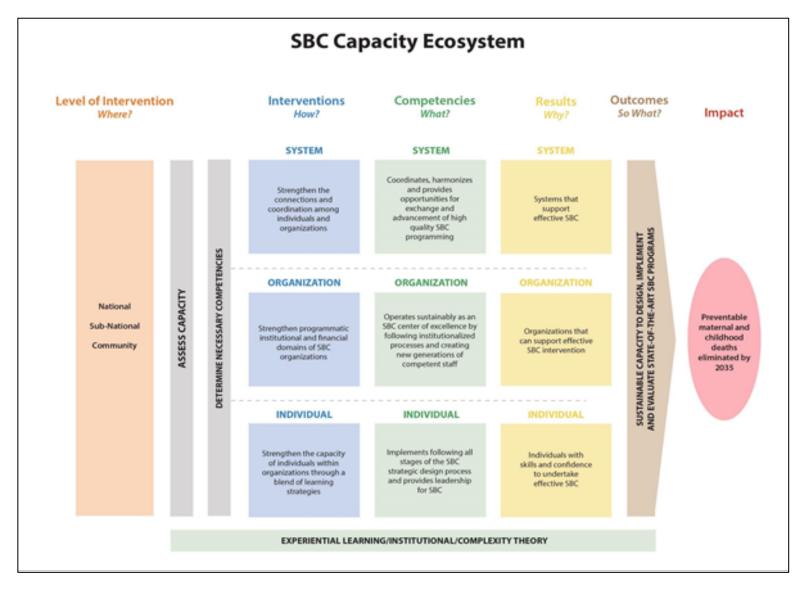
This Outcome Harvesting evaluation identified how key stakeholders demonstrated shifts in capacity, how those outcomes fell within the project's objectives, and the sustainability of those changes in capacity. Building on these findings, this evaluation provided evidence of Breakthrough ACTION Nepal's success in meeting the goals set out for the project. It documented that investment in strengthening the capacity of partner organizations can have verifiable, sustainable, and positive impacts in development contexts. Specifically, this evaluation of the Breakthrough ACTION project's capacity strengthening efforts identified two main ways in which stakeholders changed: (1) they planned and implemented evidence-based SBC, and (2) they improved their ability to coordinate around SBC programming. The evaluation process enabled Breakthrough ACTION Nepal to document that even short-term donor investments in SBC capacity strengthening activities can lead to individual, organizational, and system-level changes in SBC capacity.

This evaluation highlighted progress at all three levels of the SBC Capacity Ecosystem[™]. Numerous sustainable and a few system-level changes in capacity over a short duration of time also spoke to the strategic and multifaceted approach to capacity strengthening that Breakthrough ACTION Nepal used during this project. These types of structural investments in organization- and system-level change, while harder to measure on a linear scale, yielded results that are beneficial and relevant to a wide range of development partners in both the government and non-governmental sectors. This evaluation highlighted the achievements of Breakthrough ACTION's partnerships and helped the project successfully document changes influenced by Breakthrough ACTION.

Through building capacity and partnerships, Breakthrough ACTION's work in Nepal influenced partners' skills and abilities to implement effective, evidence-based SBC and complement each other in their goals toward improving health outcomes. The experience of Breakthrough ACTION Nepal makes the case for sustained investments in SBC capacity strengthening in individuals, organizational processes, and systems to yield powerful results.

Overall, Breakthrough ACTION's investment in SBC capacity strengthening efforts in Nepal helped evolve the skills and processes of its various partners as well as the SBC landscape, resulting in the increased capacity of the GON and other SBC partners to coordinate, design, implement, and evaluate SBC programming.

Annex 1: The SBC Capacity Ecosystem[™]



Annex 2: Breakthrough ACTION Nepal Outcome Harvesting Evaluation Methodology

The following section describes the steps to the Outcome Harvesting evaluation implemented in Nepal under the Breakthrough ACTION project as outlined in Chapter 2 (p. 11).

1. Design the Outcome Harvest

The Breakthrough ACTION external evaluator, in collaboration with key Breakthrough ACTION Nepal field staff, articulated evaluation questions and developed the evaluation design.

2. <u>Review Documentation</u>

The Breakthrough ACTION external evaluator identified potential outcomes through a review of Breakthrough ACTION Nepal documents and interviews with Breakthrough ACTION and partners/beneficiaries. Resources for this review included:

- Breakthrough ACTION monthly and quarterly reports
- Breakthrough ACTION Core semiannual and annual reports
- Partners' quarterly, semiannual, and annual reports
- Tacit knowledge from Breakthrough ACTION Nepal staff members as well as partners/beneficiaries

Potential outcomes were listed in a matrix based on the documentation, including the description of the outcome, Breakthrough ACTION's contribution to the outcome, and if possible, the importance of the outcome, in collaboration with the Breakthrough ACTION Nepal team. All outcome descriptions must ultimately be specific, measurable, achieved, relevant, and timely (SMART) as described in Box 1.

Box 1: Outcome Descriptions

Each outcome was required to be SMART:

- <u>Specific</u>: The four outcome dimensions were formulated in simple language and in sufficient detail so that a reader without specialized knowledge of Breakthrough ACTION's work or the Nepal context will be able to understand what changed.
- <u>Measurable</u>: The description of the outcome must provide verifiable quantitative and qualitative information. How much? How many? When and where did the change happen?
- <u>Achieved</u> (by Breakthrough ACTION, while not necessarily solely attributable to Breakthrough ACTION): There has to be a plausible relationship, a logical link between the demonstrated change and what Breakthrough ACTION did that contributed to that outcome.
- <u>Relevant</u>: The outcome represented an important step towards (or in the case of a negative outcome, away from) local structures and organizations being able to take the lead in responding to their communities' needs.
- <u>Timely</u>: The outcome occurred since January 2018. Thus, the description of what changed and how Breakthrough ACTION influenced that change must specify when the change occurred—at least the year but if possible, also the day and month, or the range of dates in which the change happened.

While certain columns may be prioritized over others during this step of the evaluation, the outcome matrix ultimately included at least seven dimensions:

- SMART description of each outcome
- Importance of each outcome
- Indication of the outcome's sustainability
- Breakthrough ACTION's contribution to the outcome
- Other actors or factors contributed to the outcome
- Internal sources that can verify the outcome
- External sources that can verify the outcome

These dimensions are described in more detail in Box 2.

Box 2: Outcome Matrix Contents

For each outcome, the Breakthrough ACTION Nepal team described each of the following dimensions in 1-2 sentences:

- <u>The demonstrated change</u> (i.e., outcome) in a societal actor (whether positive or negative changes): Who did what, when, and where? What is qualitatively different than before? This description should meet the SMART criteria listed in Box 2.
- <u>Importance of the change</u>: Why does this outcome represent progress towards local structures and organizations being able to take the lead in SBC or responding to their communities' needs?
- <u>Sustainability of change</u>: Does the outcome represent a change in policy or practice of the local structures and organization?
- <u>Breakthrough ACTION's contribution</u>: How and when did Breakthrough ACTION capacity strengthening activities contribute to that change, however unintended, full or partial?
- <u>Other actors or factors who contributed</u>: Which other actors and factors contributed to the outcome and what was their contribution?
- <u>Sources (Internal)</u>: What internal persons or documents can verify the demonstrated change, its importance, its sustainability, and Breakthrough ACTION's contribution to the outcome; and what other actors or factors contributed to the outcome?
- <u>Sources (External)</u>: What external persons or documents can verify the demonstrated change occurred as described by internal sources?

3. Engage with Internal Informants

Following a thorough documentation review, the external evaluator engaged directly with the Breakthrough ACTION Nepal team. Following an introduction to Outcome Harvesting and the evaluation design, the external evaluator and Nepal team worked collaboratively to refine outcomes, complete the Outcome Harvesting matrix, identify internal and external sources of information, and refine plans for external verification. This step involved those members of the Nepal team who are most knowledgeable about the outcomes. Together, the teams worked to complete all dimensions of the matrix (Box 1) for each outcome. The teams scheduled meetings or administered a short survey to local key stakeholders and partners in-country to identify any additional outcomes and external sources meeting the criteria in Box 3.

Box 3: Credibility of Sources

In order to be considered credible, one internal source of information (e.g., document, video, photograph, or Breakthrough ACTION team member) and one external source of information (e.g., document, video, photograph, or person) must support each outcome and Breakthrough ACTION's contribution to the outcome. If an external source of documentation is not available, an external individual independent of Breakthrough ACTION will be required to verify the outcome.

The Breakthrough ACTION team identified people or documentation from Johns Hopkins Center for Communication Programs, GON, and other partner organizations that can verify the contents of the matrix for each outcome. Such sources included:

- Breakthrough ACTION quarterly and annual reports
- Letters of invitation
- Emails
- Meeting minutes
- Finalized strategy documents

As the team gathered information for each matrix, they also added additional columns that aided the analysis as needed. In cases where additional outcomes emerged while verifying an outcome, the teams drafted the outcome and attempted to verify the outcome description and Breakthrough ACTION's contribution to the outcome.

4. External Verification

As part of the process to determine credibility, external verification was required to verify outcomes. Additionally, an external review was allowed to identify new potential outcomes.

The team prioritized the outcomes for which no external documentation was available and identified the best person to externally verify each of these outcomes. This subset of outcomes was then verified with an external party either during an in-person or telephone informal interview or via email by the independent consultant.

External verification began during the short-term technical assistance visit and continued after the external evaluator's departure from Nepal. A local independent consultant was hired to verify outcomes. Only a consultant is deemed to be sufficiently objective, independent, and removed from the achievement of the alleged outcome to engage external sources to verify outcomes. A Breakthrough ACTION Nepal team member may be present during interviews or copied on emails sent by the independent consultant.

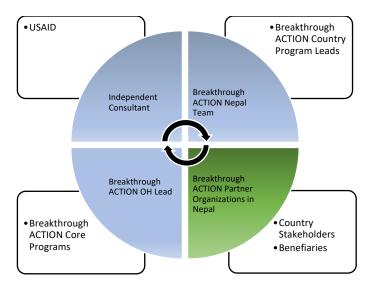


Figure 6: Players in the Outcome Harvesting Capacity Strengthening Evaluation

Using an email or interview script, the independent consultant asked the external source (either in an interview or by email) to what extent they agreed with the detailed description of the outcome and Breakthrough ACTION's contribution to the outcome as drafted. The independent consultant added external informant responses to the Outcome Harvesting matrix and updated external source description with the name, title, and date of interview or final email.

The local consultant asked each external informant to agree, partially agree, or disagree with each outcome. If an external informant agreed with Breakthrough ACTION's outcome description and Breakthrough ACTION's contribution to an outcome, that outcome was included in the matrix. If the external informant partially agreed or disagreed with an outcome, the local consultant noted what the point of disagreement was and how the external informant would modify the outcome. If the changes were minor, such as a correction to when an outcome occurred, the local consultant directly modified the outcome in the matrix. By documenting the external informant's modifications, the local consultant allowed the team and the external evaluator to review the external informant's comments and how they influenced the outcome. If an external informant disagreed with an outcome or Breakthrough ACTION's contribution to it, the consultant noted the reason for disagreement but did not change the outcome. The team and the external evaluator reviewed all external informant responses and proposed any additions or modifications, they excluded the outcome from analysis.

The team determined the added value of any new potential outcomes and followed the steps for verification as outlined above. If an outcome offered new insight to the list of existing outcomes, the Breakthrough ACTION team attempted to internally verify the new outcome. If no internal source could be identified to verify the new outcome, it was not included in the analysis. If an internal source was identified, the external source for this outcome was noted as the person who suggested the outcome and included in analysis.

The external evaluator was responsible for ensuring a transparent and logical process was followed in the final selection of outcomes. The external evaluator was responsible for ensuring all outcomes were sufficiently SMART and credible.

5. Analysis and Interpretation

The external evaluator took the lead in the analysis and interpretation of all outcome data included in the outcome matrix. Input from the country team was encouraged to ensure the evaluator correctly understood the context in which each outcome occurred. Initial analysis began while the external evaluator was in Nepal by exploring patterns among outcomes and grouping them by various criteria (e.g., outcome at the individual, organization, or system level).

The full analysis of outcomes was possible only after external verification had been completed. The interpretation phase aimed to answer the evaluation questions using the outcome data that was identified during the Outcome Harvesting process.

Annex 3: Complete List of Breakthrough ACTION Nepal Outcomes

ANNEX 3: Complete List of Breakthrough ACTION Nepal Outcomes

ID#	Outcome Description	Breakthrough ACTION Nepal's Contribution to the Outcome	Others Who Contributed	Breakthrough ACTION Nepal Objectives	Sustainability	Internal Verification Source	External Verification Source
l		Individual-Level Outcomes		-	-		
1.1	Since December 2018, the Panchapuri mayor and deputy mayor used the monitoring checklist data and monitoring reports to take note of feedback to better target activities to its beneficiaries.	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by human-centered design (HCD).	None	IR1	Practice	Breakthrough ACTION Nepal Staff + Most Significant Change Report	Key Informants - Panchapuri
1.2	Since December 2018, elected representatives in all four palikas have continued to participate in community interactions to understand local- level barriers to institutional delivery, even in hard-to-reach communities.	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR2	Practice	Breakthrough ACTION Nepal Staff	Key Informants - Panchapuri, Barahatal, Chandannath, Guthichaur

1.3	Since April 2019, health coordinators in all four palikas are now consistently entering data into the health management information system and performing routine data quality checks.	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION provided hands-on training building on the health directorate's one-day training. The HD provided a one-day training, but that was insufficient. Breakthrough ACTION Nepal organized a one-day orientation on data quality assessment for all four municipality-level health coordinators and Breakthrough ACTION Nepal coordinators on April 26, 2019, in Surkhet. All municipalities involved have planned for and are conducting data quality assessment in the selected health facilities according to the orientation. This was connected to the DHIS-2 trainings, but a separate event.	Province Health Directorate, SSBH	IR1	Practice	Breakthrough ACTION Nepal Quarterly Report	Key Informants - Panchapuri, Barahatal, Chandannath, Guthichaur, SSBH
1.4	In May 2019, the Health Directorate Director in Province 7 advocated to all the attending health personnel from Province 7 during the SBC capacity strengthening exercise for health to facilitate allocating a budget for SBC activities from the ward level.	Per the request made by the health directorate (HD) training section of the Province 7 MoSD, Breakthrough ACTION Nepal supported the HD to organize a five-day capacity strengthening exercise on SBC for health from May 20–24, 2019, in Dhangadi. The purpose of the exercise was to strengthen the staff capacity on SBC, developing a team so that they can propose inclusion of communication activities in the coming fiscal year. As per the request made by the health directorate (HD) training section of the Province 7 MoSD, Breakthrough ACTION Nepal supported the HD to organize a five- day capacity strengthening exercise on SBC for health from May 20–24, 2019, in Dhangadi. The purpose of the exercise was to strengthen the staff capacity on SBC, developing a team so that they can propose inclusion of communication activities in the coming fiscal year. Province 7 has also shown interest in implementing the SBC Palika Package, which was shared with the HD. The HD director has committed to send feedback on the package and asked all the participants to facilitate allocating a budget for SBC activities from the ward level.	None	None	Not Sustainable	Breakthrough ACTION Nepal Staff + Quarterly Report	Key Informants - MoSD Karnali Province

1.5	In December 2019, the Mayor and health coordinator in Panchapuri attributed increases in their indicators around growth monitoring and antenatal care visits to incorporating health promotion and health education provided by a health worker to the pregnant women's group and the healthy mothers group	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Not Sustainable	Breakthrough ACTION Nepal Staff	Key Informants - Panchapuri
0.1	Since December 2018, the Health Coordinator in Panchapuri has been using the monitoring checklist consistently during the monthly meeting to coordinate with health workers and to discuss issues with the mayor and deputy mayor.	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1,2	Practice	Breakthrough ACTION Nepal Staff	Key Informants - Panchapuri

0.2	Since implementing the monitoring checklist and engaging in community interactions to recognize gaps [December 2018], the health section in Panchapuri has incentivized Post- Natal Care community outreach visits of their health workers	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Practice	Breakthrough ACTION Nepal Staff	Key Informants - Panchapuri
0.3	Since December 2018, the health coordinator, ward chair and health section chair in Barahatal have been using data from the monitoring checklist during meetings for the discussion of budgets, to monitor, evaluate and improve their programs	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Practice	Breakthrough ACTION Nepal Staff	Key Informant - Barahatal

0.4	Since January 2019, as a result of participation in the SBC materials review workshop, NHEICC has been continuing to revise materials based on the updates identified during the review workshop.	Between July and September 2018, Breakthrough ACTION Nepal conducted capacity mapping workshops with federal, provincial, and local level stakeholders to understand the current capacity to design, implement, monitor, and coordinate SBC in Nepal. Breakthrough ACTION used the SBC capacity assessment and mapping tool to facilitate a robust, rigorous, and participatory assessment of NHEICC, and provincial and local-level stakeholders. Since January 2018, Breakthrough ACTION Nepal held individual meetings with other key USAID partners in-country such as the Suaahara II project, System Strengthening for Better Health (SSBH), Sabal, Family Planning Association of Nepal, and others for learning exchanges, collaboration, avoiding duplication, and extending the project's reach. Breakthrough ACTION Nepal collected and catalogued more than 200 existing family planning, MNCAH, and nutrition SBC materials (print, audio, audiovisual, mobile applications) produced within the last five years from key government, NGO, and INGO partners. In the technical review meeting in November 2018, central government, central-level program divisions, NGO, INGO, and SBC stakeholders determined that a process would be needed to critically review the collected materials. Breakthrough ACTION supported NHEICC in facilitating the workshop. In January 2019, NHEICC facilitated a 1.5-day family planning and maternal, newborn, child, and adolescent health (FPMNCAH), and nutrition SBC materials review workshop with development stakeholders. Based on the recommendations made in the workshop, NHEICC revised and printed the reviewed materials for its use, and also compiled materials related to others health topics outside of FPMNCAH for its review.	None	IR1	Practice	Breakthrough ACTION Nepal Staff	Key Informant - NHEICC
0.5	In March 2019, in Guthichaur, the health coordinators created new monitoring checklists to monitor the supply chain, logistics stock, and monitoring of plans after the Operations Management (OM) committee identified the need for checklists in other areas.	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Not Sustainable	Breakthrough ACTION Nepal Staff	Key Informant - Guthichaur

O.6	Since March 2019, Sudurpashchim province (Province 7, far west) has requested Breakthrough ACTION for technical assistance with SBC and with the development of a province-level SBC health promotion strategy that did not exist before.	As per the request made by the health directorate (HD) training section of the Province 7 MoSD, Breakthrough ACTION Nepal supported the HD to organize a five- day capacity strengthening exercise on SBC for health from May 20–24, 2019, in Dhangadi. The purpose of the exercise was to strengthen the staff capacity on SBC, developing a team so that they can propose inclusion of communication activities in the coming fiscal year. As per the request made by the health directorate (HD) training section of the Province 7 MoSD, Breakthrough ACTION Nepal supported the HD to organize a five- day capacity strengthening exercise on SBC for health from May 20–24, 2019, in Dhangadi. The purpose of the exercise was to strengthen the staff capacity on SBC, developing a team so that they can propose inclusion of communication activities in the coming fiscal year. Province 7 has also shown interest in implementing the SBC Palika Package, which was shared with the HD. The HD director has committed to send feedback on the package and asked all the participants to facilitate allocating a budget for SBC activities from the ward level. SBC orientations/workshops were facilitated at the province level in Karnali emphasizing the importance of SBC. Through word-of-mouth a neighboring province became interested and also requested the Palika Package.	None	None	Not Sustainable	Breakthrough ACTION Nepal Staff + Annual Report	External Documents
0.7	In April 2019, the Panchapuri health section and health coordinators developed an integrated monitoring checklist adapting their central checklist and using the monitoring and supervision checklist as an example to monitor all other health programs and activities	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Not Sustainable	Breakthrough ACTION Nepal Staff	Key Informants - Panchapuri

0.8	Since May 2019, the pregnant women's groups in Guthichaur and Barahatal have been continuing their monthly meetings without Breakthrough ACTION support	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	None	Practice	Breakthrough ACTION Nepal Staff	Key Informants - Barahatal, Guthichaur
0.9	Since May 2019, health facility in-charges have now been actively participating in the seven- step annual planning and budgeting process for the first time in all four municipalities.	As a result of Breakthrough ACTION's trainings and orientations, communication, coordination, and collaboration on the design, planning, budgeting, and implementing of SBC programs has been increased. Participants from multiple municipalities highlighted the inclusion of health sector officials into the annual planning and budgeting process. Learning exchanges: Breakthrough ACTION Nepal invited and engaged health facility in-charges and health officials—health officials recognized the value of the contributions that health facility in-charges can make to the interaction.	None	IR2	Practice	Breakthrough ACTION Nepal Staff + MSC Report	Key Informants - Panchapuri, Barahatal, Chandannath, Guthichaur

0.10	Since May 2019, the rural municipality of Tila has replicated the Deputy Mayor with Pregnant Women program after the Deputy Mayor of Tila visited Guthichaur and observed the program and recognized its value.	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD. The deputy mayor of Tila visited Guthichaur for other reasons but during that visit she learned about the Deputy Mayor with Pregnant Women Program and recognized its value. She decided to replicate the program and associated activities in Tila and Breakthrough ACTION supported in the development of those activities.	None	IR 1	Practice	Breakthrough ACTION Nepal Staff	Key Informant - Guthichaur + Tila
0.11	On June 10, 2019, the Korea International Cooperation Agency (KOICA) Nepal requested BA Nepal to facilitate a capacity building session on SBC materials development, organized by the Health Insurance Board and KOICA Nepal	Having been involved in some Breakthrough ACTION activities and learning about their work, with an aim of revising and developing the enrollment assistant's handbook and health insurance promotional materials, the KOICA Nepal and Health Insurance Board requested a capacity building session from Breakthrough ACTION Nepal on SBC Materials Development.	None	None	Not Sustainable	Breakthrough ACTION Nepal Staff + Annual Report	Key Informant - KOICA
0.12	Since July 2019, the Health Directorate in Karnali Province has adapted and incorporated the SBC components of the monitoring and supervision checklist to their existing monitoring checklists for all health areas	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Practice	Breakthrough ACTION Nepal Staff	Key Informants - Health Directorate Karnali Province

0.13	Since July 2019, as part of the Deputy Mayor with Pregnant Mothers program in Chandannath and Guthichaur the community interactions are being done more formally and are used to motivate pregnant women to come to the facility by providing them with the invitation letters	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Practice	Breakthrough ACTION Nepal Staff	Key informants - Chandannath, Guthichaur
0.14	Since July 2019, the Deputy Chair in Barahatal has now allocated budget of 50,000 rupees for each pregnant women's group in 10 wards to support women with limited resources. The budget helps pregnant women afford their trip to the health facility in the ambulance and also provides pregnant women with financial incentives when they give birth at the facility	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Policy	Breakthrough ACTION Nepal Staff	Key Informants - Barahatal

0.15	Since July 2019, the Barahatal municipality bought two ambulances as part of the Deputy Chair with Pregnant Women program to help women with limited resources make the trip to giving birth at the health facility	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Policy	Breakthrough ACTION Nepal Staff	Key Informants - Barahatal
0.16	Since July 2019, in Barahatal as part of the pregnant women's group, the women now support one another after birth at the facility by providing the new mothers with nutritious food and clothing either at their own expense or using funds allocated at the ward level if the women can't afford to do it on their own.	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Practice	Breakthrough ACTION Nepal Staff	Key Informants - Barahatal

0.17	Since July 2019, the health sections in Panchapuri mandated the health facility in- charges to invite the ward chairs to all the community interactions seeing how the ward chairs were making a difference during the Breakthrough ACTION-led community interactions and subsequent discussions	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR2	Practice	Breakthrough ACTION Nepal Staff	Key Informant - Panchapuri
0.18	Since July 2019, the Panchapuri municipality has allocated 50% of their total health budget to go towards institutional delivery and Antenatal Care after those were identified as key gap areas for improving health in their communities during their work with Breakthrough ACTION	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Policy	Breakthrough ACTION Nepal Staff	Key Informants - Panchapuri

O.19	In July 2019, all four focal municipalities (Chandannath and Guthichaur in Jumla; Panchapuri and Barahatal in Surkhet) included SBC for health in their annual plans and allocated funding for SBC in their local budgets for the first time ever.	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning,	None	IR1	Policy	Breakthrough ACTION Nepal Staff + Annual Report	Key Informants - Panchapuri, Barahatal, Chandannath, Guthichaur
		In SBC programming and explains what can be done to support effective plaining, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD. In addition to these activities, Breakthrough ACTION Nepal advocated for budget allocation for SBC with partners and stakeholders at the provincial and palika levels and provided technical assistance toward incorporating SBC budgets.					
0.20	In July 2019, Karnali province included Health Promotion in their annual plans and allocated funding for health promotion in their local	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms).	None	IR1	Policy	Breakthrough ACTION Nepal Staff + Annual Report	Key informants - Health Directorate Karnali Province + MOSD Karnali
	budgets	Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD. In addition to these activities, Breakthrough ACTION Nepal advocated for budget allocation for SBC with partners and stakeholders at the provincial and palika levels and provided technical assistance toward incorporating SBC budgets.					Province

0.21	In July 2019, the Ministry of Social Development (MoSD) in Karnali province applied the P-process in their annual budgeting and planning process	In December 2018, Breakthrough ACTION Nepal conducted an SBC/HCD-informed workshop in Surkhet in the Karnali province with end users to gain insights for developing the SBC Palika Package. The participants included health coordinators, health post in-charges, ward elected members, palika representatives from each of the four test palikas as well as province health staff, a district health officer, and development sector partner NGOs (Suaahara II and SSBH). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD. Several meetings to review the SBC Palika Package were held at the palika and province levels and included SBC partners, elected representatives, and members of the Ministry of Health.	None	IR1	Not Sustainable	Breakthrough ACTION Nepal Staff	Key Informants - MoSD Karnali Province
0.22	In September 2019, the Manmohan College and the Institute of Medicine (IOM) secured an agreement with BA Nepal for internship opportunities for two bachelors-level public health students and two masters-level health promotion and education students interested in learning more about SBC and health promotion	Between June and September 2018, Breakthrough ACTION conducted an SBC Landscape Analysis centrally, provincially, and at local levels using Net-Map techniques. Participants explored SBC connections as well as data/information- sharing collaboration. Universities as a part of the coordination piece to keep up with existing literature and research was identified as a gap during the net mapping. Breakthrough ACTION Nepal organized a sharing and discussion event in Kathmandu on May 8, 2019, with researchers and academics on data scoping and evidence map generation. IOM-CDPH and Kathmandu University expressed their interest in continuing to work on the data-scoping exercise. Breakthrough ACTION Nepal then organized two follow-up meetings with IOM-CDPH to discuss the use and sustainability of data scoping and evidence maps. After the meeting, IOM-CDPH prepared a concept note on continuing the data-scoping exercise and the expected support areas from Breakthrough ACTION Nepal. On September 26, 2019, Breakthrough ACTION conducted a data scoping orientation and exercise with 37 Masters level public health students from the IOM. The objectives of the orientation were to share Breakthrough ACTION's data-scoping exercise process and lessons, and to explore the opportunity to collaborate with faculty and students on continuing the data-scoping exercise. This internship opportunity was raised during the signing of the data scoping Letter of Understanding (LOU) between Breakthrough ACTION Nepal and IOM-CDPH in efforts to create a linkage with the university.	Building on the collaboration formed under HC3	None	Not Sustainable	Breakthrough ACTION Nepal Staff	Key informant - CDPH IOM + External Documents

0.23	Since September 2019, UNICEF has requested technical assitance from Breakthrough ACTION towards generalizing and adapting the SBC palika package for use in their districts and organized a training of trainers session using their own resources	In December 2018, Breakthrough ACTION Nepal conducted an SBC/HCD-informed workshop in Surkhet in the Karnali province with end users to gain insights for developing the SBC Palika Package. The participants included health coordinators, health post in-charges, ward elected members, palika representatives from each of the four test palikas as well as province health staff, a district health officer, and development sector partner NGOs (Suaahara II and SSBH). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD. Several meetings to review the SBC Palika Package were held at the palika and province levels and included SBC partners, elected representatives, and members of the Ministry of Health. On September 10, 2019, Breakthrough ACTION assisted NHEICC to hold a joint action plan meeting with its development sector partners. The workshop was conducted with the participation of key SBC stakeholders for the first time in the history of NHEICC to discuss the upcoming fiscal year SBC plan. UNICEF attended the joint action plan meeting.	None	None	Not Sustainable	Breakthrough ACTION Nepal Staff + Event Report	Key Informant - UNICEF + External Document
0.24	Since September 2019, Suaahara has adapted certain components of the SBC palika package and rolled them out in their implementing areas	In December 2018, Breakthrough ACTION Nepal conducted an SBC/HCD-informed workshop in Surkhet in the Karnali province with end users to gain insights for developing the SBC Palika Package. The participants included health coordinators, health post in-charges, ward elected members, palika representatives from each of the four test palikas as well as province health staff, a district health officer, and development sector partner NGOs (Suaahara II and SSBH). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD. Several meetings to review the SBC Palika Package were held at the palika and province levels and included SBC partners, elected representatives, and members of the Ministry of Health.	None	None	Not Sustainable	Breakthrough ACTION Nepal Staff	Key informant - Suaahara

0.25	Since September 2019, Ipas has undertaken their own materials review and compilation process around safe abortion IEC materials involving various partners and stakeholders and have since created a catalogue of the materials and submitted to NHEICC to share with other stakeholders and partners	Between July and September 2018, Breakthrough ACTION Nepal conducted capacity mapping workshops with federal, provincial, and local level stakeholders to understand the current capacity to design, implement, monitor, and coordinate SBC in Nepal. Breakthrough ACTION used the SBC capacity assessment and mapping tool to facilitate a robust, rigorous, and participatory assessment of NHEICC, and provincial and local-level stakeholders. Since January 2018, Breakthrough ACTION Nepal held individual meetings with other key USAID-partners in-country such as the Suaahara II project, SSBH, Sabal, Family Planning Association of Nepal, and others for learning exchanges, collaboration, avoiding duplication, and extending the project's reach. Breakthrough ACTION Nepal collected and catalogued more than 200 existing family planning, MNCAH, and nutrition SBC materials (print, audio, audiovisual, mobile applications) produced within the last five years from key government, NGO, and INGO partners. In the technical review meeting in November 2018, central government, central-level program divisions, NGO, INGO, and SBC stakeholders determined that a process would be needed to critically review the collected materials. Breakthrough ACTION supported NHEICC in facilitating the workshop. In January 2019, NHEICC facilitated a 1.5-day FPMNCAH and nutrition SBC materials review workshop with development stakeholders. Based on the recommendations made in the workshop, NHEICC revised and printed the reviewed materials for its use, and also compiled materials related to others health topics outside of FPMNCAH for its review.	None	None	Not Sustainable	Breakthrough ACTION Nepal Staff	Key informant - Ipas
0.26	Since November 2019, in Ward 5, and subsequently in other wards in Panchapuri, the health sections mandated at least one health worker (nurse/midwife) to attend the healthy mothers group as a way to improve the health education after seeing the effectiveness of the pregnant women's group and of the community interactions.	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Not Sustainable	Breakthrough ACTION Nepal Staff	Key Informant - Panchapuri

0.27	Since November 2019, the working group formed under the guidance of IOM-CDPH and BA Nepal is continuing to work on data scoping	Between June and September 2018, Breakthrough ACTION conducted an SBC Landscape Analysis centrally, provincially, and at local levels using Net-Map techniques. Participants explored SBC connections as well as data/information- sharing collaboration. Universities as a part of the coordination piece to keep up with existing literature and research was identified as a gap during the net mapping. Breakthrough ACTION Nepal organized a sharing and discussion event in Kathmandu on May 8, 2019, with researchers and academics on data scoping and evidence map generation. IOM-CDPH and Kathmandu University expressed their interest in continuing to work on the data-scoping exercise. Breakthrough ACTION Nepal then organized two follow-up meetings with IOM-CDPH to discuss the use and sustainability of data scoping and evidence maps. After the meeting, IOM-CDPH prepared a concept note on continuing the data-scoping exercise and the expected support areas from Breakthrough ACTION Nepal. On September 26, 2019, Breakthrough ACTION conducted a data scoping orientation and exercise with 37 Masters level public health students from the IOM. The objectives of the orientation were to share Breakthrough ACTION's data-scoping exercise process and lessons, and to explore the opportunity to collaborate with faculty and students on continuing the data-scoping exercise. This internship opportunity was raised during the signing of the data scoping Letter of Understanding (LOU) between Breakthrough ACTION Nepal and IOM-CDPH in efforts to create a linkage with the university.	None	None	Not Sustainable	Breakthrough ACTION Nepal Staff	Key Informants - CDPH IOM + External Document
0.28	On December 11, 2019, the MOHP endorsed the SBC palika package and recommended its use to other palikas, allowing for the MOHP logo to be included in the SBC palika package	In December 2018, Breakthrough ACTION Nepal conducted an SBC/HCD-informed workshop in Surkhet in the Karnali province with end users to gain insights for developing the SBC Palika Package. The participants included health coordinators, health post in-charges, ward elected members, palika representatives from each of the four test palikas as well as province health staff, a district health officer, and development sector partner NGOs (Suaahara II and SSBH). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD. Several meetings to review the SBC Palika Package were held at the palika and province levels and included SBC partners, elected representatives, and members of the Ministry of Health.	None	None	Not Sustainable	Breakthrough ACTION Nepal Staff	External Document
S		System-Level Outcomes					

5.1	Since December 2018, palika-level elected representatives and health coordinators in Chandannath and Guthichaur have been consistently using the monitoring and supervision checklist to monitor their own SBC activities	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Practice	Breakthrough ACTION Nepal Staff	Key informants - Chandannath and Guthichaur
5.2	Since May 2019, the Mayor and Deputy Mayor of Guthichaur added heaters in all three of their birthing centers after it was identified as a key reason why pregnant women don't go to the birthing centers during the community interactions	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD.	None	IR1	Practice	Breakthrough ACTION Nepal Staff	Key Informant - Guthichaur

S.3	Since June 2019, the Panchapuri rural ministry, elected officials, health coordinators, ward chairs and stakeholders are coordinating better around the discussion of community issues	In December 2018 in the focal municipalities and March 2019 in Karnali province, Breakthrough ACTION Nepal conducted MEL workshops and exercises for health officials and elected representatives. Participants learned to develop process monitoring indicators, impact evaluation indicators, a monitoring checklist, SBC technical support visit reporting format, and which data sources to look at within their localities. Since December 2018, Breakthrough ACTION has provided assistance to municipality officials, including preparation for the annual planning process and activities, on-site coaching and technical assistance, data analysis, community interactions, identifying gaps (e.g., SBC, coordination, end-planning, policy), and DHIS-2 training (e.g., entry, analysis, reporting, HMIS system forms). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD. In addition to these activities, Breakthrough ACTION Nepal advocated for coordination and budget allocation for SBC with partners and stakeholders at the provincial and palika levels and provided technical assistance toward incorporating SBC budgets.	The establishment of the District Health Office has also helped with the coordination	IR2	Practice	Breakthrough ACTION Nepal Staff	Key informant - Panchapuri
S.4	Since July 2019, partners such as Suaahara, UNICEF and WHO have been coordinating to share and adapt their IEC materials amongst one another	Between July and September 2018, Breakthrough ACTION Nepal conducted capacity mapping workshops with federal, provincial, and local level stakeholders to understand the current capacity to design, implement, monitor, and coordinate SBC in Nepal. Breakthrough ACTION used the SBC capacity assessment and mapping tool to facilitate a robust, rigorous, and participatory assessment of NHEICC, and provincial and local-level stakeholders. Since January 2018, Breakthrough ACTION Nepal held individual meetings with other key USAID partners in-country such as the Suaahara II project, SSBH, Sabal, Family Planning Association of Nepal, and others for learning exchanges, collaboration, avoiding duplication, and extending the project's reach. Breakthrough ACTION Nepal collected and catalogued more than 200 existing family planning, MNCAH, and nutrition SBC materials (print, audio, audiovisual, mobile applications) produced within the last five years from key government, NGO, and INGO partners. In the technical review meeting in November 2018, central government, central-level program divisions, NGO, INGO and SBC stakeholders determined that a process would be needed to critically review the collected materials. Breakthrough ACTION supported NHEICC in facilitating the workshop. In January 2019, NHEICC facilitated a 1.5-day FPMNCAH and nutrition SBC materials review workshop with development stakeholders. Based on the recommendations made in the workshop, NHEICC revised and printed the reviewed materials for its use, and also compiled materials related to others health topics outside of FPMNCAH for its review.	None	None	Practice	Breakthrough ACTION Nepal Staff	Key Informant - Suaahara

S.5	Since September 2019, the Panchapuri elected representatives and the health sector are applying SBC approaches towards addressing other community issues such as child marriage, polygamy and chaupadi.	In December 2018, Breakthrough ACTION Nepal conducted an SBC/HCD-informed workshop in Surkhet in the Karnali province with end users to gain insights for developing the SBC Palika Package. The participants included health coordinators, health post in-charges, ward elected members, palika representatives from each of the four test palikas as well as province health staff, a district health officer, and development sector partner NGOs (Suaahara II and SSBH). Breakthrough ACTION supported governmental province and municipality teams in designing and testing the SBC Palika Package, which includes step-by-step guidance for SBC programming and explains what can be done to support effective planning, implementation, and monitoring of SBC programs and activities. The package was designed using a highly participatory approach, including activities informed by HCD. Several meetings to review the SBC Palika Package were held at the palika and province levels and included SBC partners, elected representatives, and members of the Ministry of Health.	None	IR1	Not Sustainable	Breakthrough ACTION Nepal Staff	Key informant - Panchapuri	
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IR1: Enhanced capacity of the Government of Nepal to design, implement, and evaluate SBC programs

IR2: Enhanced Government of Nepal coordination of SBC programming