

# What do we mean by individual level capacity strengthening? A systematic scoping review to improve conceptual clarity.



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## Background

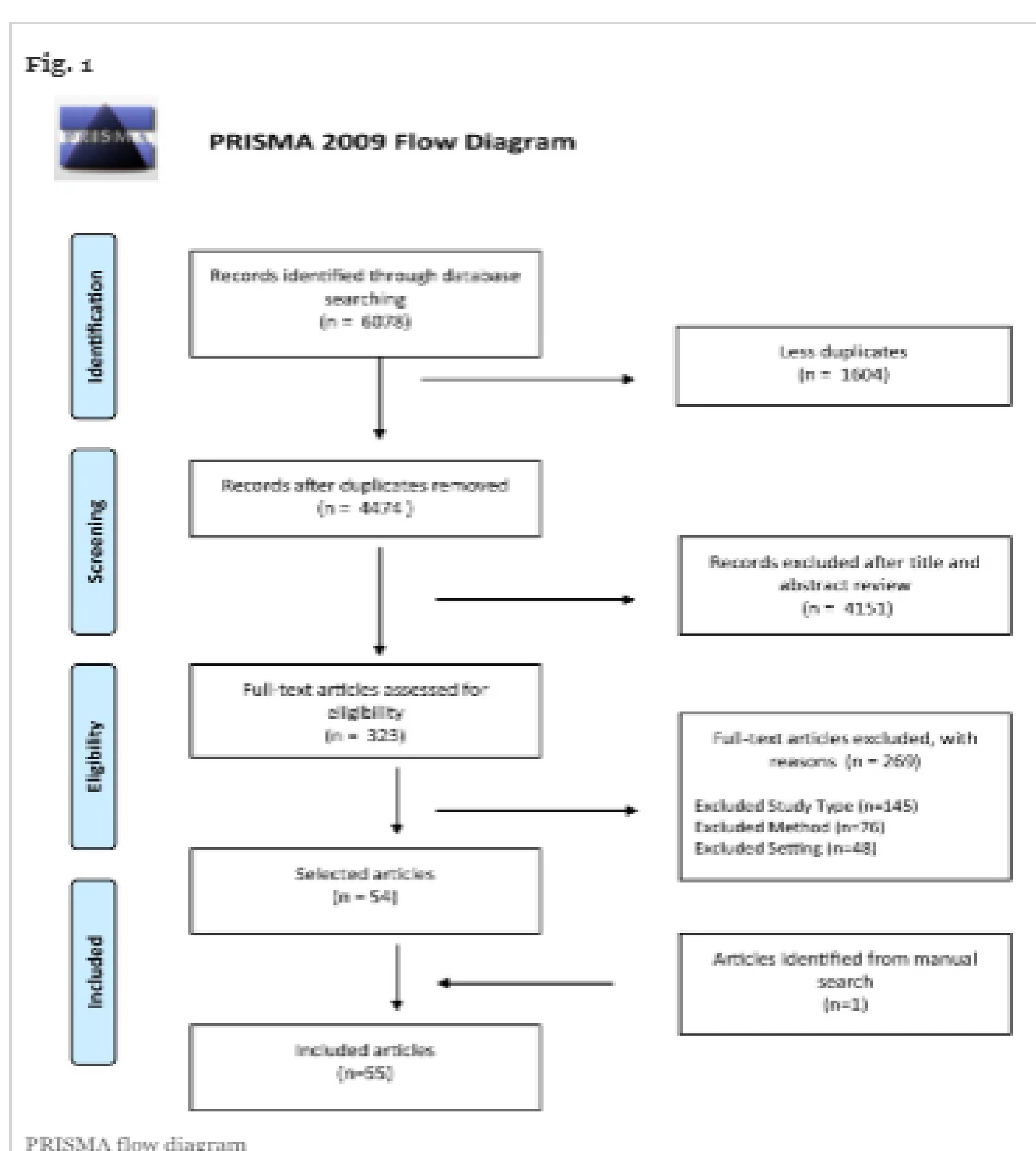
- Capacity strengthening of primary health care workers is widely used to strengthen health service delivery, particularly in low- and middle-income countries.
- Capacity strengthening interventions are considered an important mechanism to achieve **Universal Health Coverage (UHC)** under **Workforce 2030**, through the **Global Strategy for Human Resources for Health**.
- In the context of these global frameworks, and to support a strong workforce to strengthen health systems there are substantial investments to build primary health worker capacity.
- Despite the widespread recognition of the importance of capacity strengthening to improve access to quality health care, how the term 'capacity strengthening' is both used and measured varies substantially across the literature.

## Methods

To generate a better understanding of what is meant by the term 'capacity strengthening' for primary health care workers:

- We conducted a **scoping review** of the literature for the most common domains of individual capacity strengthening and their most common forms of measurement.<sup>1</sup>
- We searched **six electronic databases** for studies published between January 2000 and October 2020.
- We screened 4474 articles at title and abstract phase and reviewed 323 full-text articles. **55 articles were ultimately identified for inclusion**

Figure 1: PRISMA Flow Diagram



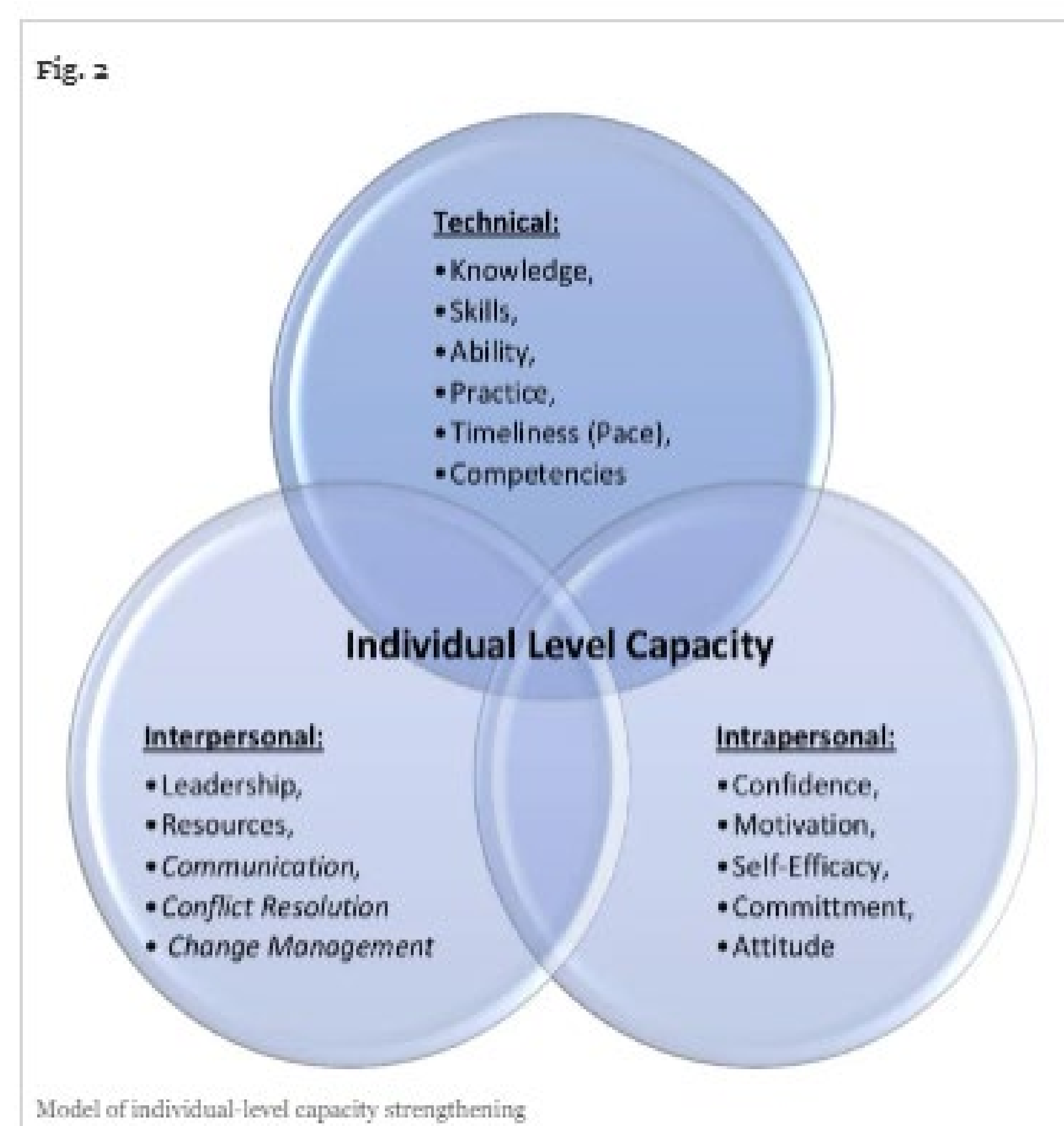
## Key Terms

**Capacity:** The ability to carry out stated objectives.<sup>2</sup>

**Capacity Strengthening:** as an ongoing process by which individuals, groups, organisations, and societies increase their ability to perform core functions, solve problems, define and achieve objectives, and understand and deal with development needs in a broad context and sustainable manner.<sup>3</sup>

**Capacity Evaluation:** Evaluating capacity must consider that (i) capacity strengthening is a process and therefore evolves over time; (ii) aggregates of individual change may be insufficient to assess organisational or community level changes, and (iii) capacity strengthening may result in unintended consequences across other components.<sup>4</sup>

Figure 2: Model of Individual Level Capacity Strengthening



Model of individual-level capacity strengthening

## Findings

- The most salient domains identified in the sample were **knowledge and skills**, followed by **attitude, confidence, and practice**.
- These are either sole domains of capacity or used in combination with other domains including **self-efficacy, practices, ability, and competencies**.
- Only 20 studies assessed the active implementation of objectives, through either observation or assessment of practical application.
- Individual capacity strengthening is primarily measured using **pre- and post-tests, practical evaluations, and observation**.
- Our results suggest that the definition of capacity as the ability to carry out stated objectives is not systematically reflected operationally within the extant literature. Rather, capacity strengthening is largely operationalised as testing knowledge for action.

Figure 3. Health Workforce 2030

A Global Strategy on Human Resources for Health



## Conclusions

- The concept of capacity strengthening for primary health care reflected in a number of relevant frameworks and theories differs from what is commonly seen in practice, where **capacity building is largely seen as knowledge increase and skills development**.
- Given the range of domains and measurements found in the literature and the focus on strengthening health care systems within global health, we identify a need for a more defined description of what is, and what is not, considered 'capacity strengthening'.
- We recommend interventions addressing a single domain to simply use the terminology ascribed to the specific activity (i.e. increasing skills or improving knowledge, etc.) as a more accurate reflection of an intervention's impact, rather than using the broader term 'capacity strengthening'.
- We propose that individual capacity be better conceptualised in terms of a combination of domains that span technical ability, such as knowledge and skills; intra-personal domains, as domains internal to the individual, such as motivation and confidence; and inter-personal domains, such as leadership and management.**
- A conceptualisation of individual capacity strengthening across **technical, intra-personal and inter-personal domains** is proposed as a way to offer greater conceptual clarity and a more practical application of this concept in future.
- We argue that one domain is insufficient to be considered 'capacity strengthening' and encourage that the use of the term 'capacity strengthening' be reserved for broader, multi-faceted, interventions working across more than one domain.
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