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INSTITUTE OF TROPICAL MEDICINE ANTWERP (ITM)

**DESK REVIEW OF CURRENT CAPAC-
ITY STRENGTHENING ACTIVITIES
WITHIN THE FA5 PROGRAMME AND
DEVELOPMENT OF A CAPABILITIES
ASSESSMENT TOOL**

|

Final Report

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ABBREVIATIONS

AHRI	Armauer Hansen Research Institute
AMR	antimicrobial resistance
ARES	Académie de recherche et d'enseignement supérieur
BPKIHS	B.P. Koirala Institute of Health Sciences
CERRHUD	Centre de Recherche en Reproduction Humaine et en Démographie's
CEA-PCMT	Centre d'Excellence Africain pour la Prévention et le Contrôle des Maladies Transmissibles
CHUK	Centre Hospitalier Universitaire de Kigali
CRUN	Clinical Research Unit of Nanoro
CRSK	University of Lubumbashi, the Kimpese Centre for Health Research
DGD	Directorate-general Development Cooperation and Humanitarian
DRC	Democratic Republic of the Congo
DVTD	Department of Veterinary Tropical Diseases
EPHI	Ethiopian Institute for Public Health
ESP	Faculty of Public Health
FA5	Framework Agreement 5
FA6	Framework Agreement 6
GRIPP	Get research into policy and practice
HAT	Human African Trypanosomiasis
IMTAvH	Institute of Tropical Medicine "Alexander von Humboldt"
INHEM	National Institute of Hygiene, Epidemiology and Microbiology
INRB	National Institute of Biomedical Research
IPC	infection prevention and control
IPK	Instituto de Medicina Tropical Pedro Kouri
ITM	Institute of Tropical Medicine Antwerp
JSF HES4SD	Joint Strategic Framework for Higher Education and Science for Sustainable Development
LMICs	low- and middle-income countries
LRM	National Mycobacteriological Reference laboratory
NHRC	Nepal Health Research Council
NIMPE	National Institute of Malariology, Parasitology and Entomology
NIPH	National Institute of Public Health
NRL-TB	National TB Reference Laboratory Rwanda
PNLTHA	National Programme for the Fight against Human African Trypanosomiasis
RBC	Rwanda Biomedical Center
RL	Reference laboratory
SOPH	School of Public Health
SRH	sexual and reproductive health
TIDC	Tropical and Infectious Diseases Centre
ToC	Theory of Change
UPCH	Universidad Peruana Cayetano Heredia
UWC	University of Western Cape
VBD	vector-borne diseases

1 Introduction

The Syspons GmbH was commissioned by the Institute of Tropical Medicine (ITM) to conduct a desk review of current capacity-strengthening activities under the Framework Agreement 5 (FA5) and to develop a robust, context-sensitive 5C Self-Assessment Tool to guide future programming under FA6.

The ITM in Antwerp is a leading centre for advanced research, education, and service provision in the field of tropical medicine and international public health. Through its partnerships with universities, research institutions, and public health agencies worldwide, ITM works to improve health systems, strengthen disease control, and promote health equity, particularly in low- and middle-income countries.

As part of this mandate, the FA5, “Connecting the Dots – Higher Education and Science for a Healthier World,” serves as a key strategic vehicle for advancing institutional capacity development in partner countries. Implemented with the support and partly financed by of the Belgian Directorate-General for Development Cooperation and Humanitarian Aid (DGD), FA5 aims to strengthen the organisational, research, and educational capacities of partner institutions, enabling them to play a greater role in addressing national and global health challenges.

The assignment is grounded in a context in which institutional capacity development is receiving increasing attention as both a strategic priority and a methodological challenge. In recent years, the 5C model has gained considerable momentum as a framework for understanding and assessing institutional change in development cooperation, having been adopted by numerous organisations for programme design, evaluation, and planning. Against this backdrop, our work addressed two interconnected objectives: first, to evaluate how capacity strengthening has been conceptualised, implemented, and experienced within FA5; and second, to design and validate a practical, evidence-based 5C-Self-Assessment Tool rooted in the 5C model. This integrated approach ensures that the evaluation generates not only retrospective insights but also actionable guidance for ITM and its partners. Our methodology emphasised rigour, contextual sensitivity, and participatory engagement. It combined document analysis, gap assessments, surveys, and case studies to build a comprehensive evidence base. The Self-Assessment Tool was co-developed and piloted with the partner institutions, ensuring that it reflects their realities, fosters ownership, and supports strategic learning. Through this process, we aimed to equip ITM and its partners with both, a clear understanding of FA5 achievements and a validated instrument to strengthen institutional capacities in the years ahead.

This final report outlines the objectives, methodology, and key findings and insights of the Fit-for-Purpose Evaluation as well as the development of the 5C Self-Assessment-Tool and concludes with recommendations for the next programme phase. Therefore, the report is structured as follows:

- **Chapter 2** contains an in-depth understanding of the evaluation subject (ITM FA5 2022-2026), including the theory of change and underlying impact hypothesis;
- **Chapter 3** explains the project design;
- **Chapter 4** includes the methodological approach and key findings of the Fit-for-Purpose Evaluation;
- **Chapter 5** outlines the methodological approach, insights and lessons learnt from the 5C-Self-Assessment Tool development and validation;
- and **Chapter 6** elaborates our recommendations for FA6.
 - The **Annex** includes the developed analytical grid, outlining the evaluation questions and indicators structured along the five capabilities and subdomains, as well as the Self-Assessment Tool and the accompanying methodological and terminological guides.

2 Understanding of FA5

For a better understanding of the evaluation object, this chapter describes firstly the institutional and programme background of ITM and the ITM Framework Agreement 5 (2022-2026). Secondly, the Theory of Change (ToC) and underlying impact hypotheses, developed in the inception phase of this assignment are outlined.

2.1 Programme and Institutional Background

The Institute of Tropical Medicine, founded in 1906, is a leading institution dedicated to research, education, and services in tropical diseases and global health, with a focus on low- and middle-income countries (LMICs). It operates through three scientific departments—Biomedical Sciences, Clinical Sciences, and Public Health—supported by offices for research, education, and international cooperation. These departments engage in research, teaching, expert advice, and institutional strengthening in several LMICs. ITM's Institutional Policy Plan retains the same four thematic priorities as the 2019–2024 strategy (sustainable and equitable health systems, disease prevention, control and elimination, emerging infections and outbreaks, and antimicrobial resistance) as a cross-cutting challenge. These priorities are pursued through strong interdisciplinary departments, integrated P³ programmes (linking research on pathogens, patients, and populations), transformative and equitable partnerships, and a valorisation pathway (HI4A) that translates research into inclusive, scalable impact on policy and practice.

ITM's support to Belgian development cooperation focuses on **turning research into policy and practice through partnerships** that connect evidence-based insights with the real-world context of LMICs. ITM's activities within the area of development cooperation are mainly funded through Framework Agreements (FA) with the Directorate-general Development Cooperation and Humanitarian Aid (DGD). FAs support ITM in expanding and continuing international scientific and educational cooperation on health and fostering knowledge exchange by strengthening global partnerships. Leaders, scientists, and experts in the partner institutions as well as health professionals and policy makers are the direct target groups, while communities and individuals are meant to benefit from improved practices and policies. A major part of the DGD funding is spent on the capacity strengthening country programmes, while the scholarship and training components form the second largest part of the total DGD funding. The focus of the current evaluation is on capacity building in the country programmes under FA5.

“Connecting the Dots – Higher Education and Science for a Healthier World,” also known internally at ITM as the Fifth Framework Agreement (FA5), is a five-year programme running from January 2022 to December 2026, with a total budget of approximately 79.000.000 Euro. The programme operates across twelve countries and three global thematic areas. Its main goal is to strengthen institutional and human capacity and foster collaboration, with a strong emphasis on training and empowering both current and future health professionals to become ‘agents of change’ and their institutions to be ‘drivers of change’ (see Theory of change further down). Through the capacity institutional and human capacity strengthening prevention, diagnosis, surveillance and control of key infectious (e.g. tuberculosis, malaria and worm infections) should improve as well as the proper use of antibiotics and vaccine development and roll-out should be strengthened.

In its **twelve country programmes** (in Benin, Burkina Faso, Cuba, Cambodia, Democratic Republic of Congo (DRC), Ethiopia, Guinea, Nepal, Peru, South Africa, Rwanda and Vietnam), ITM works closely with local academic and policy-making partners to improve population health. This is done through **building knowledge and technology platforms, supporting education and research initiatives, and promoting collaboration**. A key element in each intervention is the integration of research into **policy and practice (GRIPP)**, ensuring that scientific work has real-world impact.

For each country programme, a single overarching outcome was defined (with the exception of the DRC, which includes two distinct outcomes) and linked to a corresponding theory of change. In the following a brief overview

of each country programme, forming the foundation for the more detailed analysis that will follow in the evaluation. These country-level outcomes also served as the basis for retrospectively developing the overall FA5 theory of change, which is presented in Chapter 2.2. All descriptions in this chapter are drawn from official country programme documents and are presented in alphabetical order.

Benin

In this country programme, ITM collaborates with the **National Mycobacteriological Reference laboratory (LRM)** and the **Centre de Recherche en Reproduction Humaine et en Démographie's (CERRHUD)**. The LRM supervises microscopy for tuberculosis diagnostics in numerous hospitals in Benin and CERRHUD is a research centre on sexual and reproductive health (SRH) and Demography associated to the Gynaecology and Obstetrics Clinic of Centre National Hospitalier Universitaire Hubert Koutoukou Maga (CNHU). It conducts research, carries out trainings and services delivery activities related to SRH and health policy and systems.. CERRHUD joined the country programme, which already exists since FA3, as a new partner institute under FA5.

The main objective of this country programme is to **increase the institutional capacity of LRM and CERRHUD for improved quality of health care in Benin**. To achieve this objective, the programme aims to improve service and practices, which includes ensuring that health providers can quickly and accurately diagnose (myco)bacterial infections, prescribe antibiotics appropriately, investigate and control hospital outbreaks through infection prevention and control (IPC) committees, and improve the quality and responsiveness of adolescent sexual and reproductive health services through tailored programmes. Furthermore, the programme's aim is to improve policies and strategies for health service delivery, which includes the full implementation of the antimicrobial resistance (AMR) action plan, updated and applied national IPC and adolescent SRH policies.

The funding volume of this country programme totalled 1.769.216 Euro.

Burkina Faso

In the scope of the country programme, ITM collaborates with the **Clinical Research Unit of Nanoro (CRUN)**, the national reference centre for research in Burkina Faso, and the **Centre Muraz** as a secondary partner with a collaboration on reproductive health. CRUN works together with local hospitals, institutes, national control programmes, the Ministry of Health and other policy makers. The country programme is the continuation of a collaboration between ITM and CRUN that has existed since 2008 (FA3).

The main objective of the country programme is to **improve research capacity in infectious disease to inform policy and control strategies**. In order to achieve this goal the programme works to improve research practice, through generation and transfer of competences, strengthening research infrastructure and promoting innovation and platform development. Additionally, the programme aims to improve services to society through the involvement of research-surveillance of health outcome for malaria, antimicrobial resistance and reproductive health, which will lead to insights in the needs for specific populations and better strategies. Furthermore, the programme intends to improve knowledge translation through capacity building on innovation tools and establishing, sustaining and expanding communication channels to share information. Furthermore, the programme targets improved access to knowledge through training and improved educational practices, with a special focus on gender balance and vulnerable female populations. Finally the programme plans to be part of national and regional networks in order to increase joint research and collaboration.

The funding volume of this country programme totalled 1.116.936,00 Euro.

Cambodia

In this country programme, ITM collaborates with the **National Institute of Public Health (NIPH)**. The collaboration started during the FA4 (2017-2021) but ITM's activities in Cambodia have a decades long history.

The overall objective of this country programme is to establish a **strong National Institute for Public Health that delivers evidence-based knowledge and provides high quality education for equitable health policies**. In order to achieve this objective, the programme aims to improve the capacity of the NIPH to conduct clinical, operational, and health systems research. Furthermore, the programme intends to augment local expertise through high quality education and to strengthen institutional capacities and ability for change. Finally, the programme targets to improve NIPH capacity in health system and policy monitoring, evaluation, and knowledge translation of relevant information used to inform health & social protection policies.

The funding volume of this country programme totalled 1.383.571,55 Euro.

Cuba

In this country programme, ITM collaborates with the **Instituto de Medicina Tropical Pedro Kouri (IPK)** and the **National Institute of Hygiene, Epidemiology and Microbiology (INHEM)**, two semi-autonomous national institutions for postgraduate training, research and service in tropical medicine and public health. The country programme was launched under the FA3 and continued under FA4 and FA5. However, IPK and INHEM have been cooperating with ITM since 2003 and 1998.

The overall objective of this country programme is to **strengthen the collaboration between IPK and INHEM and synergistically enable institutional capacity to effectively address the current and future syndemics in Cuba**. In order to achieve this goal the programme intends platform development that supports the development and provision of new methodologies and advanced technologies to support research and control of infectious and non-communicable disease. Additionally, the programme aims to generate knowledge for research to action in the field of surveillance, prevention and control of priority diseases from a syndemic perspective. Lastly, through networking the programme aims to create synergies, support the exchange of relevant research results and increase the external visibility of the IPK and INHEM.

The funding volume of this country programme totalled 1.700.728,00 Euro.

Democratic Republic of Congo

In this country programme, ITM collaborated with five partner institutions: the **National Institute of Biomedical research (INRB)**, the **Faculty of Public Health (ESP) at the University of Lubumbashi**, the **Kimpese Centre for Health Research (CRSK)**, the **National Programme for the Fight against Human African Trypanosomiasis (PNL-THA)**. The country programme has been included in the FA3 and continued under FA4 and FA5.

The first objective of the country programme (DRC1) is the **strengthening of the partners – INRB, CRSK, ESP-institutional and scientific capacity in research, education and policy translation and becoming centres of excellence**. In order to achieve this objective the programme intends to professionalise training and improve research practice. Furthermore, the programme aims to transfer platform technology and methodology through the dissemination of technology knowledge as well as workshops and training. Finally the programme targets to get research into policy and planning through the involvement of policy and decision makers in all stages of research, the

provision of communication support as well as the involvement of the Centre de Connaissances en Santé DRC, specialized in writing policy briefs.

The second objective of the country programme (DRC2), which is co-funded by the Bill & Melinda Gates Foundation, is the **support to interruption of transmission of Human African Trypanosomiasis (HAT) by 2030**. In order to achieve this aim the programme targets to improve individual capacities in the domain of HAT through training, refreshment courses and other investment in skills. Also, the programme intends to improve screening as well as further develop a quality assurance system. Additionally, the programme aims to strengthen institutional capacities, especially in the domain of management and through network development. Finally, the programme aims to improve the collaboration between PNLTHS, INRB and CRSK in order to support cp-creation, transfer and application of relevant knowledge.

DRC is the only country where ITM's activities are supported by a local ITM office that provides an operational backbone for the researchers and leverages its proximity to advance institutional capacity strengthening of the partners.

The funding volume of this country programme totalled 22.572.651,00 Euro. (DRC1: 8.415.487,00 Euro and DRC2: 14.157.164,00 Euro)

Ethiopia

In this country programme, ITM collaborates with the **University of Gondar**, the **Jimma University** (cooperation started under FA5) and the **Armauer Hansen Research Institute (AHRI)** as well as the **Ethiopian Institute for Public Health (EPI)**. The country programme was initiated under the FA3 and continued under FA4 and FA5.

The overall objective of the country programme is a sustainable Ethiopian ecosystem of research institutions that is capable of contributing to programmatic change in neglected tropical diseases, antimicrobial resistance and viral disease. In order to achieve this objective the programme aims to develop or strengthen platforms and networks for better surveillance and research activities. This platforms will be supported by HR skills strengthening and educational activities. Furthermore, to ensure sustainability and scaling-up of the activities, the programme intends to develop a strategy to acquire additional external funding and to implement grant writing training. Finally, the programme aims to generate new and relevant knowledge for policy.

The funding volume of this country programme totalled 1.848.933,00 Euro.

Guinée Republic

In this country programme, ITM collaborates with **Maférinayah** and **Centre d'Excellence Africain pour la Prévention et le Contrôle des Maladies Transmissibles (CEA-PCMT)**. With both partners the ITM started the collaboration during the FA4 (2017-2021). The country programme was launched under FA4 and continues under FA5.

The main objective of this country programme is to **improve the uptake of evidence-informed health policies in Guinea**. In order to achieve this goal the programme intends to make clear sets of policy advice and relevant related materials available and share them actively among policy. Therefore, the programme aims to strengthen research capacity through improved data quality and use, integrated mental health insights, and shared results with policy-makers and stakeholders in Guinea. Furthermore, the programme intends to improve academic excellence through strengthened educational capacities and institutional capacity, especially in the field of communication and knowledge translation. On the basis of these results the programme targets to develop a GRIPP strategy in order to enable individuals and institutions to become agents of change.

The funding volume of this country programme totalled 1.730.724,00 Euro.

Nepal

In this country programme, ITM collaborates with the **Nepal Health Research Council (NHRC)**, that was originally founded under the Ministry of Health, but has been functioning as an autonomous body since 1991. Its primary responsibility is to promote and coordinate research on health and health-related problems of national priorities in Nepal. The second partner is the **B.P. Koirala Institute of Health Sciences (BPKIHS)**, which is a health sciences university, established in 1993. As envisioned by the Nepalese parliament, a Tropical and Infectious Diseases Centre (TIDC) was established within BPKIHS as a centre of excellence. The country programme was initiated under the current FA5. The main objective of this country programme is **to reduce the burden of vector-borne diseases (VBD) for all people in Nepal, with a special focus on mitigation of the increase in vector-borne disease cases that we expect to see in the coming years due to the effects of climate change in this area.** In order to achieve this goal, the programme intends to improve evidence-based VBD management and a sustainable elimination of Visceral leishmaniasis. Therefore, the programme aims to establish a more complete and integrated surveillance on VBD and improve surveillance-based actions by the national program. Additionally, the programme aims to increase translation of research into policy and establish NHRC and BPKIHS as Centres of Excellence.

The funding volume of this country programme totalled 1.015.000,00 Euro.

Peru

In this country programme, ITM collaborates with the **Institute of Tropical Medicine “Alexander von Humboldt” (IMTAvH)** of Universidad Peruana Cayetano Heredia (UPCH). The IMTAvH is a national and regional reference centre for tropical diseases and is attached to the Cayetano Heredia Hospital. It collaborates closely with the National Institute of Health. The ITM and the IMTAvH have had a 30-years-long collaborative relationship in the context of basic and translational research for the improvement of health in the field of infectious diseases that pose serious public health problems in Peru, Latin America and globally. The country programme was launched under FA3 and continues under FA4 and FA5.

The overall objective of this country programme is **better policies and less infectious diseases in Peru and Latin America.** To achieve this objective the programme aims to improve education through a specifically top quality education master and postgraduate courses with a professional teaching and pedagogic approach, reaching a diversity of trainees. Additionally, the programme aims to improve research through the development of a new research platforms and increased workforce of highly trained Peruvian and Latin American scientists. Also, the programme targets to enhance services by engaging stakeholders early, training local staff, ensuring resources and infrastructure, improving communication, and maintaining continuous monitoring and feedback. Furthermore, the programme aims to translate research into policy, expand its impact through broad dissemination, co-publish with public health partners, and strengthen the Research Office with a Senior Research Officer to drive policy engagement and collaboration. Finally, in order to strengthen networks, the programme intends to build a regional research consortium on infectious diseases in Latin America by strengthening national and regional networks and reinforcing the Research Office.

The funding volume of this country programme totalled 1.665.728,00 Euro.

Rwanda

the **Rwanda Biomedical Center (RBC)** and the **Centre Hospitalier Universitaire de Kigali (CHUK)** at the University of Rwanda. The RBC houses several reference laboratories, including the National TB Reference Laboratory (NRL-TB), which coordinates tuberculosis diagnostic activities in 200 nationwide laboratories and performs more

advanced microbiological and higher complexity molecular assays at the central level. The CHUK serves as a major national referral hospital, a clinical teaching site and a centre for research. The country programme was initiated under the current FA5.

The overall objective of the country programme is **sustainable control and reduced burden or elimination of infectious diseases in Rwanda**. In order to achieve this goal the programme aims to ensure appropriate, evidence-based clinical case management, and building capacity for surveillance and prevention for communicable diseases. Therefore, the programme targets training of technical and scientific staff in order to optimize (cross-border) diagnosis of tuberculosis and other infectious disease. Additionally, the programme intends to strengthen the capacity of diagnostic laboratories. Furthermore, through stakeholder engagement, the programme aims to facilitate the establishment of an operational centre of excellence for AMS at CHUK and provide national guidelines (GRIPP).

The funding volume of this country programme totalled 989.216,00 Euro.

South Africa

In this country programme, ITM collaborates the **Department of Veterinary Tropical Diseases (DVTD)** at the University of Pretoria and the **School of Public Health (SOPH)** at the University of Western Cape (UWC). The University of Pretoria, one of South Africa's largest universities, hosts the country's only Veterinary School, solely responsible for training veterinarians and veterinary nurses. Established in 1993, the School of Public Health trains policymakers and practitioners in research-based public health, guided by equity, social justice, and human dignity. The country programme was launched under FA3 and continues under FA4 and FA5

The main objective of the country programme is to **improve the health and wellbeing of vulnerable communities in South Africa and beyond**. In order to achieve this objective the programme aims to enable South-African Higher Education Institutions as drivers of change for health and wellbeing. Therefore, the programme intends to strengthen teaching, research, networking, and advocacy in South Africa through postgraduate training, partnerships as well as long-term community engagement that enhances trust and the relevance of knowledge.

The funding volume of this country programme totalled 2.079.437,00 Euro.

Vietnam

In this country programme, ITM collaborates with the **National Institute of Malaria, Parasitology and Entomology (NIMPE)**. NIMPE and ITM have been working together since 1995, mainly on research and education projects in the field of malaria and parasitology. NIMPE is the main institute in Vietnam for technological advice, research, education, data analysis and international cooperation in the field of scientific education and communication. Under the mandate of the Ministry of Health, NIMPE is responsible for implementing and managing national parasitic control programmes. The country programme was initiated under FA3 and continues under FA4 and FA5

The overall objective of the country programme is **the reduction of the burden and impact of malaria and food- and waterborne parasitic diseases in Vietnam, and finally to the elimination of malaria from Vietnam**. In order to achieve this objective, the programme aims to strengthen research methods, including the training on the One Health approach and multidisciplinary data integration. Furthermore, the programme intends to strengthen laboratory capacity through staff training as well as the implementation of state of the art diagnostic and surveillance tools. Additionally, the programme targets to strengthen the translation of research into policy and therefore, to strengthen research collaborations and capacity building efforts studying the intersection between socio-ecological systems and infectious disease control.

The funding volume of this country programme totalled 669.508,58 Euro.

In addition to country-level activities, the programme includes three **global components**: (1) Education & Scholarships, which promotes academic mobility and lifelong learning opportunities for students and staff; (2) Policy Support, which primarily targets the Belgian federal government but also fosters learning and dialogue within the broader global health sector; (3) Synergies, which enhances collaboration between country programmes, supports participation in international research, and encourages networking on major global challenges such as urbanisation, climate change, and health. Together, these components aim to build sustainable academic and research capacity that is socially relevant and globally connected. However, the focus of this evaluation lies on the country-level activities.

2.2 Theory of Change

The evaluation focuses on the programme level of FA5, aiming to generate an overall picture of how capacity strengthening has been conceptualised and implemented across the partner network. While each country programme operates under its own Theory of Change (ToC), reflecting specific institutional contexts, priorities, and strategic objectives, the analysis in this report aggregates these country-level insights to the FA5 programme level. This approach allows for the identification of overarching trends, common enablers and constraints, and cross-cutting patterns that transcend individual country contexts.

To understand and visualise the objectives of ITM Framework Agreement 5 (2022-2026) programme and how they are supposed to be achieved, a ToC was developed in the inception phase of this evaluation (see Figure 1). The programme-level theory of change visualises the intended impacts and outcomes of ITM's capacity strengthening activities at the framework agreement level and shows the underlying impact hypotheses by connecting the impacts and outcomes to outputs, activities, and inputs. To develop an overarching FA5-theory of change, the twelve country-programme-specific theories of change were considered as well as the overall ToC of the Joint Strategic Framework for Higher Education and Science for Sustainable Development (JSF HES4SD 2022 - 2026) of ITM, VLIRIOUS and Académie de recherche et d'enseignement supérieur (ARES).

Overall, FA5 aims in the long-term to contribute to improve health worldwide, especially in the selected partner countries. To achieve this **impact**, the FA5 programme addresses three pillars, namely service delivery, research, and education. In the realm of its capacity strengthening, ITM aims to achieve four intermediate impacts: (1) enable individuals to act as agents of change; (2) enable partner institutions to operate as drivers of change and lastly, (3) improved evidence-based health policies.

To achieve these impacts, the programme pursues 5 objectives on the **outcome** level in the areas of human, educational, research and institutional capacity as well as co-creation, transfer and application of relevant knowledge. These outcomes are achieved through different **outputs**.

At the activity level, ITM provides PhD scholarships and sandwich PhD programmes that combine short stays in Antwerp with a full-time research assignment embedded in the partner institutions. It offers technical and methodological support to enhance existing educational services and develop new ones, supplies technical equipment, and strengthens quality assurance and management systems. ITM also conducts monitoring visits, delivers training and coaching for partner institutions' staff and students, and engages in joint research. In addition, ITM fosters collaboration between partner institutions and both internal and external stakeholders by organizing exchange formats, networking events, and conferences.

The necessary inputs for these activities are provided by ITM (expertise, personnel, and infrastructure), as well as DGD and other financing bodies (financial resources).

While the ToC describes what the programme seeks to achieve and through which pathways, the **5C model** provides the analytical framework to understand how institutions strengthen their capacities to achieve these outcomes. Each of the five capabilities represents an essential dimension of institutional performance and learning (see in detail chapter 3) that underpins the FA5 outcomes. By embedding the FA5 Theory of Change within the logic of the 5C

model, the evaluation connects intended results and impact pathways with the institutional mechanisms that make them possible. This integration allows the evaluation to assess both the substantive outcomes of FA5 and the underlying institutional capabilities that sustain them, thereby providing a comprehensive understanding of how capacity strengthening unfolds across partner contexts. Rather than answering each hypothesis one-to-one, the evaluation uses the 5C framework to uncover the underlying mechanisms and institutional dynamics that influence whether and how the hypothesised results are realised. In this way, the 5C model operationalises the Theory of Change from an institutional development perspective, systematically examining the organisational prerequisites, that determine the achievement and sustainability of the programme's intended outcomes.

Before discussing each outcome-related hypothesis in detail, it is important to clarify that a key underlying assumption is the **strong interdependence between these outcomes**. In other words, achieving one outcome (e.g., strengthening research capacities) both depends on and influences the achievement of other outcomes (e.g., developing human capacities).

Outcome 1 - Human capacity: Partner institutions apply enhanced human capacities through active contribution of staff and students to research, teaching or institutional functions. The development and application of enhanced human capacities among staff and students reflect an institution's **Capability to Deliver Results** through competent and motivated personnel. In the context of Outcome 1, this capability reflects how an institution develops and applies its human capital to achieve its goals. It encompasses the institution's capacity to strengthen the skills and competencies of its personnel through structured training, academic development, mentoring, and opportunities for knowledge exchange.

Hypothesis OP1-OC1: If staff and PhD students gain thematic and methodological capacities, then partner institutions are able to apply enhanced human capacities through the active contribution of staff and students to research, teaching, and institutional functions.

Hypothesis OP2-OC1: If new curricula as well as advanced degree programmes are developed and improved, then partner institutions are able to apply enhanced human capacities through the active contribution of staff and students to research, teaching, and institutional functions.

Outcome 2 - Educational capacity: Partner institutions implement educational programmes through improved methods, curricular and collaboration structures. The **Capability to Deliver Results** addresses educational capacity in reflecting an institution's ability to design, manage, and deliver high-quality educational programmes that are aligned with its mission and national or regional priorities. It goes beyond teaching expertise and includes the capacity to plan, coordinate, and continuously improve curricula, using effective pedagogical methods and modern learning technologies. Strengthening staff competencies in curriculum development, teaching, and student supervision is a central element, ensuring that educators are equipped to deliver relevant and engaging learning experiences. It also involves establishing collaborative structures within and across departments that enable knowledge exchange, joint course delivery, and peer learning.

Hypothesis OP1-OC2: If staff and PhD students gain thematic and methodological capacities, then partner institutions are better equipped to implement educational programmes using improved infrastructure, methods, and collaboration structures.

Hypothesis OP2-OC2: If new curricula as well as advanced degree programmes are developed and improved, then partner institutions are able to strengthen their educational efforts through improved infrastructure, methods, and collaboration structures.

Outcome 3 – Research capacity: Partner institutions conduct and manage research through improved infrastructure, methods, and collaboration structures. This outcome refers to the **Capability to Deliver Results**, reflecting an institution's ability to plan, conduct, and manage research activities effectively. It includes staff skill development in research design, supervision, and scientific writing, supported by adequate technological infrastructure such as laboratories, IT systems, and digital platforms. Strong internal coordination and teamwork enable collaboration across departments and disciplines, while monitoring, evaluation, and learning (MEL) systems help track progress and

foster continuous improvement. Ultimately, this capability is demonstrated by the institution's capacity to generate, apply, and communicate research findings that inform education, policy, and practice.

Hypothesis OP1-OC3: If staff and PhD students gain thematic and methodological capacities, then partner institutions are better equipped to carry out research using improved infrastructure, methods, and collaboration structures.

Hypothesis OP2-OC3: If curricula are developed and improved and Master and PhD programmes as well as joint degrees are introduced, then partner institutions are better positioned to conduct and manage research through improved infrastructure, methods, and collaboration structures.

Hypothesis OP3-OC3: If high quality research publications are produced, then partner institutions are able to strengthen their research through improved infrastructure, methods, and collaboration structures.

Hypothesis OP5-OC3: If certain infrastructure is introduced and improved, for example diagnostics and surveillance tools, then partner institutions are better positioned to conduct and manage research through improved infrastructure, methods, and collaboration structures.

Hypothesis OP6-OC3: If systems for continuous improvement and learning are developed and implemented, then partner institutions are better equipped to carry out research using improved infrastructure, methods, and collaboration structures.

Hypothesis OP7-OC3: If collaboration among partner institutions is formalised through joint activities, shared platforms or co-publications, then they are able to strengthen their research through improved infrastructure, methods, and collaboration structures.

Hypothesis OP8-OC3: If platforms and networks are strengthened and performing effectively, then partner institutions can enhance their research capacity through improved infrastructure, methods, and collaboration structures.

Outcome 4 – Institutional capacity: Partner institutes institutionalise and apply effective processes in governance, planning, quality assurance and coordination. This outcome refers to the **Capabilities to Commit and Act and to Achieve Coherence**, as it reflects an institution's ability to translate strategic priorities into effective systems, policies, and decision-making processes. It includes the establishment of clear governance structures, transparent planning and coordination mechanisms, and strong leadership that ensures accountability and direction. The outcome also relates to the availability and functionality of technical and organisational infrastructure, including digital and management systems that support quality assurance and institutional learning. Furthermore, it reflects the institution's capacity to learn and adapt, using feedback and reflection to continuously improve processes and respond to changing contexts. Ultimately, this capability is demonstrated by coherent and adaptive institutional systems that enable sustainable performance and strategic alignment across all levels of the organisation.

Hypothesis OP5-OC4: If infrastructure like diagnostics and surveillance tools are introduced and improved, then partner institutions are able to institutionalise and apply effective processes in governance, planning, quality assurance and coordination.

Hypothesis OP6-OC4: If systems for continuous improvement and learning are developed and implemented, then partner institutions are able to institutionalise and apply effective processes in governance, planning, quality assurance and coordination.

Outcome 5 – Science-society interface capacity: Mechanisms to translate research into policy and practice (e.g. GRIPP, policy briefs, dialogues) are strengthened and used by partner. This outcome refers to the **Capabilities to Relate and Attract as well as Deliver Results**, as it reflects an institution's ability to engage with stakeholders, communicate research effectively, and translate evidence into action. It encompasses stakeholder engagement and relationship building, fostering trust and collaboration with policymakers, practitioners, and communities. The outcome also draws on research capacities, particularly through GRIPP activities that link scientific knowledge to societal needs and policy priorities. Finally, it is demonstrated by the institution's ability to deliver concrete interventions

or policy contributions, showing that research results are not only produced but actively applied to improve health systems and outcomes.

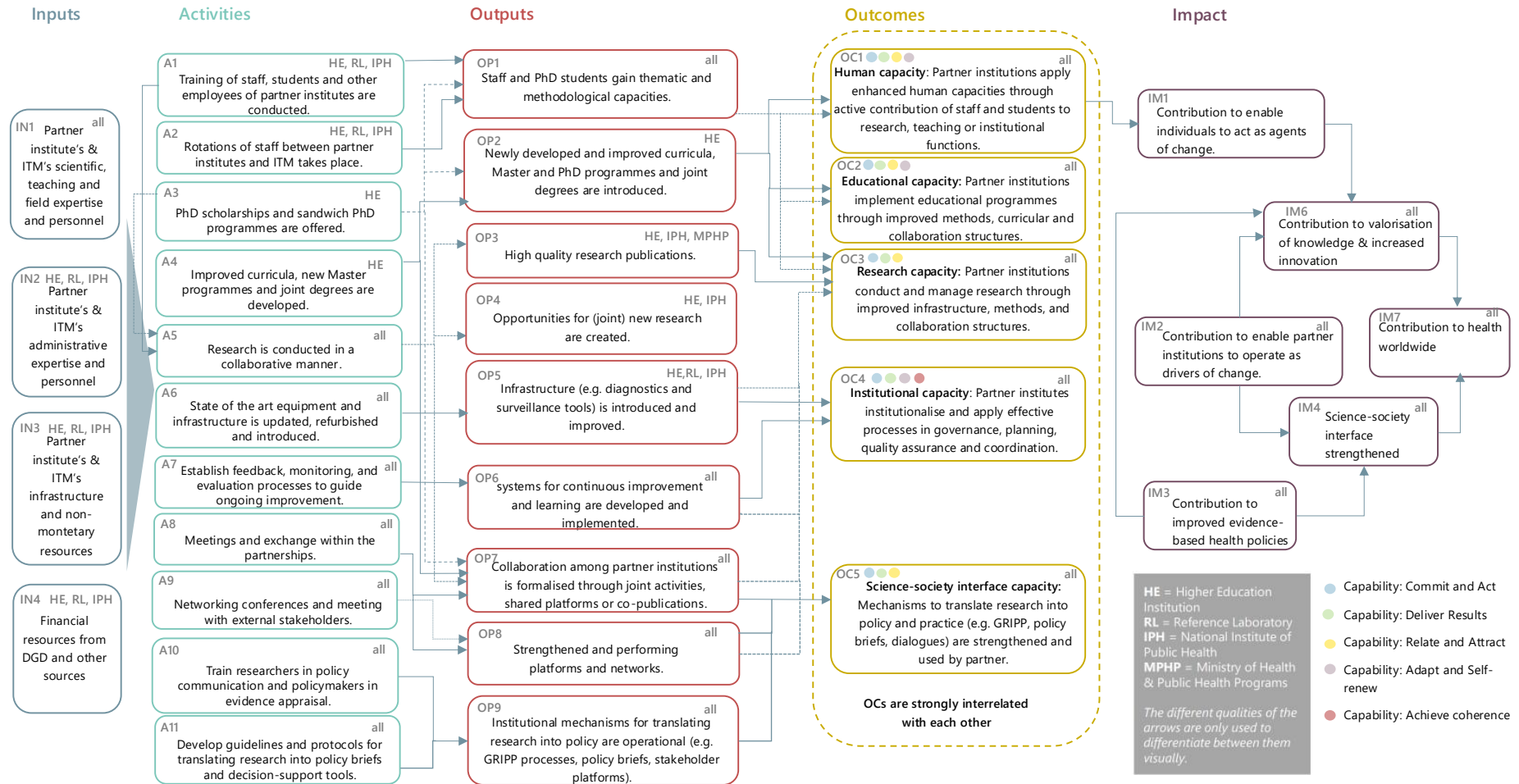
Hypothesis OP7-OC5: If collaboration among partner institutions is formalised through joint activities, shared platforms or co-publications, then mechanisms to translate research into policy and practice (e.g. GRIPP, policy briefs, dialogues) are strengthened and used by partners.

Hypothesis OP8-OC5: If platforms and networks are strengthened and performing effectively, then mechanisms to translate research into policy and practice (e.g. GRIPP, policy briefs, dialogues) are strengthened and used by partners.

Hypothesis OP9-OC5: If institutional mechanisms for translating research into policy are operational, then mechanisms to translate research into policy and practice (e.g. GRIPP, policy briefs, dialogues) are strengthened and used by partners

Figure 1: ITM FA5 - Theory of Change

ITM FA5 – Theory of Change



3 Project Design

The objective of this chapter is to outline the rationale, architecture, and operationalisation of the iterative design process of the evaluation of FA5 and the development of the 5C Self-Assessment Tool for ITM and its partners.

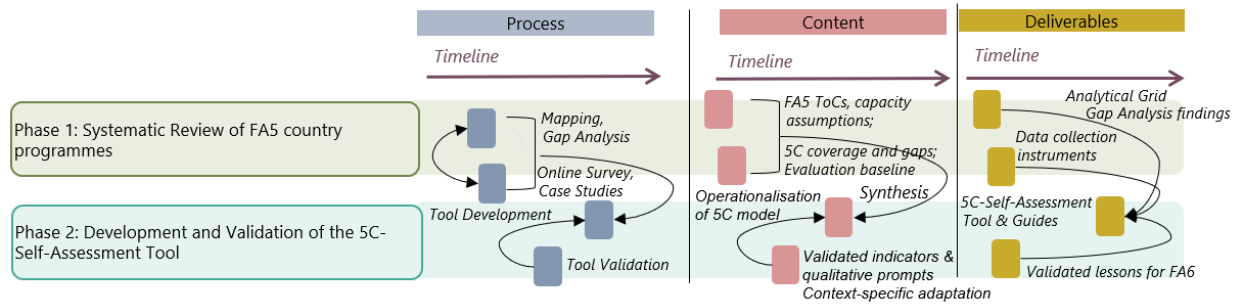
The design of this project is grounded in the understanding that institutional capacity development cannot be adequately assessed or strengthened through one-off, isolated exercises. Instead, it requires a systematic, participatory process that combines conceptual clarity, empirical grounding, and institutional ownership. Importantly, FA5 was not originally designed on the basis of the 5C model, nor were its capacity-strengthening activities explicitly structured or monitored using this framework. The evaluation of FA5's capacity-strengthening activities therefore did not assess the programme against an ex-ante 5C-based design, but rather used the 5C model as an analytical lens to retrospectively interpret and systematise observed patterns of institutional change. The evaluation of FA5's capacity-strengthening activities therefore provided the empirical and conceptual foundation for the 5C- Self-Assessment Tool, while the structure and logic of the tool informed how the evaluation was conducted, analysed, and interpreted. This **interconnection** ensured that findings were not only reflective of past performance but also directly translatable into a practical instrument for future capacity development under FA6 (see figure 2).

From the outset, the design incorporated **continuous feedback loops**. Initial mapping and gap analysis of programme documentation, informed by explorative interviews, served to refine the evaluation framework and to draft the first outline of the 5C-Self-Assessment Tool (see chapter 4.1 and 5.1). This process systematically mapped available data against the 5C capability framework and identified three types of gaps: (1) coverage gaps, where capabilities or subdomains were not addressed in reporting; (2) evidence gaps, where activities or outcomes were insufficiently documented; and (3) interpretive gaps, where activities were described but their relevance to capacity development was unclear or under-theorised. This structured analysis established a theory-driven baseline for the survey and case studies, targeting areas where evidence was incomplete or assumptions about capacity outcomes required validation.

Subsequent **data collection** through surveys and in-depth case studies served to both validate and deepen these findings. The online survey, designed around the analytical grid and the 5C framework, validated results from the gap analysis and generated quantitative items that could be directly incorporated into the 5C-Self-Assessment Tool. The case studies provided qualitative depth, exploring how and why capacity development unfolded in practice and enabling a contextualised interpretation of survey findings (see Chapters 4.1).

The **tool development** proceeded in parallel by integrating validated survey items, qualitative prompts, and context-specific adaptations. The piloting phase functioned both as a validation of the tool's usability and as a final evaluative check on the comprehensiveness and applicability of the defined capacity domains (see Chapter 5.1).

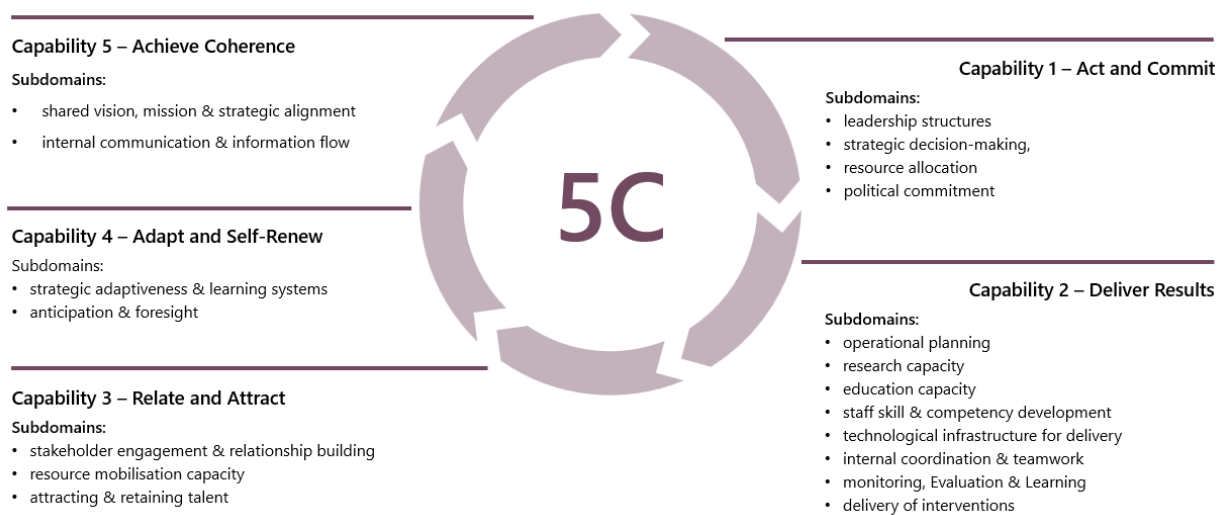
Figure 2: Project Design



Syspons, 2025

At the conceptual core of this approach lied the **5C model** of organisational capacity development, originally developed by Peter Morgan and widely applied in development cooperation. The model identifies five interdependent capabilities that enable organisations to perform, adapt, and evolve over time. In the context of the FA5 programme, the following capabilities and subdomains were particularly relevant (see figure 3 and analytical grid in the annex):

Figure 3: Operationalised 5C Model with Subdomains



Syspons, 2025

1. Capability to Act and Commit

This capability assesses whether institutions can set strategic direction, make timely decisions, allocate resources, and assert public commitment. Subdomains such as leadership structures, strategic decision-making, and public commitment are examined through institutional governance documents, evidence of leadership bodies, and alignment between decisions and strategic plans. These elements are central to understanding how institutional visions are translated into actionable mandates.

2. Capability to Deliver Results

This capability captures an institution’s ability to produce and sustain development results. It includes research and education capacity, staff development systems, technological infrastructure, and monitoring and evaluation arrangements. Indicators such as staff competencies, training mechanisms, laboratory capacity, and M&E frameworks provide a multidimensional view of operational performance. Outputs like publication records or the number of transdisciplinary partnerships serve as proxies for research capability.

3. Capability to Adapt and Self-Renew

This capability refers to an institution's ability to reflect, learn, and innovate over time. Relevant subdomains include strategic learning, anticipation and foresight, change agency, and internal communication. The analytical grid highlights mechanisms such as scenario planning, internal knowledge-sharing processes, and flexible decision-making structures. These dimensions are often underreported but are particularly critical in dynamic contexts such as public health and higher education.

4. Capability to Relate to External Stakeholders

This capability assesses how institutions engage with external actors, manage partnerships, and mobilise resources. Subdomains include stakeholder engagement, resource mobilisation, and external communication strategies. Indicators range from the diversity of funding sources and partnerships to the quality of stakeholder dialogue and external visibility.

5. Capability to Achieve Coherence

This capability reflects the degree of internal alignment between strategies, values, and operational practices. Subdomains such as shared vision, internal coordination, and consistency in implementation are examined to assess how effectively institutions harmonise actions across departments and organisational levels. Strategy documents, internal policy alignment, and coherence across theories of change are used as key sources of evidence.

Within this project, the 5C model serves as the conceptual backbone for a 5C-Self-Assessment Tool developed in close dialogue with ITM and its partners.

Insights from desk reviews, stakeholder consultations, and empirical testing were continuously integrated into the tool's design, ensuring that it is both theoretically grounded and practically usable. This design process supports institutional learning by linking reflective assessment of past experience with forward-looking capacity development under FA6.

4 Fit-for-Purpose Evaluation

This chapter presents the Fit-for-Purpose evaluation of the FA5 programme. It is divided into two subchapters. The first outlines the methodological approach applied to assess capacity-strengthening efforts across partner institutions. The second summarises the key findings of the evaluation, highlighting cross-cutting patterns as well as context-specific results across the five capabilities of the 5C model.

4.1 Methodological Approach

The inception and gap analysis phase established the analytical foundation for the Fit-for-Purpose Evaluation of the FA5 programme. Its purpose was to develop a shared understanding of programme objectives and implementation, define the evaluation framework, and identify evidence gaps relevant to assessing capacity-strengthening outcomes.

The phase began with a kick-off meeting with ITM to clarify expectations, objectives, and the evaluation approach. This was followed by exploratory interviews with selected stakeholders from ITM and partner institutions to deepen understanding of the programme logic, country-level theories of change, and underlying impact assumptions.

In parallel, Syspons conducted a desk review of programme documentation, including the results of the 5C mapping exercise, country-level theories of change, monitoring frameworks, performance data, and lessons learned. Based

on this review, an analytical grid aligned with the five capabilities of the 5C model was developed and applied to systematically assess the planning and implementation of capacity-strengthening activities.

Using this framework, a structured **gap analysis** was conducted to systematically assess the extent to which capacity-strengthening activities and outcomes under FA5 were captured in existing documentation. The analysis involved mapping available programme documents (including country-level ToCs, annual reports, monitoring frameworks, and lessons learnt) against the five capabilities and subdomains of the 5C model using the analytical grid. This mapping made it possible to identify three types of gaps: coverage gaps, evidence gaps and interpretive gaps (see chapter 3). The gap analysis showed that while programme documents provided strong and consistent information on planning, strategic intent, and objectives, they offered more limited insight into how activities were implemented in practice, what institutional changes they produced, and how far these changes were sustained over time. In particular, capacities related to adaptation, internal coherence, learning processes, and long-term sustainability were unevenly documented and often implicit rather than explicitly assessed. The phase concluded with the validation of the inception report in a workshop with ITM, where the findings of the gap analysis and their implications for the evaluation design were discussed and confirmed.

In the following data collection phase, an **online survey** across partner institutions in all twelve ITM country programmes was implemented. The survey aimed to validate findings from the inception-phase gap analysis, address identified evidence gaps, and test question formats for the 5C-Self-Assessment Tool. In doing so, it ensured conceptual coherence between the evaluation and the tool and enabled future tracking of organisational capacity development. The survey was structured around the 5C model and covered the five core capabilities. Each section combined quantitative Likert-scale items with qualitative open-ended questions. In addition, respondents assessed the overall maturity of their institution across selected subdomains (see Chapter 3) using a four-stage scale ranging from early-stage development to strategic integration. This design generated comparable quantitative insights while allowing respondents to contextualise their assessments and explain underlying institutional dynamics. The online survey was conducted over a three-week period following cognitive pre-testing to ensure clarity and appropriateness of the questions. Response rates were supported through coordinated communication between Syspons and ITM, including a joint advance notification to partner institutions, personalised survey invitations, and targeted follow-up reminders to non-respondents.

After completion, the quantitative data were verified and analysed. **Data analysis** proceeded in two steps. First, descriptive statistics were used to provide an overview of patterns and variations across institutions. Second, the results were aggregated using the analytical grid to inform the selection of four fit-for-purpose case studies. Selection criteria were developed in consultation with ITM and aimed to ensure diversity across institutional type, maturity level, organisational complexity, and regional context. This approach ensured that the case studies reflected a balanced range of institutional profiles and provided a robust basis for comparative analysis of capacity-strengthening approaches under FA5.

The **case studies** conducted with partner institutions in Cuba, Ethiopia, Nepal, and South Africa provided in-depth insights into the implementation and experience of capacity-strengthening activities across diverse institutional contexts. Building on the survey results as an analytical starting point, the case studies generated qualitative evidence to contextualise and deepen the interpretation of the quantitative findings. Data collection focused on semi-structured interviews and focus groups structured around the five capabilities of the 5C model and adapted to each institutional context based on document review and survey insights. This approach enabled targeted exploration of areas where survey responses revealed ambiguity, variation, or unexpected patterns, while ensuring analytical consistency across cases. Interviews were conducted with a broad range of stakeholders, including institutional leadership, programme coordinators, research and administrative staff involved in ITM collaborations, as well as external partners and beneficiaries. This diversity of perspectives supported a comprehensive understanding of how capacity-strengthening processes were organised, perceived, and sustained within each institution. The case studies examined not only what was implemented, but also how and why specific approaches contributed to capacity

development. They traced the mechanisms linking activities to observed changes and identified key contextual enablers and constraints, such as leadership commitment, coordination structures, resource availability, and external partnerships, that influenced the sustainability of capacity gains. By validating survey findings with experiential evidence, the case studies also facilitated the identification of underreported and intangible outcomes, including organisational learning, collaboration practices, and cultural change.

In addition, insights from both the survey and the case studies informed the development of the 5C Self-Assessment tool. Interview partners provided feedback on how the tool could function as a practical and meaningful instrument for partner institutions, contributing to its usability, contextual relevance, and perceived value.

Assessment of Data Quality

The overall quality of the data collected through the survey and case studies can be assessed as robust and fit for purpose, providing a reliable basis for the analysis presented in this report.

The online survey achieved a satisfactory response rate of 87 % (20 institutions) across the FA5 partner institutions, ensuring representation of different institutional types and regional contexts. Responses were generally consistent and complete, allowing for meaningful quantitative analysis. Some variation was observed in the level of detail and interpretation of the four-stage rating questions, particularly where institutional structures or responsibilities differed across contexts. To address this, the survey results were interpreted in relation to the qualitative insights gathered through the case studies and document review.

The case study data were of high analytical value, offering rich qualitative insights that complemented and contextualised the survey findings. Although the small number of case studies (n=4) precludes statistical generalisation, the diversity of the institutions in terms of type, size, and regional setting ensured a broad and balanced perspective.

Both data sources were subject to systematic validation and cross-checking to ensure accuracy, completeness, and coherence. The integration of quantitative and qualitative evidence through triangulation further enhanced the credibility of the results. Overall, the data are sufficiently detailed and reliable to support the evaluation's conclusions, while acknowledging that contextual differences and biases in self-reporting may influence the level of detail and emphasis in individual responses, as is the case with any complex institutional assessment.

The findings from the desk review, gap analysis, online survey, and case studies were synthesised through a **systematic triangulation** of quantitative and qualitative evidence. This integration enabled a comprehensive assessment of institutional capacity strengthening under FA5, validated findings across data sources, and identified patterns, divergences, and contextual influences across the five capabilities of the 5C model. Based on this synthesis, the evaluation team assessed the scope and depth of FA5's capacity-strengthening efforts and identified both cross-cutting trends and context-specific differences among partner institutions.

A **second gap analysis** was conducted to verify coverage across the five capabilities. The phase concluded with an intermediate results workshop with ITM, which served to validate preliminary findings, refine interpretations, and inform the preparation of the intermediate results report.

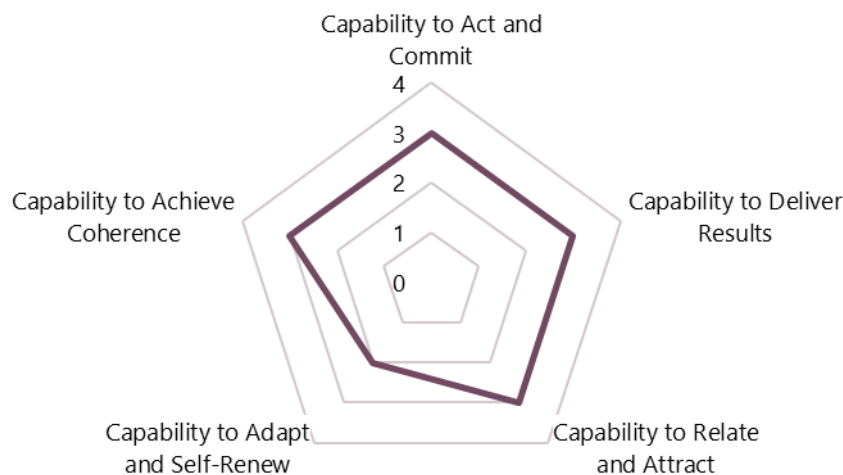
4.2 Key Findings

This chapter presents the key findings of the Fit-for-Purpose Evaluation, structured along the five core capabilities of the 5C model. While the capacity-strengthening activities under FA5 primarily focused on research, education, networking, and GRIPP (Getting Research into Policy and Practice), the 5C approach provides a broader analytical lens. It captures not only the results achieved within these specific domains but also the underlying institutional capabilities that enable sustainable performance and long-term development. The survey findings therefore provides an overview of the overall institutional capacity and performance, whereas the case studies reveal the contribution of individual and institutional capacity strengthening activities under FA5. Based on the findings, options for action were identified. Since the country programmes differ in their objectives, activities, and institutional contexts, these actions may not be applicable to every programme and are therefore formulated as options rather than uniform recommendations. The overall recommendations for the upcoming FA6 programme, derived from the evaluation findings, are presented in Chapter 6.

4.2.1 Cross-Cutting Findings on Institutional Capacities

The survey and the case studies reveal that partner institutions are generally operationally mature but not yet strategically transformative. Most institutions have reached an established level of performance (Stage 3), demonstrating solid functionality, structured processes, and a degree of institutional maturity. However, full strategic integration (Stage 4) remains the exception in most of the subdomains rather than the norm, achieved only in specific domains such as research and education, and to some extent in vision and alignment. In contrast, the Capability to Adapt and Self-Renew remains notably weaker, typically corresponding to Stage 2 (emerging). This indicates that while institutions function effectively within existing frameworks, they have yet to develop the dynamic learning and innovation mechanisms needed to sustain long-term transformation (see figure 4).

Figure 4: Overview of Maturity Levels across the Partner Institutions



Source: Syspons, 2025

Within this overall pattern, several **core strengths** stand out. Research and education capacity is a clear asset: many institutions demonstrate strong technical expertise, academic credibility, and a close alignment with national policy priorities (see Chapter 4.3 – Capability to Deliver Results). This credibility extends to their role in evidence generation and policy advice, positioning them as trusted actors within their respective systems (see Chapter 4.4 – Capability to

Relate and Attract). Political commitment is another key strength. Institutional mandates are often formally recognised and embedded in national frameworks, which provides legitimacy and continuity (see Chapter 4.2 – Capability to Act and Commit). Moreover, most institutions articulate a clear vision and strategic orientation, reflecting an awareness of their role within broader sectoral or national agendas (see Chapter 4.6 – Capability to Achieve Coherence). Together, these elements form a solid foundation for relevance, reputation, and coordinated action across the group.

However, these achievements coexist with some **common challenges** that limit their full potential. Resource mobilisation remains fragile: heavy dependence on a small number of donors, limited diversification of income, and the absence of professional fundraising systems constrain both autonomy and sustainability (see Chapter 4.3 – Capability to Deliver Results). Talent management systems are similarly underdeveloped, with few structured career pathways, limited incentives for innovation, and high turnover risks that erode institutional continuity (see Chapter 4.4 – Capability to Relate and Attract). Monitoring, evaluation, and learning (MEL) processes are often procedural, focused on compliance and accountability rather than reflection and adaptation, thereby weakening the link between evidence and decision-making (see Chapter 4.3 – Capability to Deliver Results). Foresight and innovation functions also tend to be reactive, responding to external pressures rather than proactively shaping emerging agendas or piloting new approaches (see Chapter 4.5 – Capability to Adapt and Self-Renew).

Taken together, these dynamics create a series of **tensions at the heart of institutional development**. On one side, the group’s intellectual capital, policy legitimacy, and operational maturity demonstrate significant progress and credibility (see Chapter 4.2 – Capability to Act and Commit). On the other, the weak institutionalisation of innovation, learning, and adaptive management prevents these strengths from compounding into systemic resilience (see Chapter 4.5 – Capability to Adapt and Self-Renew). The most visible expression of this tension lies in the gap between individual excellence and institutional strength. Many institutions depend on highly capable researchers and managers whose personal expertise drives outputs and external recognition. However, the organisational structures supporting these individuals, such as knowledge management systems, collaborative routines, and incentive frameworks, are not robust enough to transform personal competence into collective capacity (see Chapter 4.3 – Capability to Deliver Results). Knowledge often remains person-bound; learning processes are ad hoc rather than embedded; and strategic renewal is episodic rather than continuous. This imbalance produces a dual reality: institutions that are credible and productive in the present, yet vulnerable in sustaining and evolving that performance over time. They operate effectively within existing mandates but struggle to adapt when circumstances shift. In short, while the foundations are solid, the architecture for long-term innovation and institutional learning is still under construction (see Chapter 4.5 – Capability to Adapt and Self-Renew).

Building on the overall maturity assessment, the survey and case studies reveal distinct strengths, institutional logics, and challenges among different organisation types across the 5C dimensions. Partner **NIPHS and RIs** demonstrate strong governance and leadership, with clear mandates and close alignment to national health plans. This integration enhances policy relevance and efficient resource use, though it can also constrain strategic autonomy. Political commitment is high, and evidence produced by NIPHS frequently informs national decision-making. Additionally, core laboratories and data centres are generally functional, yet many institutions report outdated equipment and limited IT support. Stakeholder engagement is primarily functional, focused on public health mandates rather than broader research collaboration. Finally, given heavy reliance on government funding, resource mobilisation is a weaker domain and low talent retention due to remuneration and limited career progression contribute to staff turnover.

In contrast, partner **universities** operate within formalised governance and decision-making structures that ensure administrative stability but often slow strategic agility. Their funding base is broad and predictable, anchored in public financing, tuition fees, and research grants, yet budgetary rigidity reduces responsiveness to emerging needs. Their core strength lies in knowledge production and education rather than direct service delivery; they contribute significantly to capacity development but have limited engagement in operational or policy implementation.

Succession planning and talent retention also remain weak, with few incentives for innovation. Overall, universities retain strong academic standing but face challenges in translating this strength into agile responses to emerging public health needs.

The following sections present these findings along the five capabilities, combining survey results, case study insights, and documentary evidence to illustrate both common patterns and context-specific developments across partner institutions.

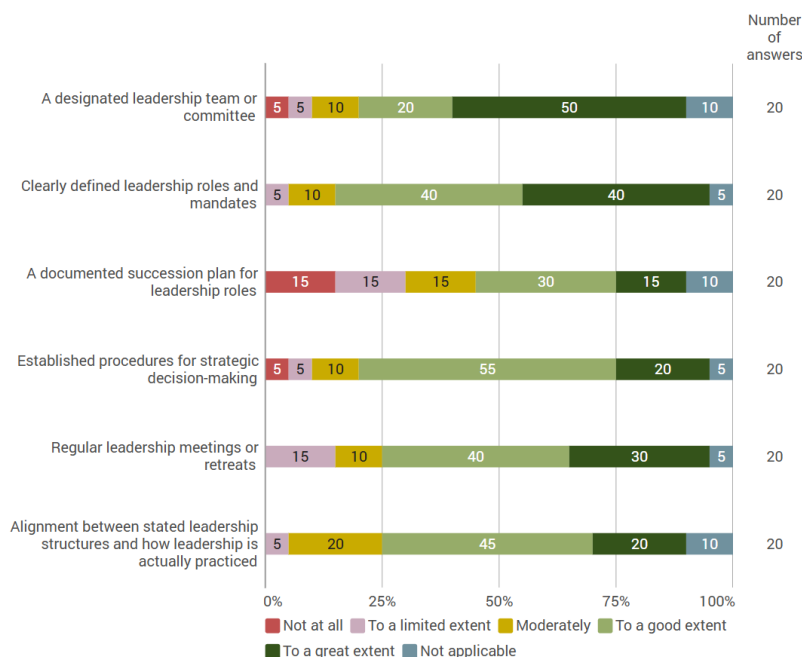
4.2.2 Capability to Act and Commit

The ability to act and commit is at the core of an institution's organisational agency. This determines whether an organisation can make decisions, allocate resources and fulfil its mission in a purposeful and resilient way. Institutions that demonstrate this capability are operationally functional and also exhibit conviction, strategic alignment and continuity, enabling them to serve as credible actors in their respective systems. Within the FA5 evaluation, this capability is closely linked to Outcome 4 – Institutional Capacity, which focuses on institutionalising and applying effective processes in governance, decision-making planning, and coordination. These processes form the structural backbone that allows institutions to act on their strategic priorities and maintain direction even in changing environments. While no specific hypotheses are attached to this outcome, it captures the institutional conditions that make commitment and decisive action possible through linking organisational will with the systems and structures that sustain it. The evaluation revealed that this capability was evident across the partner institutions, albeit with significant internal variations and ongoing structural challenges.

One of the strengths observed across the FA5 partners is the formalisation and functionality of **leadership structures**. In most institutions, leadership roles are well established and stable, particularly within FA5 programme units or coordinating departments. Survey responses confirm that leadership is not only present, but also largely functional, with clear mandates and decision-making authority (see Figure 5). This has enabled many institutions to fulfil their responsibilities under the FA5 framework efficiently and with a high degree of ownership. The case studies further support this, noting that leadership was often a driving force behind the successful implementation of programmes, and that dedicated staff played a crucial role in establishing FA5 activities within their institutions. In South Africa the FA5 programme helped partner institutions to institutionalise leadership and governance mechanisms through regular meetings, hands-on guidance, and active contributions. These efforts have provided continuity in leadership and strengthened institutional commitment. Additionally, in Cuba the programme have contributed to strengthening leadership by supporting promising researchers who have taken on leadership roles where research credibility has translated into institutional influence.

Figure 5: Leadership Structures across Partner Institutions

Q1. To what extent have the following leadership-related structures been formally implemented in your organisation as part of the capacity strengthening activities?



Source: Syspons, 2025

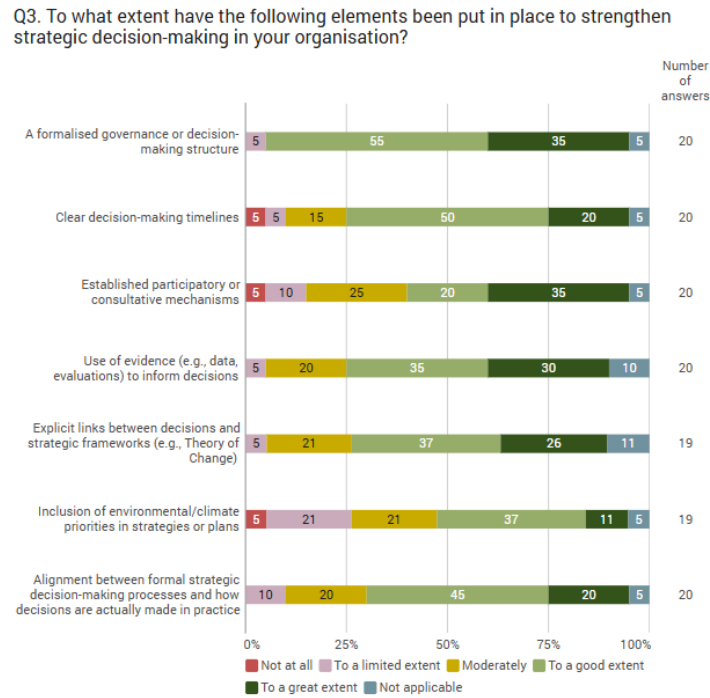
However, the evaluation also highlights vulnerabilities that offset this overall strength. While the current leadership structure is generally solid, succession planning is a widespread issue. Current leadership structures often depend heavily on a small number of individuals, many of whom have long-standing connections to FA5 or national health authorities. This can create a dependency that threatens continuity. Several institutions described the absence of formal mechanisms to prepare and mentor future leaders as a structural risk. This is particularly relevant in contexts where senior staff are approaching retirement or where institutional memory is neither systematically documented nor transferred.

Option for Action

Within the partnership programme, deliberate **support for succession planning** should be integrated into capacity-building efforts to enhance institutional resilience. This could include mentoring and training emerging professionals within partner institutions, facilitating knowledge transfer between senior and junior staff, and embedding documentation and handover practices in project management. Joint initiatives, such as cross-institutional secondments, leadership workshops, or peer-learning exchanges, can help distribute expertise more broadly and reduce reliance on a few key individuals. By building institutional rather than individual capacity, the partnership will help ensure continuity, stability, and sustained impact beyond the duration of specific projects or staff assignments.

Strategic decision-making is another aspect of this capability where strengths and challenges are evident. Most FA5 partner institutions operate within structured frameworks, such as national development plans, institutional strategies or programme-specific work plans, which provide a formal basis for decision-making. Survey data suggest that these frameworks are generally in place and offer some strategic direction (see Figure 6). However, the case studies revealed that the link between these formal strategies and actual institutional practice is not always strong. Although strategic documents exist, they are not always effectively implemented, and in some cases are disconnected from day-to-day decision-making. This discrepancy is often due to a lack of alignment between long-term institutional objectives and the short-term requirements of externally funded projects. The challenge lies not in the absence of vision, but in the difficulty of translating that vision into concrete, sustained action.

Figure 6: Strategic Decision-Making across Partner Institutions



Source: Syspons, 2025

Furthermore, the evaluation revealed a subtle yet significant distinction between formal processes and effective strategic leadership. Although planning and decision-making procedures are often in place, the extent to which they genuinely guide institutional development varies. In several cases, strategic choices remain reactive or opportunistic, particularly when resource limitations or shifting donor priorities override established plans. The case studies suggest that stronger and participatory institutional leadership engagement is essential. For instance, the findings underscored the need in some partner institutions for deeper involvement of senior leaders, including the Vice Chancellor, Director, Registrar, in capacity-building efforts. While joint partner meetings with ITM create valuable dialogue, a more integrated and continuous form of engagement is needed to ensure strategic coherence and sustainability. Closely linked to this is the issue of sustainability and ownership: partner institutions experience also highlights the importance of involving government stakeholders and institutional leaders from the very start of programme design. Such early engagement fosters genuine ownership and helps secure long-term continuity, especially as donor funding phases out. In contrast, in other partner institutions the process still relies heavily on individual initiative and informal mechanisms. There remains significant room to strengthen participatory decision-making and ensure that strategic choices are consistently aligned with institutional goals and national priorities.

Resource allocation also reflects this dual reality of structural progress and ongoing constraints. Many institutions have developed formal processes for allocating resources within the FA5 programme, for example. The survey findings suggest that, in some instances, resource allocation is structured and aligned with national health plans or institutional priorities (see Figure 7). This helps to maximise synergies and avoid duplication, particularly within national public health institutes that are closely tied to ministries of health. However, resource planning is often limited by restricted budgets, reliance on donors, and project-based funding streams. The evaluation found that these constraints frequently result in critical areas being underfunded, resources are uneven distributed across departments and forward-looking investment being restricted. While institutions may have plans for infrastructure upgrades, staff development or system improvements, they often lack the flexible resources to implement them. Therefore, the flexible budget of FA5 offers the institution to address their specific needs and allocate resources accordingly. However, the case studies showed that initially, some partner institutions perceived the flexible

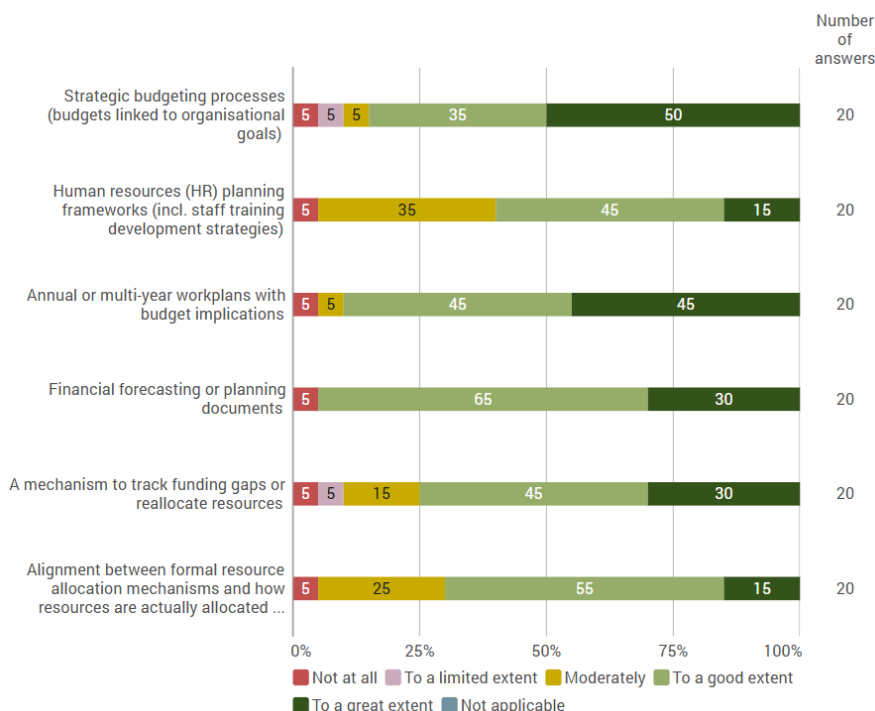
budgeting approach to be unfamiliar, as they were used to fixed project budgets, but eventually adapted by collectively identifying and voting on priority areas for investment. Moreover, dividing the budget among multiple partners and ITM units within the country programmes resulted in small, fragmented allocations, limiting the ability to fund large-scale institutional capacity strengthening and leading to a focus on individual training.

Option for Action

Provide targeted support to strengthen **project management capacities** within partner institutions. This may include offering training and coaching on planning, implementation, budgeting, and monitoring processes, as well as creating opportunities for knowledge exchange and peer learning among promoters, research and administrative staff. Sharing good practices and management tools across institutions can help improve efficiency, accountability, and coordination, while fostering a culture of continuous learning and collaboration.

Figure 7: Resource Allocation across Partner Institutions

Q5. To what extent have the following resource allocation mechanisms or tools been implemented in your organisation?



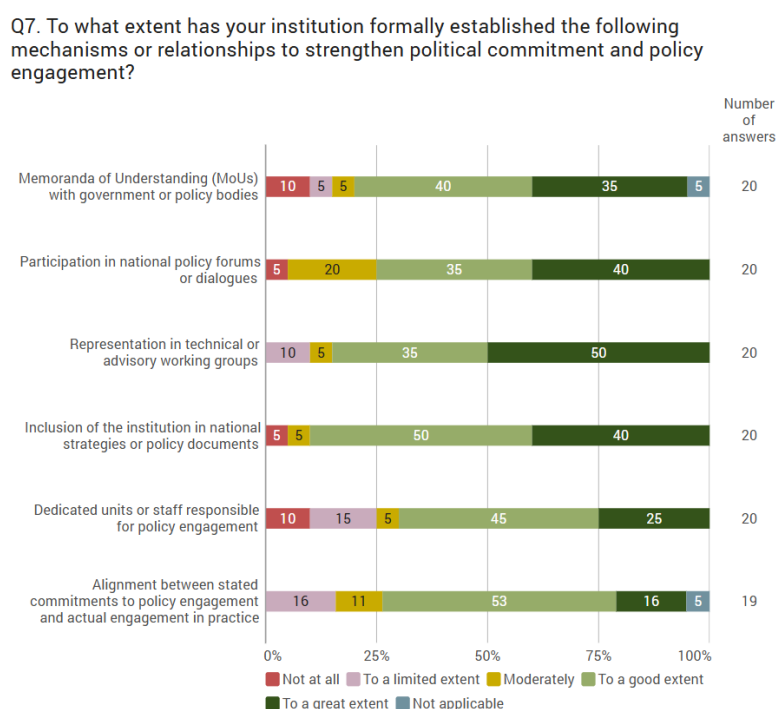
Source: Syspons, 2025

Furthermore, the fragmented nature of project-based funding can hinder integrated resource planning. Even when institutions have clear strategic goals, they are limited in their ability to allocate resources in support of those goals if funding remains tied to specific donor deliverables. This issue is particularly evident in institutions with multiple externally funded programmes operating in parallel, each with its own financial and reporting requirements. While FA5 is valued for its consistency and collaborative spirit, it is still perceived as part of this fragmented funding landscape. Nevertheless, it has made a meaningful contribution by providing relatively stable funding over multiple years, enabling some institutions to make more deliberate decisions about resources. For instance, in Cuba, the programme has had a lasting impact on national laboratory systems by strengthening quality management, operational standards, and staff capacity. These advances have enhanced the performance of national reference laboratories for tuberculosis, sexually transmitted infections, and vector diagnostics, setting quality benchmarks for others.

The establishment of advanced technology laboratories and modernisation of the insectarium further demonstrate the programme’s long-term contribution to innovation, sustainability, and institutional excellence.

One of the most encouraging findings of this capability is the widespread **political commitment** observed among FA5 partners. In particular, national institutes and government-affiliated entities are well integrated into their respective national policy ecosystems. This positioning enables them to function as credible, policy-relevant actors. Both the survey data (see Figure 8) and the case studies point to strong alignment between FA5-supported research and national health priorities. The GRIPP approach implemented in all FA5 country programmes, which seeks to link research to policy and practice played a key role, especially for universities and independent research institutes, in supporting policy uptake of research findings. In several cases, ministries of health have actively used FA5 outputs to inform policy development and implementation. This integration enhances the institutions' legitimacy and reinforces the relevance of their work. In Nepal, for example, research evidence directly informed the national visceral leishmaniasis (VL) elimination strategy. Studies addressing key knowledge gaps showed that transmission persisted after initial elimination, leading to the 2019 revision of national guidelines and the reinstatement of vector control interventions. Insecticide resistance monitoring further guided programme decisions on spray strategies, demonstrating clear uptake of research in sustaining disease control and policy adaptation.

Figure 8: Political Commitment across Partner Institutions



Source: Syspons, 2025

However, this political embeddedness is often relational rather than systemic. The evaluation found that institutional engagement with policy processes is often mediated through personal networks or reputational capital rather than formal structures or mechanisms. This reliance on individual relationships means that the ability of some institutions to influence policy is vulnerable to shifts in leadership or political context. In several cases, the absence of institutionalised channels for policy dialogue, such as advisory boards or structured stakeholder consultations, was identified as a limitation, which is particularly the case for some universities.

Option for Action

Systematically **transfer GRIPP-related knowledge**, methods, and skills developed under FA5 to other departments. This includes promoting institution-wide learning on science–policy engagement, such as how to design policy-relevant research, prepare policy briefs, and facilitate multi-stakeholder dialogues. Creating internal exchange formats, for example, learning sessions, staff shadowing, or peer mentoring can help embed GRIPP approaches beyond individual projects.

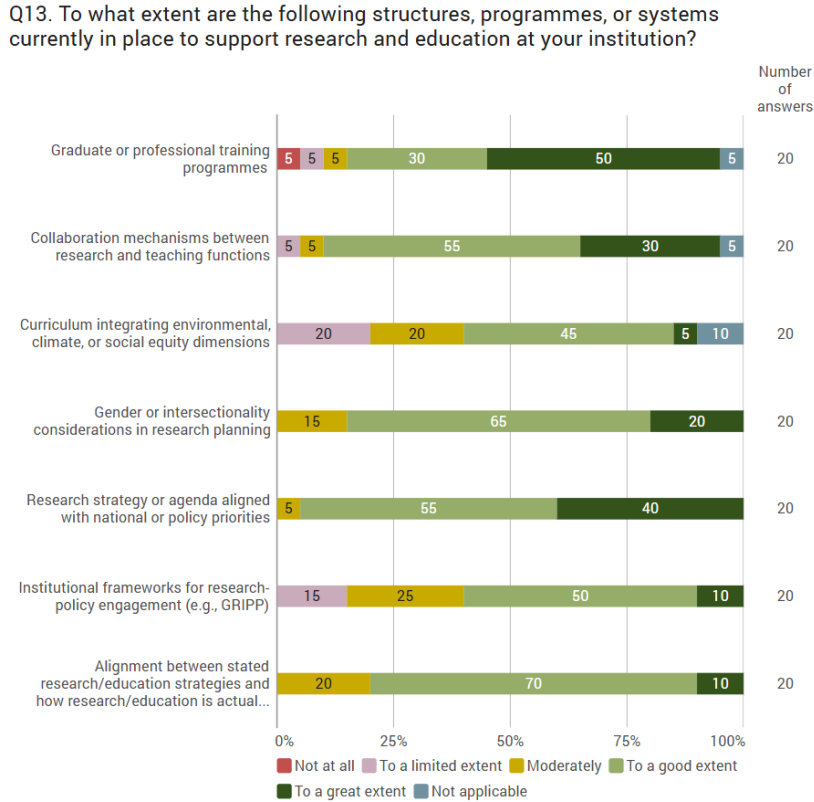
Overall, many of the FA5 partner institutions have well-developed capacities in terms of structure, mandate and operational delivery, and are hence able to act and commit. These institutions have demonstrated their ability to manage programmes, engage with national strategies and take the lead on issues of public health importance. However, the evaluation also highlights the importance of further developing this capability, not by introducing new structures, but by making more strategic use of existing ones. Leadership must be prepared for the future, not just effective in the present. Strategic frameworks must become tools for institutional direction, not just formalities. Resource allocation must also support long-term priorities rather than short-term outputs. The FA5 programme has made a significant contribution to building the foundations for this capability. Further strengthening will depend on how these foundations are utilised, expanded and made sustainable within their institutional environments.

4.2.3 Capability to Deliver Results

The ability to deliver results lies at the intersection of institutional ambition and operational reality. This encompasses an organisation's ability to plan and prioritise its work, as well as its capacity to achieve its goals through effective implementation, skilled personnel, appropriate infrastructure and internal systems that facilitate learning and adaptation. This capability is most directly reflected in several FA5 outcomes. Outcome 1 – Human Capacity highlights that when staff and PhD students strengthen their thematic and methodological expertise (OP1–OC1) and when curricula and degree programmes are improved (OP2–OC1), institutions are better able to apply these enhanced human capacities through active contributions to research, teaching, and institutional functions. Outcome 2 – Educational Capacity shows that well-designed curricula and advanced programmes enable institutions to deliver high-quality education through improved methods and collaboration structures (OP1–OC2, OP2–OC2). Outcome 3 – Research Capacity demonstrates that research excellence relies on skilled people, appropriate infrastructure, and systems for continuous improvement and collaboration. When research capacities, infrastructure, and partnerships are strengthened, institutions are better positioned to conduct and manage research effectively (OP1–OC3, OP2–OC3, OP3–OC3, OP5–OC3, OP6–OC3, OP7–OC3, OP8–OC3). Finally, Outcome 5 – Science–Society Interface Capacity highlights that strong networks and platforms enhance mechanisms for translating research into policy and practice (OP8–OC5). Within the FA5 programme, this capability was evident as a well-developed area across many partner institutions, particularly with regard to research and education. However, the evaluation also revealed significant limitations, some structural and some systemic, that hinder the realisation of this potential. The overall impression is of institutions that are committed and active, but often overburdened.

A consistent strength across the FA5 partner landscape is the alignment of institutional outputs with national or policy-relevant priorities, particularly in **research and education**. FA5 institutions are widely regarded as credible knowledge actors within their respective systems, with multiple partners reporting successful collaborations with policymakers, academic networks and international research consortia. Survey data confirm that the majority of institutions consider their work to be highly relevant to national health goals, and case studies reinforce the idea that FA5-supported research has frequently addressed critical evidence gaps (see Figure 9).

Figure 9: Research and Education Capacity across Partner Institutions



Source: Syspons, 2025

Partnerships – both national and international – have further strengthened this relevance by enhancing the quality and visibility of research efforts. In Cuba, for example, collaboration with universities, and national biotechnology institutions, enabled the development and evaluation of COVID-19 vaccines using robust, internationally recognised methodologies. These partnerships also strengthened data analysis capacity and fostered innovation across institutions. Externally, cooperation with Belgian partners through joint proposal development and co-funded projects expanded research opportunities and resources, while connections established through postdoctoral collaborations sustained long-term international engagement. Together, these networks have elevated the scientific credibility, capacity, and global presence of Cuban research institutions.

However, despite this strength, the sustainability of research and educational outputs is not always guaranteed. Financial instability, particularly that linked to short-term donor funding, remains a persistent challenge. Several institutions reported that, while they are able to deliver high-quality work under FA5, they are uncertain about maintaining these activities once external support decreases. This uncertainty is exacerbated by high staff turnover, particularly among young researchers and technical staff who are often recruited into better-paid positions in international organisations or the private sector. This dynamic creates tension between developing skills and retaining talent, undermining institutional continuity. Additionally, in the case studies it became clear that the exposure of students to research practice could be further strengthened, since research tends to be taught more as a conceptual topic than as a practical experience. While students learn about methods and design, they are not always engaged in actual research processes such as data collection, analysis, or dissemination.

Option for Action

Support systematic approaches that strengthen the **connection between research and education**. Such approaches aim to actively engage students in ongoing research activities, enabling them to apply theoretical knowledge to practical challenges and contribute to institutional research outputs. Embedding small, practice-oriented research projects within courses, for example, field studies, data analysis exercises, or mini research collaborations with local partners, helps students experience the full research cycle from question to conclusion. Integrating research into teaching not only enhances student learning and motivation but also creates synergies between academic programmes and research agendas, fostering a culture of inquiry, innovation, and continuous improvement within partner institutions.

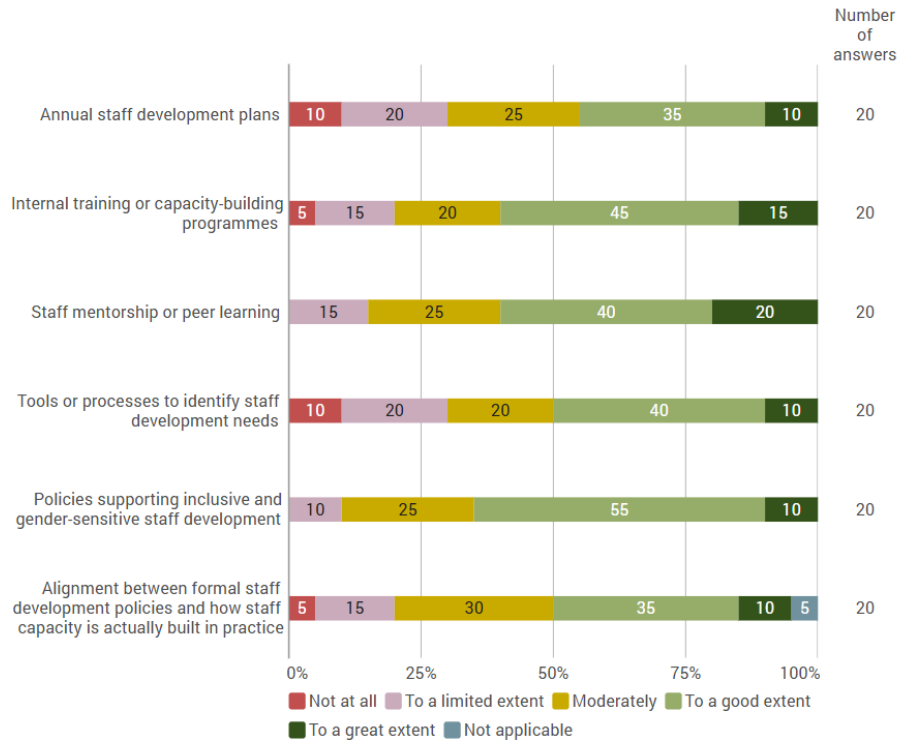
Skill development is an area where good practice and limitations coexist. The survey showed that many institutions have highly capable staff and, in some cases, youthful workforces with strong technical skills and motivation (see figure 10). The case studies showed, that under FA5 in partner institutions individual capacity strengthening through training and mentorships has demonstrated tangible effects. In the case studies two good practices for skill development were identified. Firstly, the 'train the trainers' approach aiming to create a multiplier effect where trained individuals can further disseminate knowledge within their institutions as well as, secondly, research retreats, providing dedicated time to conduct research, training workshops on cross-cutting topics and networking, especially for young researchers. In Ethiopia the FA5 programme supports capacity building through training and mentorship, particularly for early and mid-career researchers. These activities include mentor-supervised research, which aims to generate credible and reliable research outputs. In Cuba language courses for scientific English led to language capability improvements that enable global engagement of researchers. Additionally, researchers were trained in grant application activities and project budget planning. In Nepal faculty members have attended short courses and PhD programmes at ITM, enhancing their research skills and knowledge, which they then apply in teaching and research in their home country. However, structured systems for staff development remain underdeveloped. Staff learning is often reactive, driven by project needs rather than proactive institutional planning. Where training does take place, it is often ad hoc or dependent on donors, lacking continuity or strategic alignment. Institutions struggle to develop systematic approaches that integrate training, mentoring and career progression. This is particularly evident in the absence of formal handover processes or mentoring schemes, both of which are crucial for knowledge transfer and leadership development. While project members receive valuable training and in some cases training (e.g. in grant writing) was also offered to members of other departments, the FA5 programme does not address the broader institutional needs, leaving a gap in capacity building for staff not directly involved in FA5-supported projects. This limitation is particularly due to the FA5 programme's relatively modest scope, but future upscaling should prioritise expanding training opportunities and promoting joint capacity-building initiatives across departments and units to ensure more comprehensive institutional strengthening.

Option for Action

Promote good practices such as research retreats as opportunities for staff and students to strengthen research skills, receive mentoring, and engage in collaborative learning across departments. By creating dedicated and low-threshold spaces for hands-on training and peer exchange, such initiatives foster both individual competence and a supportive institutional research culture.

Figure 10: Staff Skill & Competency Development across Partner Institutions

Q15. To what extent are the following systems or initiatives for staff capacity development currently in place and are being used in your institution?

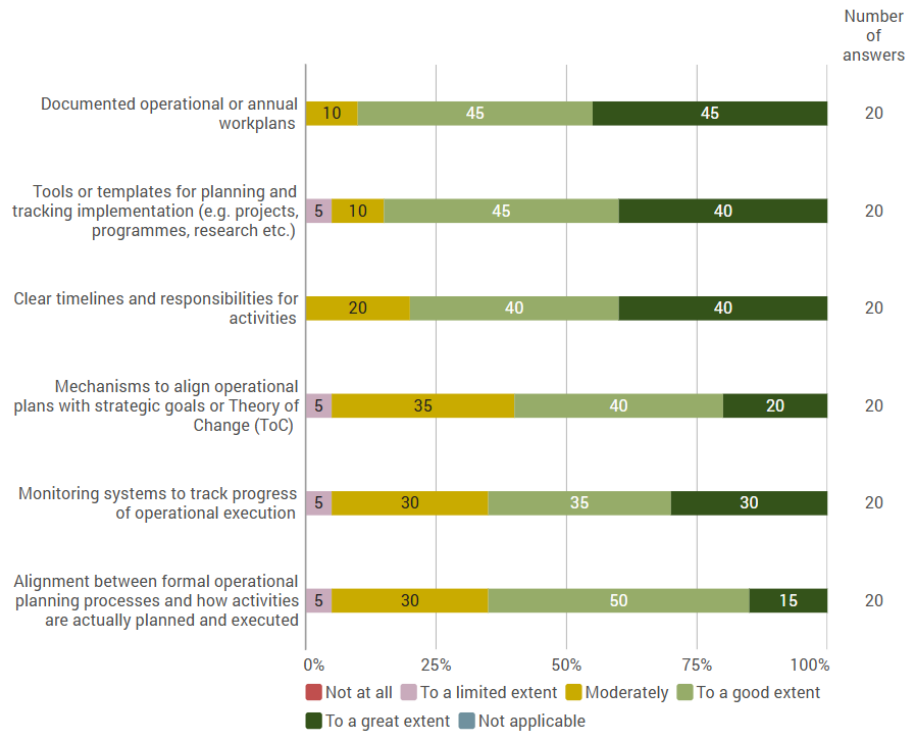


Source: Syspons, 2025

In terms of **operational planning and execution**, institutions have made significant progress. Most FA5 partners operate within defined planning frameworks that guide the implementation of research, education and service delivery activities. The survey suggests that these frameworks are generally effective, and the case studies demonstrate that coordination and planning within the FA5 programme are frequently well executed. Regular meetings, shared calendars and a collaborative working culture have enabled teams to meet their targets (see figure 11). This operational cohesion creates a sense of institutional reliability, which is an important achievement in complex and often resource-constrained environments.

Figure 11: Operational Planning & Execution across Partner Institutions

Q11. To what extent are following planning and implementation tools or processes are in place in your organisation?



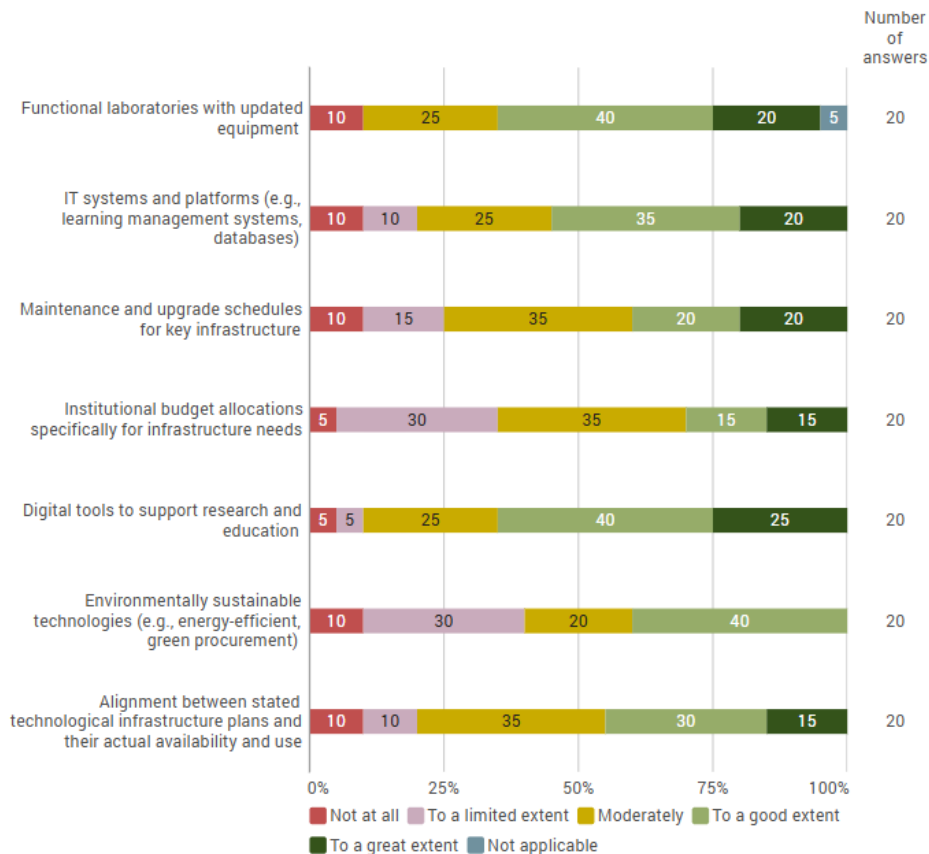
Source: Syspons, 2025

However, the effectiveness of operational planning is limited by a number of factors. One recurring issue is the heavy workload of key staff, particularly those involved in both research and programme administration. These individuals are often responsible for writing grants, implementing activities, mentoring junior colleagues and reporting to donors. This multitasking limits the time available for reflection, innovation and strategic planning (see also chapter 2.5). Furthermore, although planning mechanisms are in place, they are not always aligned across departments or units. Cross-departmental coordination is somewhat inconsistent: some institutions report strong collaboration between research, education, and service delivery units, while others describe siloed practices that limit shared learning and institutional synergy. External factors have also affected planning effectiveness, notably delays caused by the internal crisis in Cuba and the currency devaluation in Ethiopia, which have complicated local spending, staff remuneration, and procurement processes, often requiring partner intervention to maintain operations.

Technological infrastructure is another area of mixed performance. While many institutions report having functional laboratories, teaching hospitals and IT systems that support high-quality research and teaching, others do not (see Figure 12). National public health institutes, in particular, often have robust reference laboratories and data centres. However, the situation is inconsistent. Several institutions face significant infrastructure maintenance issues, have outdated equipment or limited IT support. In Cuba essential equipment, consumables and transport are severely limited, therefore under the FA5 programme access to otherwise inaccessible equipment and resources, such as laboratory equipment and power bank as local shortages threaten the continuity of research and disease surveillance systems, was secured and making even small contributions from the programme highly impactful. Nevertheless, sustainability gaps persist and while key equipment is now available, financing for reagents, maintenance, and replacement remains fragile, posing risks to the long-term functionality of these investments.

Figure 12: Technological Infrastructure for Delivery across Partner Institutions

Q17. To what extent do the following infrastructure systems or assets currently exist in your institution to support research, education, or service delivery?

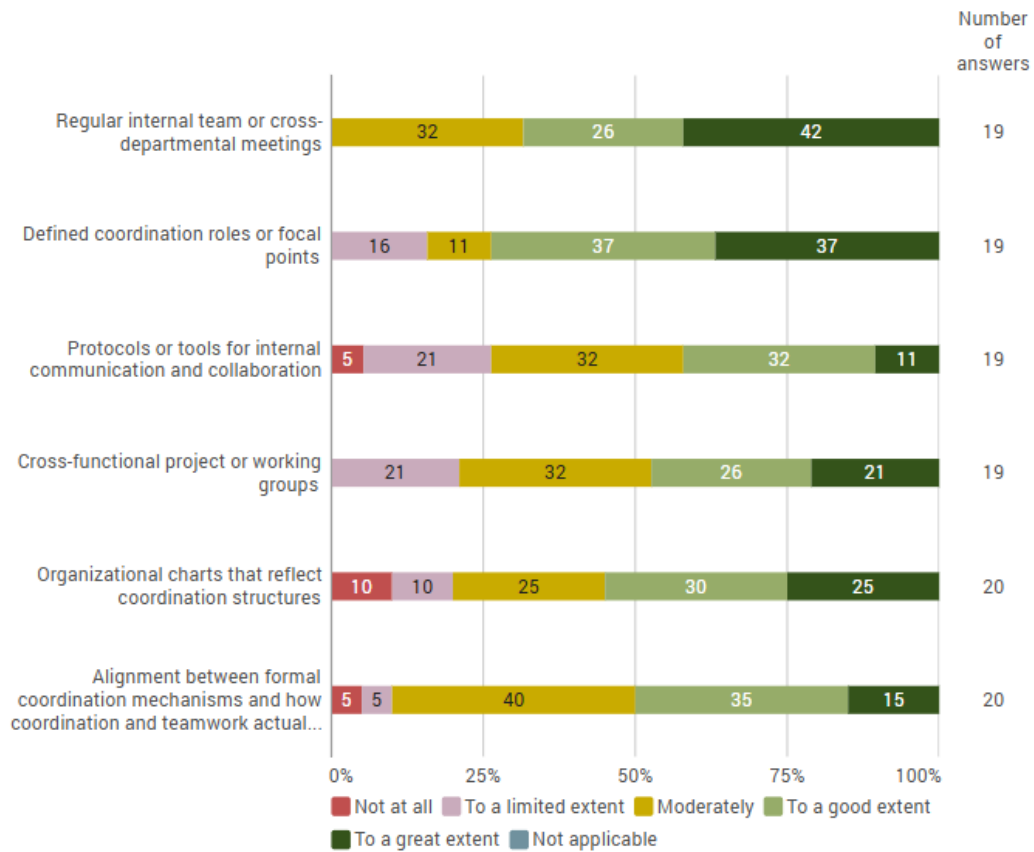


Source: Syspons, 2025

Moreover, both the survey and the case studies identified **internal coordination and teamwork** as areas that are functional, but could be improved (see figure 13). Within the FA5 programme, teams generally work well together, supported by regular coordination meetings and a shared sense of purpose. This has fostered a collaborative spirit, which is often cited as one of the programme's more positive aspects. In Ethiopia, collaboration extended across various departments, integrating both basic and implementation research and requiring engagement from multiple disciplines. Also in Nepal, the FA5 programme enabled horizontal collaboration between departments and divisions, particularly in interdisciplinary areas such as One Health, where cooperation between different scientific domains is essential. However, such collaboration often depended on the initiative and reputation of individual researchers rather than on formal institutional mechanisms and confined to the FA5 team itself. The broader institution may remain fragmented, with limited communication across departments or between staff levels. In many partner institutions, cross-departmental teamwork is not embedded in the culture or systems, so coordination beyond project silos remains aspirational rather than routine. The case studies also revealed that there is room for improvement regarding internal coordination between the ITM departments. Sharing good practices for programme activity implementation and support, especially when it comes to topic that are not directly linked to research expertise, could improve institutional learning as well as effectiveness and efficiency of country programmes.

Figure 13: Internal Coordination across Partner Institutions

Q19. To what extent do the following formal mechanisms or structures exist in your institution to support internal coordination and teamwork?

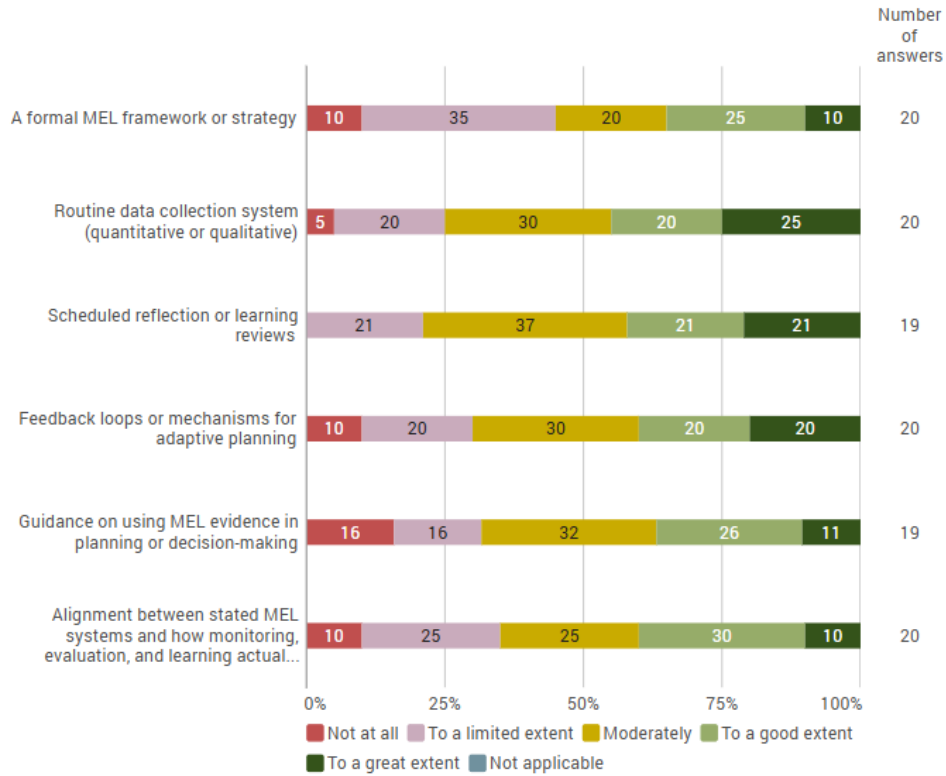


Source: Syspons, 2025

Monitoring, evaluation and learning (MEL) is another area in which the ability to deliver results is evident but inconsistent. Many institutions have established MEL frameworks, particularly at project level, and several report having quality indicators and reporting routines in place (see Figure 12). National institutes often share MEL data with ministries and other stakeholders to support evidence-based planning. However, the case studies made clear, that integration of MEL across departments and the application of feedback for institutional learning remain limited. Feedback loops are applied inconsistently, and MEL systems are rarely institutionalised beyond specific donor projects. Even when data is collected, it is not always used to adjust strategies or inform decision-making.

Figure 14: Monitoring, Evaluation and Learning (MEL) across Partner Institutions

Q21. To what extent are the following monitoring, evaluation, and learning (MEL) systems or tools currently in place in your institution?

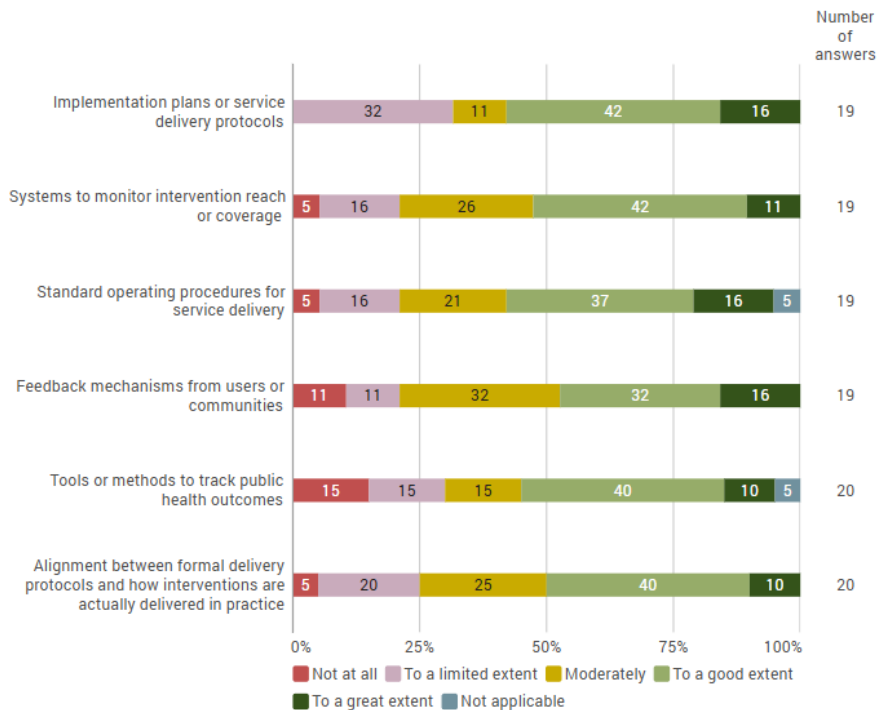


Source: Syspons, 2025

One of the more complex aspects of this capability is the **delivery of interventions**, particularly in contexts where institutions are expected to transition from knowledge production to implementation. The evaluation shows a functional distinction between NIPHS and universities in this regard. NIPHS typically occupy a system-facing role: they are formally embedded in or closely linked to ministries of health, mandated to provide policy advice, surveillance, and technical support, and often directly involved in programme design, rollout, or monitoring. These institutional characteristics place NIPHS in a comparatively strong position to translate evidence into large-scale public health action. Universities, by contrast, primarily fulfil an academic role, centred on research, education, and capacity building of the health workforce. Their contributions to public health impact are usually indirect, mediated through publications, training, and long-term knowledge generation rather than through direct service delivery or programme implementation. As a result, universities often have fewer direct beneficiaries and weaker institutionalised channels for feeding research outputs into operational or policy processes. Nevertheless, both types of institution make a meaningful contribution to capacity strengthening and knowledge transfer. However, the survey shows, that there is room for improvement especially regarding the implementation of feedback mechanisms from users and communities as well as tools and methods to track public health outcomes to ensure that research activities are aligned to national public health needs (see Figure 15). This is particularly important when it comes to translating research into health system impact, as institutions must then navigate limited resources, competing priorities and policy environments that are not always receptive.

Figure 15: Delivery on Interventions across Partner Institutions

Q23. To what extent are the following systems or resources to support the delivery of interventions currently in place at your institution?



Source: Syspons, 2025

The case studies unveiled that in Nepal, for example, evidence generated by partner researchers filled critical knowledge gaps for the national leishmaniasis elimination programme. The evidence base produced under the programme directly influenced government resource allocation, enabling the expansion of targeted interventions from 12 to 47 districts, with the majority of evidence provided by the FA5-supported research team. Also in Cuba, the FA5 programme has directly strengthened national public health systems by linking research with decision-making and translating scientific findings into policy and practice. For the first time, it enabled a nationwide genetic study covering all provinces, examining pesticide resistance and exploring new vector control techniques. These studies not only advanced scientific understanding but also generated evidence that now informs the National Directorate of Surveillance and Vector Control within the Ministry of Public Health. The integration between research and policymaking was particularly evident in how senior public health officials used programme data to inform national strategies. Another major contribution was the development of an early warning system for dengue epidemics, which emerged from programme-supported research. This system has become a model for designing broader surveillance mechanisms and now underpins national and even international preparedness strategies for future pandemics.

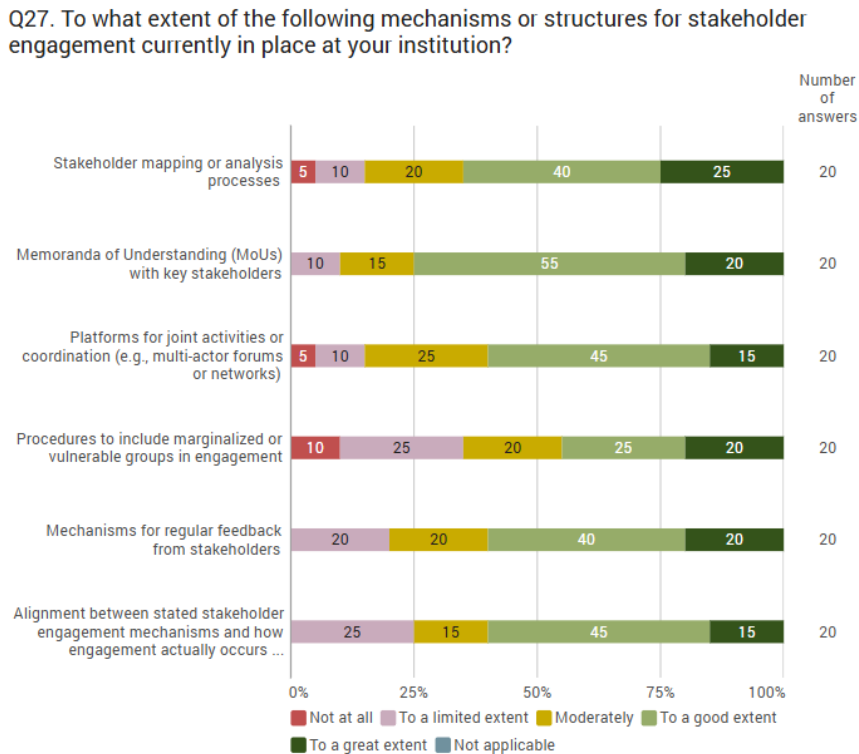
In summary, the capability to deliver results across FA5 partner institutions is characterised by commitment, competence and hard-earned credibility. These institutions are producing and shaping knowledge in ways that respond to national needs and global standards. They are training professionals, conducting research and engaging with policy, all while managing complex operational demands. However, this capability is constrained by structural factors, such as unstable funding, stretched staff resources, infrastructure gaps and limited systems for institutional learning. These challenges do not negate the achievements. Rather, they highlight the importance of investing in systems, people and processes to transform output into sustained, high-quality outcomes. FA5 has played a significant role in facilitating delivery, particularly through its support for research and education. Going forward, the challenge lies not in creating this capability, but in deepening and stabilising it so that institutions become even more effective architects of their own future performance, as well as producers of results.

4.2.4 Capability to Relate and Attract

The ability of institutions to build and maintain meaningful relationships with communities, policymakers, donors and talent is a key aspect of their overall capacity. The ability to build relationships and attract reflects how institutions are perceived externally and how they engage strategically with their environment to secure resources, legitimacy and people. In this context, Outcome 5 – Science-society interface capacity is particularly relevant. The underlying hypotheses (OP7–OC5 and OP8–OC5) posit that when collaboration among partner institutions is formalised through joint activities, shared platforms, or co-publications, and when networks and platforms are strengthened and function effectively, mechanisms for translating research into policy and practice, such as GRIPP initiatives, policy briefs, and policy dialogues, are reinforced and increasingly used. Within the FA5 programme, however, this ability is mixed: while many institutions have strong reputations and active networks, they struggle to institutionalise engagement, diversify funding and retain talent. The evaluation confirms that this capability is both essential and unevenly developed: it is widespread in terms of intention and established in some practices, but underleveraged structurally in key areas.

Stakeholder engagement is one of the more positively assessed dimensions of this capability. The majority of FA5 partner institutions, especially national public health institutes and academic centres with a long-standing local presence, demonstrate a high level of embeddedness in their policy and community ecosystems (see Figure 16). In Ethiopia, for example, stakeholders such as the Ministry of Health, hospitals, treating physicians, and host communities are engaged in feasibility studies and clinical trials, combining established and new collaborations to ensure research relevance and acceptance. The stakeholder engagement strategy involves community members, key institutions, and higher-level stakeholders throughout the research process, thereby promoting both scientific quality and policy uptake. Managing diverse perspectives is achieved through a clear, objective-driven approach, that communicates research goals transparently, aligning expectations, and involving stakeholders early in project design to minimise challenges and enhance legitimacy.

Figure 16: Stakeholder Engagement across Partner Institutions

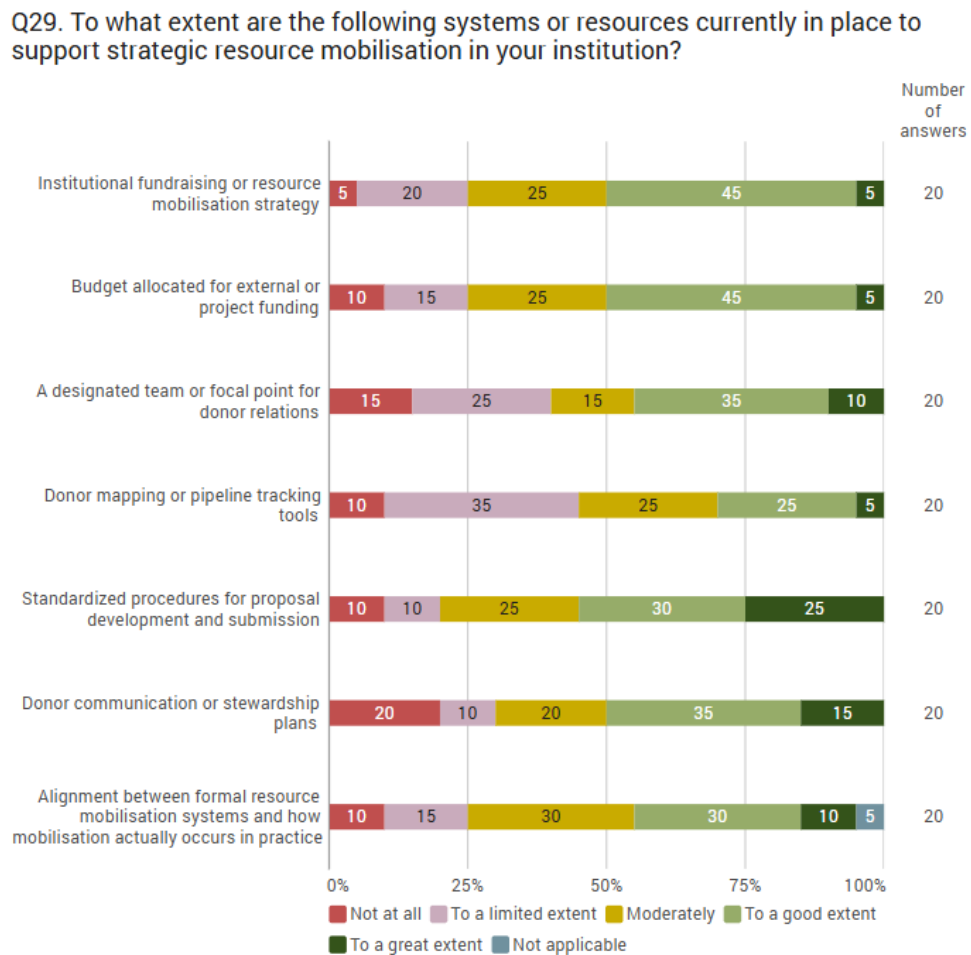


Source: Syspons, 2025

Yet the evaluation also highlights that such engagement is still inconsistently institutionalised. In many cases, collaboration with external partners relies heavily on individual initiative or informal networks. While this has allowed institutions to remain agile and responsive, it also creates a degree of vulnerability. When stakeholder relationships are not embedded in formal mechanisms, such as regular joint planning processes, feedback loops, or memoranda of understanding, continuity can be affected by staff turnover or shifting political contexts.

The ability to build relationships is also closely tied to an institution’s **capacity to mobilise financial, human and reputational resources**. Of all the subdomains assessed across the 5C framework, resource mobilisation was found to be one of the weakest. Both the survey (see Figure 17) and the case studies point to a clear pattern: most institutions rely on ad hoc, opportunity-driven fundraising efforts, which are often led by individual researchers or administrators. Strategic approaches to fundraising, such as dedicated units, formal donor engagement plans or diversified income strategies, are rare. The majority of institutions remain heavily dependent on external donor funding and lack the internal systems or staffing to proactively pursue alternative sources.

Figure 17: Resource Mobilisation Capacity across Partner Institutions



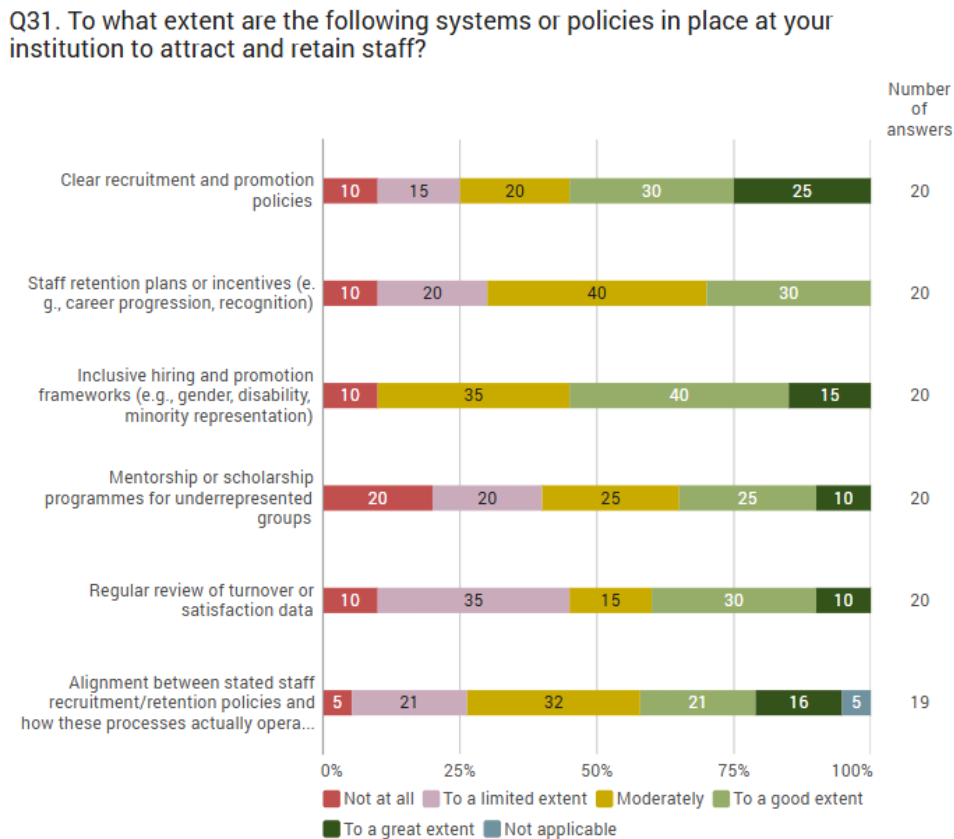
Source: Syspons, 2025

This dependence has significant implications. It restricts the institution’s ability to set its own agenda, increases its vulnerability to funding fluctuations and limits its capacity for long-term planning. Although FA5 provides a more stable source of funding than many other donor programmes, it does not seem to have prompted structural improvements in fundraising systems. The evaluation notes that successful fundraising efforts under FA5 were often the result of individual initiative and informal collaboration rather than institutional strategy.

However, there are notable signs of potential. Some institutions have begun to experiment with strengthening their capacity in this area, for instance by training junior researchers in grant writing or leveraging FA5 participation to demonstrate credibility to other donors. These initiatives are promising, but remain rather fragmented. Without formal structures, such as fundraising offices, donor databases or long-term funding strategies, the gains are vulnerable to attrition. In Ethiopia, for example, under FA5 targeted training was provided to help researchers secure external funding, which is seen as essential for sustainability and future infrastructure investment. Therefore, FA5 platform facilitated networking and joint grant writing, resulting in significant awards and other large-scale funding, contributing to the sustainability of partner institutions.

The third, closely related dimension of this capability is the ability to **attract and retain talent**. Based on the findings, institutions generally succeed in attracting capable staff, particularly through their research opportunities, reputation and links to international networks. In several cases, the prestige associated with FA5 has helped institutions to recruit young researchers and technical staff, who view participation in the programme as an opportunity to advance their careers. Survey responses confirm that many institutions regard their ability to attract staff as a strength, particularly where there are opportunities for advanced training or international exposure. However, the ability to retain talent is far more tenuous (see Figure 18). Most institutions operate in environments where salaries are not competitive to the private sector and career development pathways are somewhat limited or unclear. Consequently, institutions face a persistent 'sustainability gap': they invest in staff training and development, offering meaningful opportunities, yet ultimately find themselves struggling with retaining staff. The evaluation found that this dynamic is particularly pronounced among junior researchers and technical personnel, who often leave for higher-paying positions in international organisations or the private sector once they have been trained. In Ethiopia, for example, partner institutions faces challenges in retaining staff due to market changes, devaluation, and the absence of a systematic retention strategy, resulting in high-performing staff may seek opportunities elsewhere.

Figure 18: Attracting and Retaining Talent across Partner Institutions



Source: Syspons, 2025

Furthermore, only few institutions have structured retention strategies. Staff development is often project-based and lacks continuity. Consistent mentoring systems, handover processes and institutional career progression models are lacking. This affects not only staff morale and institutional memory, but also undermines the return on investment in capacity development. In some settings, institutions rely on informal loyalty or the intrinsic motivation of staff to maintain engagement. While these factors are valuable, they cannot substitute for structured human resource systems. The case study in Nepal provides a concrete example of this dynamic. Only a few PhD graduates have been retained, despite recent graduates expressing strong interest in remaining at the institution. The main constraint lies in the lack of available positions and institutional flexibility to create them. While some graduates pursue opportunities abroad, many indicate a willingness to work locally if adequate institutional support and clear career pathways are available. In contrast to this, in Cuba, a long-term, structured approach to staff development has proven effective in improving retention and leadership continuity. Institutions that deliberately invest in progressive career pathways, from Master's to PhD training and onward to roles in research networks or institutional leadership, create a strong sense of belonging and professional identity among their researchers.

The overall consequences of this dynamic are not confined to the internal sphere. High staff turnover can affect external credibility, disrupt stakeholder relationships and reduce the institution's capacity to act as a consistent partner. It also can restricts the institution's capacity to develop long-term expertise in specific thematic areas. Although pockets of excellence exist, often centred around committed individuals or well-funded teams, these are difficult to sustain without a broader institutional framework for talent management.

Option for Action

Facilitate **peer learning on staff retention** by showcasing successful models from partner institutions and creating spaces for exchange on effective career pathways and reintegration strategies. Provide targeted training for managers and senior researchers in mentoring, succession planning, and handover practices to ensure continuity of leadership and technical expertise. This combination of shared learning and structured mentoring can help institutionalise sustainable talent management across the network.

Overall, the evaluated institutions are respected, connected and active in engagement and have the capability to relate and attract, but lack the systems to fully leverage these strengths for long-term sustainability. Stakeholder engagement is widespread and often meaningful, but not yet institutionalised. Resource mobilisation is driven by initiative rather than strategy. Staff are committed and capable, but often transient. The FA5 programme has undoubtedly played a role in strengthening external relationships and enhancing institutional visibility. However, the evaluation suggests that these gains are not always anchored in structures that extend beyond the programme's lifespan. Therefore, the challenge lies not in building connections, but in consolidating them to transform reputation into resilience and engagement into embedded systems that can carry institutions forward independently.

4.2.5 Capability to Adapt and Self-Renew

The capability to adapt and renew itself reflects an institution's internal dynamism: its capacity to learn from experience, respond to change and reinvent itself when necessary. Strong institutions in this respect do not merely react to their environment; they evolve with it. They critically reflect on their own performance, embrace innovation and systematically prepare for emerging opportunities and risks. This capability is closely aligned with Outcome 4 – Institutional Capacity, which focuses on institutionalising effective processes in governance, planning, quality assurance, and coordination. The underlying hypothesis (OP6–OC4) assumes that when systems for continuous improvement and learning are established and implemented, institutions become better equipped to adapt and sustain quality. In practice, developing these systems embeds reflection and learning into the organisation's core processes, ensuring that adaptation is not a one-time response but an ongoing, institutionalised capacity. Within the FA5 evaluation, however, this capability was identified as the least developed among all partners, with consistent weaknesses observed in strategic adaptability, as well as in anticipation and foresight. While there are some promising

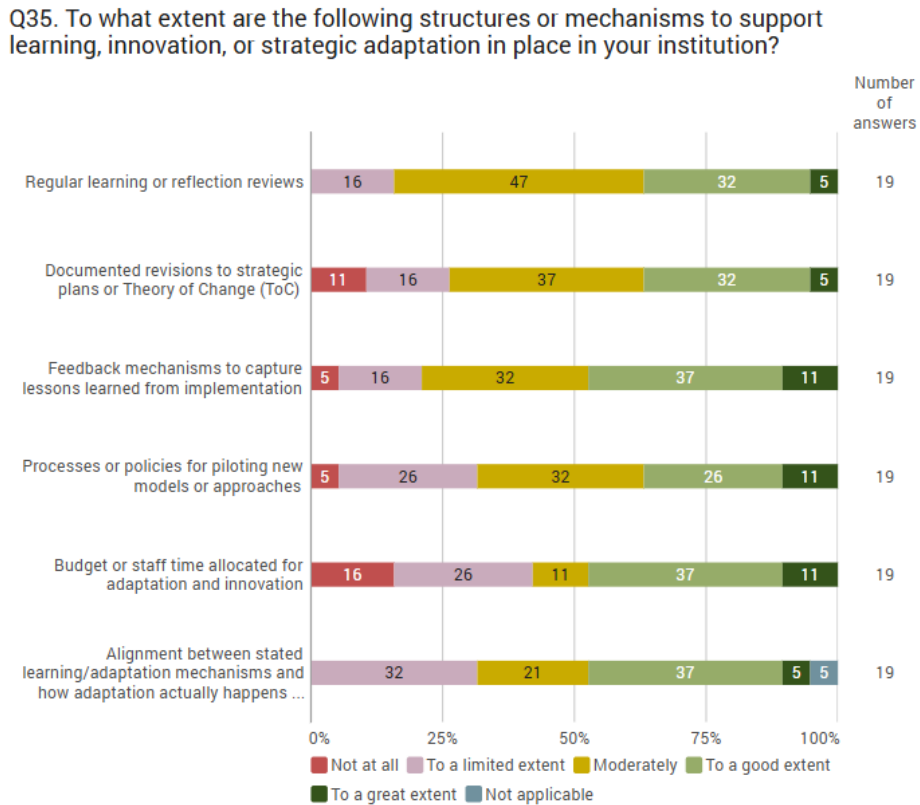
practices, the overall picture is one of limited institutionalisation of learning processes, a reactive rather than proactive stance towards change, and an embryonic or only slowly evolving culture of innovation.

Strategic adaptiveness, the ability to reflect on, adjust and evolve strategies based on internal and external feedback, is only moderately present across the partner institutions. While most institutions possess some degree of flexibility in implementation and staff are responsive to emerging needs or challenges, this adaptiveness tends to remain informal and individualised rather than being embedded within institutional systems. This adaptiveness tends to remain informal and individualised rather than being embedded within institutional systems. The evaluation found that, although staff are often open to change and willing to adjust their approaches, there are few structured mechanisms enabling such adaptation at institutional level. Additionally, the case studies made clear, while national public health institutes easier adapt to shifting political priorities by engaging policy makers on a regular scheme and following ministry guidelines, universities and independent research institutes tend to seek out-of-the box solutions and are more open to change in general.

Survey (see Figure 19) and case studies suggest a lack of institutionalised spaces for **reflection and strategic learning**. Although post-activity reviews (lessons learnt sessions), partner meetings and occasional research retreats do take place, particularly within the scope of FA5, these are rarely systematised or documented in a way that informs institutional planning. Without structured learning systems, institutions are unable to analyse what has worked, what has not, and why. Consequently, learning remains event- and project-specific rather than cumulative and strategic. To support adaptiveness, reflection and learning on an institutional level the 5C Self-Assessment Tool facilitates open dialogue among staff and leadership, linking shared reflection with practical steps for institutional improvement. It encourages teams to step back from day-to-day operations and examine how their organisation functions across the five core capabilities. Through guided discussion and evidence-based self-assessment, institutions identify what enables or hinders their effectiveness and explore how internal systems, leadership, and collaboration can evolve in response to change. By integrating the tool into regular planning or review cycles, reflection becomes part of the institution's strategic practice rather than an occasional exercise. This strengthens adaptive thinking, promotes alignment between purpose and action, and helps translate insights into concrete improvements and learning across programmes and partnerships.

Innovativeness, understood as the capacity to experiment, pilot new ideas and integrate novel approaches into institutional practice, was also found to be rather underdeveloped. While there are examples of innovation, particularly at the level of individual researchers or project teams, these initiatives are rarely embedded in broader institutional strategies. Innovation is often opportunistic, enabled by specific funding opportunities or external partnerships rather than being driven by internal processes or incentives. The evaluation found that few institutions have systems in place to actively promote innovation, such as internal seed funding, innovation hubs or formal procedures for piloting and mainstreaming new ideas.

Figure 19: Strategic Adaptiveness, Innovation and Learning Systems across Partner Institutions



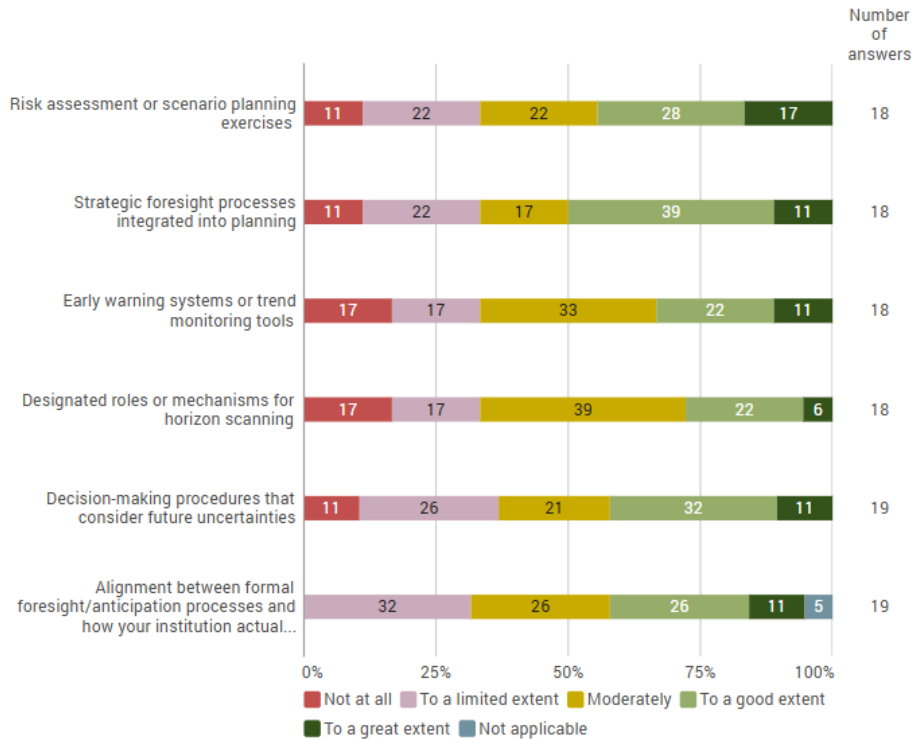
Source: Syspons, 2025

This does not mean that FA5 partners are in any sense resistant to innovation. In fact, many of the staff members interviewed during the case studies expressed their enthusiasm for trying new approaches and learning from other contexts and also the FA5 programme supported innovative approaches through the introduction of new diagnostic tools, networking and interdisciplinary work. However, the institutional environment does not always support or reward such efforts. Funding structures, staff workloads and the perceived need to prioritise delivery over experimentation limit risk-taking. Yet, there are promising examples where institutions have managed to create space for innovation and experimentation: In Cuba, for example, networking and international exposure, supported through FA5 activities, have proven to be particularly valuable, enabling researchers to overcome isolation and engage with global scientific and policy communities. This exchange has accelerated the adoption of novel practices that would otherwise remain out of reach due to the country's political and economic constraints. Moreover, by integrating social science insights and syndemic perspectives, the research focus also expanded beyond purely biomedical approaches, fostering more holistic and context-sensitive innovations in health research and practice.

The second dimension of this capability, **anticipation and foresight**, is even less developed (see Figure 20). The evaluation found that most institutions engage in limited forward-looking planning. Where they exist, strategic documents often focus on current priorities and known challenges, but rarely include systematic horizon scanning or scenario planning. Institutions tend to respond to change rather than prepare for it. This reactive approach restricts their capacity to engage proactively in research funding or technology.

Figure 20: Anticipation and Foresight across Partner Institutions

Q37. To what extent are the following systems or tools in place at your institution to support strategic anticipation and foresight?



Source: Syspons, 2025

This is not due to a lack of awareness. On the contrary, many staff are acutely aware of the changing landscape in which they operate, from shifting donor priorities and technological transformations to epidemiological transitions. However, they lack the capacity to translate this awareness into structured foresight. Institutions rarely conduct trend analysis, stakeholder mapping beyond immediate partners, or risk assessments. This restricts their capacity to identify new opportunities, such as thematic funding calls or regional research networks, or to prepare for potential disruptions, such as leadership transitions, funding gaps or political shifts.

A lack of systematic foresight is closely linked to a shortage of internal planning capacity. In many institutions, planning tends to be somewhat short-term and focused on donor timelines. The pressure to deliver current projects leaves little time or space for strategic thinking. Furthermore, when strategic planning does occur, it is frequently prompted by external demands (e.g. accreditation or donor compliance) rather than by internal considerations. This undermines ownership and limits the relevance of strategic plans to institutional development.

Despite these limitations, there are signs of potential. The evaluation found that many institutions have individuals with strong strategic instincts and that some have begun to experiment with more forward-looking approaches. For instance, some institutions have started to integrate digital and AI-based tools, update curricula in response to new challenges or explore partnerships in emerging research areas.

Option for Action

Promote interdisciplinary collaboration and foresight by connecting researchers across health, technology, and social science disciplines to jointly explore emerging challenges and opportunities. This can be achieved by supporting pilot research on artificial intelligence, data governance, and digital health solutions, as well as by facilitating spaces where ethical, social, and technical perspectives intersect.

Overall, the FA5 partner institutions demonstrate commitment and responsiveness, and many of them also have a strong desire to learn and improve. However, the systems that would enable them to do so in a strategic, consistent and proactive manner are still emerging. While strategic adaptiveness is present in spirit, it is not yet embedded in practice. Innovation occurs, but remains fragmented. Foresight is recognised as important but is rarely put into practice. Therefore, the capability to adapt and self-renew is not lacking in terms of values or intentions, but in terms of the systems, structures and institutional habits that allow learning to translate into transformation.

4.2.6 Capability to Achieve Coherence

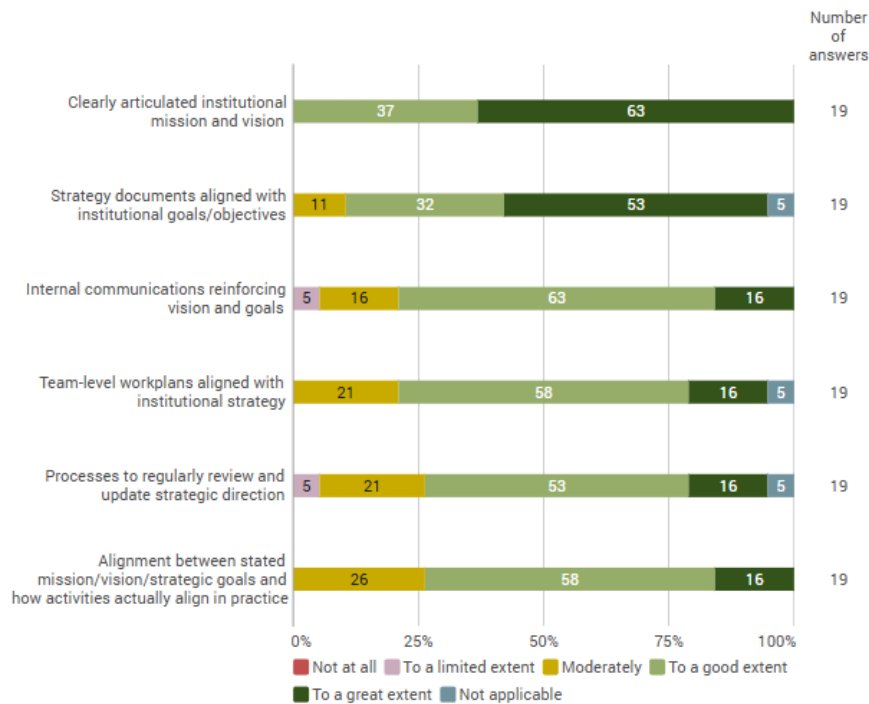
The capability to achieve coherence is an institution's ability to align its internal key components, such as its vision, strategy, processes and people, into a coordinated whole and translate the overall organisational values into practice. Not only are coherent institutions efficient, they are also purposeful and consistent. They can steer diverse activities in a unified direction, ensuring that teams, departments and leadership work towards shared goals. This capability is particularly important in complex, multifunctional organisations such as universities and national public health institutes, where fragmentation can easily undermine effectiveness. Within FA5, this capability closely relates to Outcome 4 – Institutional capacity, which focuses on partner institutions' ability to institutionalise and apply effective processes in governance, planning, quality assurance, and coordination. Achieving coherence provides the foundation for such processes: it links strategic intent with operational practice and ensures that improvements in one area reinforce progress in others. Achieving coherence is what allows these processes to function as an integrated system rather than as isolated mechanisms. It ensures that governance structures, planning routines, and quality standards are mutually reinforcing and aligned with the organisation's overarching strategy and values. While no specific hypotheses are attached to this outcome, its achievement depends on underlying dynamics such as a shared vision and strategic alignment, effective internal communication and information flow, and consistency in implementation across departments or sites.

The evaluation of FA5 partner institutions found that the capability to achieve coherence is moderately developed, with several positive foundations already in place. A strong sense of mission, growing alignment around strategic goals and effective collaboration within key programme teams point to meaningful progress. However, there is still room to strengthen internal systems for cross-departmental alignment and internal communication further, to ensure coherence extends across the whole institution and is sustainable over time.

A broadly shared vision and sense of institutional purpose emerged as one of the more encouraging themes in the evaluation. Staff at various levels across the partner institutions expressed a deep commitment to their organisation's role in advancing public health, research and education. In many cases, this sense of purpose has been reinforced by participation in FA5, which has provided a shared framework and common goals around which teams can unite. The survey confirms that alignment with the institutional mission is generally high, particularly among staff directly involved in FA5 activities (see Figure 21). Case study interviews further suggest that FA5 has helped foster a stronger sense of identity and direction, particularly within programme teams.

Figure 21: Shared Vision, Mission and Strategic Alignment across Partner Institutions

Q41. To what extent are the following elements supporting a shared vision and strategic alignment currently in place at your institution?



Source: Syspons, 2025

Efforts to align strategies across departments and functions are ongoing, beyond FA5-specific activities. In several institutions, the formal mission and values are clearly set out in strategic documents, and the leadership team plays an active role in promoting institutional coherence. Strategic alignment tends to be strongest at the leadership level and within externally facing programme units. However, the evaluation found that alignment can become less consistent further down the organisational hierarchy, particularly in units not directly involved in donor-funded projects.

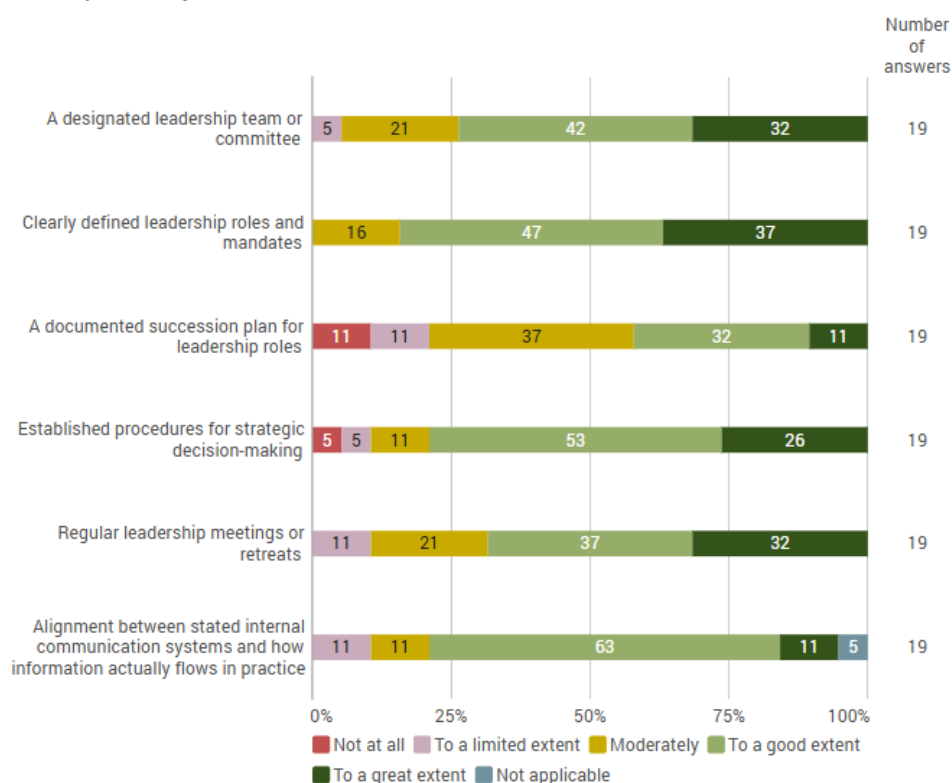
This highlights an important distinction between formal alignment, which is the existence of shared goals on paper, and functional alignment, which is the consistent translation of those goals into coordinated decision-making and everyday practice. While most institutions have strategic documents, these are not always used as active tools to guide planning or resource allocation across departments. In practice, some departments continue to operate relatively independently, which can lead to activities being carried out in parallel that are not fully integrated. In the case studies it became evident, that by clearly defining the FA5 goals (e.g., building platforms, generating new knowledge, fostering networks), the programme provided a unifying direction. This clarity made it easier for projects and stakeholders to align their efforts, decisions, and resource use. Furthermore, because the programme’s research agenda was tied to system-level priorities (not isolated academic interests), it helped synchronise knowledge generation with operational and policy objectives, which is another layer of internal coherence.

Internal communication plays a central role in either supporting or limiting coherence. Across FA5 partner institutions, internal communication was generally described as functional, with several effective practices in place (see Figure 22), particularly within programme teams. FA5 teams typically hold regular meetings, share calendars and coordinate activities effectively. Participation in FA5 has often led to improvements in internal communication within these teams, fostering collaborative dynamics and a clearer understanding of shared objectives. In Cuba, for example, the programme established platforms and diagnostics that gave participants common tools, methods, and reference points. These shared infrastructures helped different teams or disciplines work toward compatible goals and measure progress consistently, which are key for internal coherence. Moreover, under FA5 a promotion of

integration across disciplines and stakeholder levels took place. This broke down barriers between research areas, implementation actors, and governance structures, ensuring that ideas and findings flowed across the system rather than remaining compartmentalised.

Figure 22: Internal Communication and Information Flow across Partner Institutions

Q43. To what extent are the following internal communication mechanisms or tools in place at your institution?



Source: Syspons, 2025

However, these strengths are not always reflected across the wider institution. Communication between FA5 teams and other departments often relies on informal channels and personal networks. While this can be effective in the short term, it also highlights the need for more structured mechanisms, such as internal newsletters, digital dashboards or cross-functional planning meetings, to support broader information flow. The evaluation found that, although leadership-to-staff communication channels are generally in place, horizontal communication across departments is more variable.

Administrative and support staff, in particular, are sometimes only partially involved in discussions at programme level. In some cases, they reported that their involvement was primarily limited to logistics or compliance, and that they had limited access to information about the broader goals of capacity-strengthening initiatives such as FA5. This can limit deeper institutional ownership. However, the evaluation also found examples of administrative staff being meaningfully involved in programme planning and reporting, which fostered a stronger sense of shared purpose. In Ethiopia, for example, in addition to researchers, finance staff and study coordinators received training specific to the FA5 programme, supporting effective project management and reporting. Additionally, By involving administrative and support staff in capacity-strengthening activities, the programme bridged the typical divide between scientific and operational teams and strengthened a mutual understanding and therefore scientific and administrative functions can better support each other.

The evaluation also identified opportunities to further support cross-departmental dialogue. While informal collaboration between individuals is common, particularly among those who have worked together before, many institutions are still developing formal mechanisms for systematic collaboration across units. Consequently, opportunities for synergy, peer learning and joint planning can sometimes be overlooked.

Despite these gaps, there is considerable potential to further develop what already exists. Several institutions have expressed enthusiasm for deeper collaboration and more integrated planning. In some cases, FA5 has already served as a catalyst for stronger internal dialogue, particularly when it has been presented not just as a project, but as a contribution to institutional development. Where leadership has clearly communicated the connection between programme goals and broader institutional strategies, this has helped to reinforce internal alignment.

In summary, the capability to achieve coherence is evident in many areas, particularly in the form of a strong shared mission, effective collaboration at programme level, and growing awareness of the need for alignment across units. While some aspects of internal communication and cross-departmental planning remain somewhat underdeveloped, a solid foundation exists on which to build. FA5 has played a constructive role in reinforcing internal coherence, particularly within participating teams. The next step is to extend these gains across the broader institution so that all parts of the organisation are equipped and empowered to move in a shared direction with clarity, consistency and coordination.

5 5C-Self-Assessment Tool

This chapter documents both the methodological approach and the learning generated through the development and validation of the 5C-based self-assessment framework. The first subchapter describes the methodological design and key steps underpinning the process. The second subchapter distils the main insights and lessons learnt, drawing on literature review and reflecting practical experience from piloting and validating the tool across diverse institutional contexts.

5.1 Methodological Approach

As outlined above (see Chapter 4.1), the inception and gap analysis phase combined stakeholder consultations, desk review, and a structured analysis of existing programme documentation. In addition to informing the fit-for-purpose evaluation, this phase established the conceptual and empirical foundation for developing the 5C Self-Assessment Tool.

From a tool-development perspective, the inception phase focused on understanding how the 5C framework had been interpreted and applied within FA5 and on identifying which capability domains were insufficiently captured by existing information. The **review of the 5C mapping** exercise and programme documents showed that while strategic intent and planned activities were generally well documented, less tangible dimensions, such as institutional learning, adaptability, internal coherence, and sustainability, were only partially reflected in programme documentations. These gaps were primarily linked to reporting formats rather than to weaknesses in programme design (see also chapter 4.1).

The **analytical grid** developed during the inception phase served as a structuring device for this analysis. It provided a consistent lens for examining programme documents against the five capabilities of the 5C model. Applying the grid across country programmes made it possible to compare patterns of emphasis and omission and to identify where certain capability domains were less explicitly articulated or documented. These insights then informed the design of the self-assessment tool by indicating where clearer operationalisation, more concrete indicators, and

reflective prompts were needed to capture aspects of institutional capacity that are difficult to assess through routine reporting.

As a result, the inception phase produced a first conceptual **sketch of the 5C Self-Assessment Tool**, firmly grounded in the FA5 programme context and aligned with the five capabilities of the 5C model. Early discussion of this draft during the inception workshop with ITM and selected stakeholders helped ensure relevance, clarity, and a shared understanding of the tool's purpose, providing a solid foundation for subsequent refinement and validation.

Building on the conceptual groundwork established during the inception and gap analysis phase as well as on the findings of the Fit-for-Purpose Evaluation, the subsequent phase focused on translating these insights (see chapter 5.2) into a refined methodological framework and a **fully operational 5C-Assessment Tool**. This process was informed by a targeted review of existing 5C-based self-assessment approaches and relevant literature (i.a. Bates et al. 2014, Land et al. 2011 and Morgan 2006), ensuring that the framework was both theoretically grounded and practically applicable. As part of this process, the survey instrument was based on the 5C framework. It included quantitative questions closely aligned with the final 5C-Self-Assessment Tool, covering key organisational structures and processes as well as perceived maturity levels across the five capability domains. This early alignment allowed the evaluation team to test the clarity, relevance, and interpretability of capability-based questions and rating scales, and to assess how respondents engaged with maturity-level assessments in practice. In parallel, the case studies provided deeper qualitative insights into the scope of the FA5 programme and the diversity of institutional contexts in which the tool are planned to be applied. They offered a more nuanced understanding of how capabilities manifest in different organisational settings and highlighted practical constraints and priorities faced by partner institutions. Feedback gathered through the case studies already informed several early refinements, including simplification of the overall structure, sharper focus on realistic and institutionally relevant capability areas, and the introduction of a prioritisation step to support the translation of assessment results into feasible capacity-strengthening actions. Together, the survey and case study components played a complementary role: while the survey supported structured testing of the 5C framework and maturity-level questions at scale, the case studies provided depth, contextual understanding, and early validation of design choices. This combination ensured that the final methodological approach was both analytically robust and closely attuned to the realities of partner institutions.

The 5C-Self-Assessment tool was designed to combine quantitative items and qualitative prompts, allowing institutions to assess both the level of development and the underlying dynamics of their organisational capacities. Moreover, this dual approach ensures that the assessment process stimulates critical thinking, dialogue, and collective learning, rather than merely producing scores (see also chapter 5.2). In parallel, a concise **methodological and a terminological guide** were developed to support consistent understanding and application across different institutional contexts. Draft versions of the framework and guidance were discussed with ITM, and feedback was incorporated to ensure clarity, coherence, and alignment with the FA5 context.

Following this development phase, the 5C-Self-Assessment Tool was **validated through pilot applications** with selected partner institutions. Building on insights from the Fit-for-Purpose Evaluation, four country programmes were selected in consultation with ITM to reflect different institutional profiles and performance levels. The validation process combined facilitated pilot self-assessments with structured reflection and feedback. An online training session ensured a shared understanding of the 5C model, the assessment framework, and the self-assessment process among pilot participants. Throughout implementation, the evaluation team closely accompanied the pilots to capture feedback on usability, relevance, and practical challenges. Additional perspectives were gathered through broader engagement with partner institutions during the FA5 colloquium, allowing informal feedback beyond the pilot group. The validation phase concluded with a lessons-learned workshop involving partner institutions and ITM. This workshop provided space to reflect on experiences from the pilots, validate interpretations of the results, and identify areas for refinement. Feedback from this process (see chapter 5.2) was systematically integrated into the final revision of the 5C-Self-Assessment Tool, strengthening its usability, contextual fit, and value as a learning-oriented instrument for supporting institutional capacity development.

5.2 Insights and Lessons Learnt

The development and validation of the 5C self-assessment tool, informed by a targeted review of the 5C literature and extensive engagement with FA5 partner institutions, confirmed the central importance of **context sensitivity** in assessing institutional capacity. Both the literature and empirical feedback underscored that capacity is not a static or transferable attribute, but an emergent and relational phenomenon shaped by internal dynamics, such as leadership practices, learning processes, and organisational culture, as well as by external factors including mandates, incentives, legitimacy, and institutional relationships (Morgan, 2006; Baser & Morgan, 2008). This insight proved particularly salient in the FA5 context, where partner institutions operate across diverse sectors, organisational forms, and political and institutional environments. Feedback from partners consistently highlighted that capacity strengthening takes different forms depending on institutional role and context: what strengthens a National Public Health Institute (NPHI) may differ significantly from what is relevant for a university or a reference laboratory. For institutions engaged in research, education, and health system strengthening the self-assessment tool therefore needed to accommodate the multifaceted nature of their work. This includes addressing both formal structures and informal practices, as well as tangible and intangible elements such as trust, legitimacy, learning, and strategic alignment. These experiences reinforced the insight, also highlighted in the literature, that high-level capacity dimensions must be translated into institutionally meaningful and context-specific questions in order to become assessable (UNDP, 2008). To operationalise this context sensitivity while maintaining analytical coherence, three tailored versions of the 5C self-assessment tool were developed: one specifically adapted for NPHIs, one for universities, and a general version applicable to other institutional types. While all versions are anchored in the same 5C framework and core capability logic, they differ in indicators, examples, and wording to reflect distinct mandates, governance structures, and operational realities. This differentiation enables institutions to assess their capacities against relevant reference points, while preserving comparability and shared learning across institutional contexts. At the same time, the development process highlighted the need to balance analytical abstraction with operational usability, requiring indicators and rating scales that are sufficiently specific to support consistent interpretation across stakeholders, while retaining conceptual coherence across diverse settings.

Additionally, monitoring and evaluation literature associated with the 5C model emphasises that capability change is often non-linear, iterative, and difficult to attribute to single interventions (Engel, Land & Keijzer, 2006). This insight proved highly relevant for the development of the self-assessment tool. It has direct implications for assessment design, as purely quantitative approaches risk oversimplifying complex institutional dynamics, while isolated scores or ratings remain difficult to interpret without contextual explanation. As highlighted in the literature, **mixed-method designs** that combine structured ratings with qualitative reflection are therefore better suited to capturing both the level of capability and the factors shaping its development over time (Land et al., 2011). This insight was explicitly addressed in the design of the 5C self-assessment tool. Rather than relying on scores alone, each capability domain combines quantitative ratings with qualitative prompts that invite participants to explain their assessments, provide concrete examples, and reflect on recent experiences. This design allows institutions to surface divergent perceptions, explore underlying causes, and situate ratings within their specific organisational and contextual realities.

In practice, the mixed-method approach proved valuable not only for capturing nuance, but also for stimulating discussion about patterns, tensions, and trade-offs across the five capability domains. Throughout the training and validation process, it became evident that the self-assessment yields the most meaningful results when it is understood as a **learning-oriented diagnostic process** rather than a compliance exercise or a one-off measurement. Consistent with the literature, participants cautioned against using the 5C framework as a checklist or scorecard detached from interpretation. Instead, its value lies in supporting structured reflection and dialogue about how institutional systems function in practice (Land et al., 2011).

Based on the feedback gathered during the inception phase, which pointed to the need to move from abstract formulations towards more **concrete, practice-oriented questions**, the 5C-Self-Assessment Tool has been further

enhanced to improve its usability and clarity. In order to ensure that subdomains, such as leadership or innovations, do not remain too conceptual and abstract, the tool includes concrete examples and scenario-based prompts. For instance, instead of asking whether leadership is participatory, the tool invites respondents to reflect on recent leadership decisions and the extent to which different staff levels or groups were involved. This helps participants ground their responses in lived experience rather than formal structures or written policies and led to richer and more realistic discussions.

Another important lesson learnt from the training and validation process relates to **linguistic accessibility** and **conceptual clarity**. Several partner institutions highlighted that translation into local languages is essential to ensure that questions are understood consistently by all participants. This issue extends beyond linguistic accessibility and directly affects the validity of the self-assessment. Core concepts underlying the 5C model (e.g. capacity, capability, legitimacy, learning, or strategic alignment) do not always have direct equivalents in all languages or institutional cultures. Without careful translation and adaptation, participants may interpret questions differently, leading to inconsistent responses and reducing the comparability and usefulness of results. Therefore, the tool and accompanied guide were translated into French and Spanish and a dedicated terminological guide was developed to support a shared understanding of key concepts across languages and institutional contexts. While additional translations into other languages may further enhance accessibility, the need for such translations should be assessed on a demand-driven basis in close consultation with partner institutions to ensure relevance, feasibility, and effective use as well as also on the other side comparability and replication across institutions.

Beyond the tool design, the validation process yielded important lessons regarding implementation. In particular, it became clear that the quality of the self-assessment depends not only on the tool itself but also on how it is positioned, introduced, and facilitated. A **successful roll-out** requires clear communication from the outset about the purpose of the exercise as a learning-oriented process rather than an evaluation, as well as guidance on scope and expectations. Pilot institutions emphasised the importance of clarifying at an early stage the intended role of the self-assessment in future collaboration and planning processes. Communicating how the tool will be used, both to identify institutional capacity needs at an early stage and to inform ongoing dialogue and prioritization, was seen as critical for building understanding, relevance, and engagement before the tool is applied. In practice, pilot institutions highlighted the value of an initial kick-off meeting to align participants, explain the logic of the 5C model, and clarify which institutional levels and perspectives are relevant for different capability domains. Early planning was also identified as a key success factor, particularly to ensure the meaningful involvement of senior management. While senior leaders often face competing demands on their time, their engagement is critical for institutional ownership, prioritisation, and follow-up.

This directly relates to the importance of involving **multiple staff perspectives** in the self-assessment. No single individual has a complete overview of an institution, and assessments conducted by one person alone risk being partial or biased. Bringing together perspectives from leadership, research, administration, and support functions as well as including junior staff, women, and underrepresented groups was seen as essential for generating a holistic and credible picture of institutional capacities. The literature also underscores the importance of self-assessment and multi-stakeholder participation, because capabilities such as legitimacy, learning, and adaptation are experienced differently across organisational roles, relying on a single respondent risks oversimplification and bias (Engel et al., 2006; UNDP, 2009). Engaging participants from different levels and functions helps capture diverse perspectives and strengthens the analytical validity of the assessment. Importantly, self-assessment under the 5C model is not positioned as an objective measurement of “true” capacity, but as a collective sense-making process (Land et al., 2011).

However, the interpretation of divergent views can pose a challenge to partner institutions. The validation phase highlighted the need for clearer **guidance on interpreting** both quantitative ratings and qualitative inputs. Divergent views should be treated as data in their own right, pointing to underlying coordination issues, power dynamics, or differences in information access. Large gaps often indicate differing experiences between units or levels of seniority.

Instead of averaging scores, divergence should be treated as an entry point for dialogue. This reinforces the model's orientation toward reflection, dialogue, and strategic learning rather than judgement. Additionally, interpreting the results is not just about identifying weaknesses. It is also an opportunity to recognise and celebrate areas of strength. Recognising what is working well helps to build confidence and ownership, and can serve as a foundation for further development. It also enables institutions to consider how successful practices in one area could be adapted or extended to others.

In order to derive the discussed results in realistic and effective capacity strengthening activities, a **prioritisation table** was introduced within the tool, encouraging institutions to focus on a limited number of issues that are strategically important, time-critical, or characterised by strong internal motivation for change. From previous similar assignments, we have learnt that institutions often struggle to translate the results of self-assessments into practical actions. Encouraging institutions to reflect on their priority areas, i.e. those in which the anticipated benefits are greatest and on which capacity development initiatives should therefore primarily focus, has proven to be an effective approach. This design choice is consistent with the literature on organisational capacity strengthening, which emphasises that capacity assessment should begin with the definition of organisational goals and assess existing capacity in relation to the capacity required to achieve those goals (Bates et al., 2014). By anchoring action planning in strategic objectives, the prioritisation process helps direct attention to the capacity gaps that are most relevant for institutional performance and change.

Finally, to reduce workload and avoid the perception of the self-assessment as an additional burden, it is critical to **integrate the process into existing strategic and operational cycles**. When conducted as a stand-alone exercise, self-assessments risk competing with ongoing planning, reporting, or management processes and may generate limited follow-up. Embedding the 5C self-assessment within established processes, such as strategic reviews, annual planning, or internal performance discussions, helps streamline effort, makes use of existing data and meetings, and increases the likelihood that findings inform concrete decisions. This integration also enhances the added value of the assessment for partner institutions by ensuring that results directly contribute to priority setting, resource allocation, and organisational learning, rather than remaining an isolated diagnostic exercise.

By doing so, the 5C-Self-Assessment Tool helps institutions to become more intentional and evidence-based in their approach to development. It encourages them to ask not only whether they are performing well, but also why and how, and not only where they stand now, but also where they want to be in the future. It invites institutions to engage with complexity, challenge assumptions and reimagine institutional strengthening in context-specific, mission-driven ways.

6 Conclusion and Recommendations for FA6

The evaluation of the FA5 programme was undertaken in a context in which institutional capacity development has become both a strategic priority and a methodological challenge. Using the 5C model as a shared analytical framework, the assignment pursued two closely interconnected objectives: first, to assess how capacity strengthening was conceptualised, implemented, and experienced across FA5 partner institutions; and second, to develop and validate a practical, evidence-based 5C-Self-Assessment Tool that can support continued institutional learning. This integrated approach allowed the evaluation to move beyond assessing results alone and towards understanding the institutional capabilities and mechanisms that underpin sustainable performance, adaptability, and coherence. By combining empirical analysis with participatory reflection, the process generated retrospective insights into FA5 achievements while translating these insights into a structured and usable instrument for future capacity development. In doing so, the assignment equips ITM and its partners with both a robust assessment of FA5 and a validated tool to support strategic, learning-oriented capacity strengthening in the years ahead.

The findings from the Fit-for-Purpose Evaluation indicate that FA5 has made meaningful contributions to strengthening institutional capacities across several dimensions of the 5C model. Many partner institutions demonstrated enhanced capacities to deliver results through strengthened human resources, research infrastructures, and educational programmes. Progress was also evident in the capability to relate to external stakeholders, particularly through policy engagement supported by the GRIPP approach, as well as in resource mobilisation. In several contexts, capacities related to adaptation and self-renewal have also emerged as growing strengths. At the same time, these developments remain uneven and are often reliant on individual leadership, external funding streams, or specific project arrangements, rather than being fully embedded in institutional systems and routines.

These findings underline the importance of moving from project-based capacity strengthening towards more systematic, institution-wide learning and reflection. In this regard, the 5C-Self-Assessment Tool represents a key output the assignment. Developed and validated alongside the evaluation, the tool translates empirical insights from FA5 into a structured, context-sensitive framework that institutions can use to reflect on their own capacities, identify priorities, and link assessment results to strategic and operational planning. Rather than serving as a one-off diagnostic, the self-assessment is intended as a recurring learning instrument that supports dialogue across institutional levels and fosters ownership of capacity-strengthening processes.

Looking ahead to FA6, the final recommendations aim to support FA6 in strengthening institutional learning, governance, and collaboration structures, while ensuring that the 5C-Self-Assessment Tool is used as a practical bridge between evaluation, strategy, and sustained institutional change. Therefore, in the following, we present two overarching recommendations that go beyond individual options for action and are relevant to the design and implementation of the FA6 programme as a whole. Both aim to consolidate the achievements of FA5 and to strengthen institutional learning, collaboration, and strategic alignment across partner institutions.

Recommendation 1: We recommend that ITM implements the 5C-Self-Assessment Tool in collaboration with the partner institutions during the planning and implementation phase of FA6.

To ensure that capacity strengthening remains an ongoing and adaptive process, it is recommended that partner institutions and ITM integrate the 5C Self-Assessment Tool into their cycles of planning, monitoring, evaluation, and learning (MEL). The tool provides a structured framework for reflection, helping institutions to not only assess their strengths and weaknesses across the five core capabilities, but also facilitates evidence-based strategic discussions on priorities, risks, and lessons learnt. Moreover, the tool can help strengthen the alignment between institutional strategies and programme objectives, and foster a culture of continuous improvement and accountability. Embedding the self-assessment process within programme MEL systems will help translate evaluation findings into practical learning and strategic action, ensuring that capacity development becomes an integral, self-sustaining part of institutional governance. To ensure the effective and sustainable use of the 5C Self-Assessment Tool across partner institutions, its implementation should follow a phased and participatory approach that emphasises transparency, ownership, and continuous learning. The following steps are suggested to guide the process:

- Before implementation, ITM should ensure transparent communication about the objectives of the self-assessment and clarify its own role and level of involvement. It is essential that partners understand that the tool serves as an instrument for institutional reflection and learning, not for external evaluation or control. Early communication materials and orientation sessions can help build trust, create ownership, and ensure that the process is aligned with each institution's internal priorities and planning cycles.
- During the roll-out, ITM should closely accompany the first implementations to provide guidance and ensure consistency, while avoiding the creation of parallel reporting or monitoring structures. A joint pilot phase, followed by a reflection workshop, would allow institutions to share experiences, challenges, and practical insights from the process. This peer-learning setting can help identify what worked well, where additional support is needed, and how the tool can best be integrated into existing institutional processes.
- The 5C-Self-Assessment Tool should remain a living instrument, continuously adapted based on user feedback and practical experience. Regular reviews, for example after each implementation cycle, can ensure that the tool stays relevant, context-sensitive, and user-friendly. In parallel, further development of the

tool's technical architecture, particularly in terms of programming and data visualisation (e.g. dashboards), should be pursued. This would facilitate longitudinal analysis and comparability across assessment cycles, reduce manual processing efforts, and support the gradual institutionalisation of the tool within partner organisations. ITM can coordinate this process by collecting lessons learnt, facilitating exchange among partner institutions, and revising both the tool and accompanying guidance materials accordingly.

The extent to which findings from the 5C-Self-Assessment Tool can be shared for programme steering depends on several factors, including the voluntary nature of the process and the autonomy of partner institutions. As independent entities, partners retain full ownership of their internal strategic priorities and decision-making processes; the self-assessment is designed to support institutional reflection, not to interfere with or evaluate internal governance. Collaboration should therefore take place on an equal and trust-based footing, where insights are shared voluntarily and used to identify common learning areas and systemic needs. Nevertheless, aggregated and selected findings, such as identified areas of action, can inform programme-level steering, helping ITM and its partners to align support, adapt capacity-sharing approaches, and strengthen the overall coherence of the partnership.

Recommendation 2: ITM is recommended to strengthen knowledge exchange and cross-learning within ITM and FA6

ITM should further promote systematic knowledge exchange and collaboration across its departments, units, and the partner institutions of FA6 to foster institutional learning and innovation. Drawing on lessons from FA5, ITM may consider creating or further strengthening internal learning mechanisms that are explicitly linked to the 5C self-assessment process. Building on the assessment results, partner institutions could be invited to share at least their priority capability areas with ITM. These priorities would then serve as the basis for a light-touch check-in call to jointly reflect on the findings, clarify support needs, and explore how ITM could add value where relevant. At a next step, ITM could use this information to connect partner institutions that identify similar priority areas or challenges, e.g. talent retention, foresight, institutional adaptability, or emerging topics like AI and data governance and thereby fostering peer exchange, joint problem-solving, or collaboration on concrete initiatives (e.g. joint grant writing or fundraising). This approach could be further strengthened by systematically documenting and curating good practices emerging from the self-assessments and follow-up discussions. Without creating a heavy reporting burden, ITM could collect short, structured practice notes that describe the challenge addressed, the solution applied, and key enabling factors. These good practices could then be actively used to link institutions that demonstrate strengths in specific capability areas with those that are facing difficulties, supporting targeted peer learning and accelerating institutional learning across the partnership network. To maximise the impact of these efforts, the network structure within FA6 should be further supported and institutionalised, providing a clear framework for continuous exchange and peer learning among partner institutions. Strengthening the network in this way would help connect expertise across contexts, encourage the replication and adaptation of effective practices, and reinforce a culture of mutual learning and shared innovation across the partnership portfolio.

7 References

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Annex

- Analytical Grid
- Self-Assessment Tool
- Methodological Guide
- Terminological Guide

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