

# Human Capacity development: learning from local action and experience

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## **Human Capacity development: learning from local action and experience**

### **Introduction**

This paper is a description of an approach to working with people in communities and organisations in order to enable a more effective global response to HIV/AIDS. It describes a process of learning from local experience and action, and how to facilitate this process. It is based on the concept of human capacity development, or the potential in each individual to be part of a response, and the need for each person to have the opportunity to participate. In this context, the role of organisations becomes that of facilitating inclusion and catalysing a local response. This approach is a way of working: it is a process which works with existing organisations, and is not an additional structure.

Many communities and people, and some organisations, are already working in this way. The concepts and approach described are not new and many people will recognise them. In the field of HIV/AIDS, people adopting these approaches are however, mainly working in isolation, and the impact is limited.

For those who have not had the experience of working in this way, a paper description will make less sense, and will probably always be inadequate. To understand fully what the approach involves it needs to be experienced – learning by doing and experiential learning are crucial elements, which are challenging to express fully in writing. The shift from implicit to explicit knowledge about learning from local experience requires actual participation in a learning experience.

We hope that the paper will affirm ways of working to those who are either already doing this, or are struggling to find an alternative to approaches based primarily on expertise and interventions. We hope it will also encourage others who have not considered this type of approach to find a way to experience it and thereby to understand it more completely.

The paper is intended not only for those working at community level, but for people at all levels of organisations and hierarchies. Building human capacity is applicable to everyone<sup>i</sup>, and applies to international organisations, including bilateral donors, as well as NGOs, health professionals at any level and local communities.

### **1. Why are local learning experiences and human capacity development important?**

Effective responses to HIV/AIDS are community-driven, not commodity-driven. Technology, money and information can support but do not substitute for people-driven responses. Building human capacity and responding to HIV are closely woven together: effective responses to HIV develop human capacity: building human capacity is the foundation of an effective response to HIV [from UNAIDS Strategy note, Oct 2001<sup>ii</sup>]. Learning from local action and experience is an essential part of building human capacity to cope with the HIV/AIDS epidemic and to respond to it

effectively. It is a process that works at all levels from local to international (see Zambia National Facilitation Team: a case study of a human capacity development initiative for an example of a national level process<sup>iii</sup> ).

### ***Human Capacity Development and Learning experiences***

*Twenty years of effort have so far failed to stop the HIV epidemic. Our current strategies work only on a small scale. Since we ourselves are the target of the virus, one way of changing the course of the epidemic is to change ourselves. Human capacity development can change the way people think, work and behave on a very large scale, and local learning experiences are essential to enable this to happen.*

To date, the major global efforts to address HIV/AIDS have been driven by technology and conceived in terms of education, interventions and organisational capacity development. While these are important elements of the response, without adequate attention to and investment in human capacity, there has not been and will not be a significant impact on the epidemic.

To change the character of the way we are addressing the epidemic, we need to shift the emphasis from the current interventionist approach, which sees people as an object of change initiated from outside by experts, to one of facilitation which sees people as the agents of their own change, accompanied and helped by others who are learning from a similar process. A response shaped in this way, with local support and accompaniment, can be self-sustaining and can expand fast, thus creating an environment for rapidly scaling up the global response to HIV.

Organisational change is often seen as an internal organisational development, separate from action at family and household level. But by facilitating learning experiences which bring organisations to learn from local action these two apparently very different processes can be woven into one, enabling organisations to learn from community experience and therefore to become community-led and owned rather than being driven by theory and technology.

### ***Local action and response and learning experiences***

*Responding to HIV effectively means changing some of our most deep-rooted attitudes and behaviours, assumptions about other people and values. This change can only happen at a local and individual level. People belong to all sorts of communities, and within such communities, they share values and influence each other. Change at community level is closely related to change at individual level and vice versa. Sharing between different sorts of communities, to learn about both successes and challenges in responding to HIV, through exposure to others' experiences, is an effective way of communicating the responses and concerns of one community to enlighten or stimulate the response of another.*

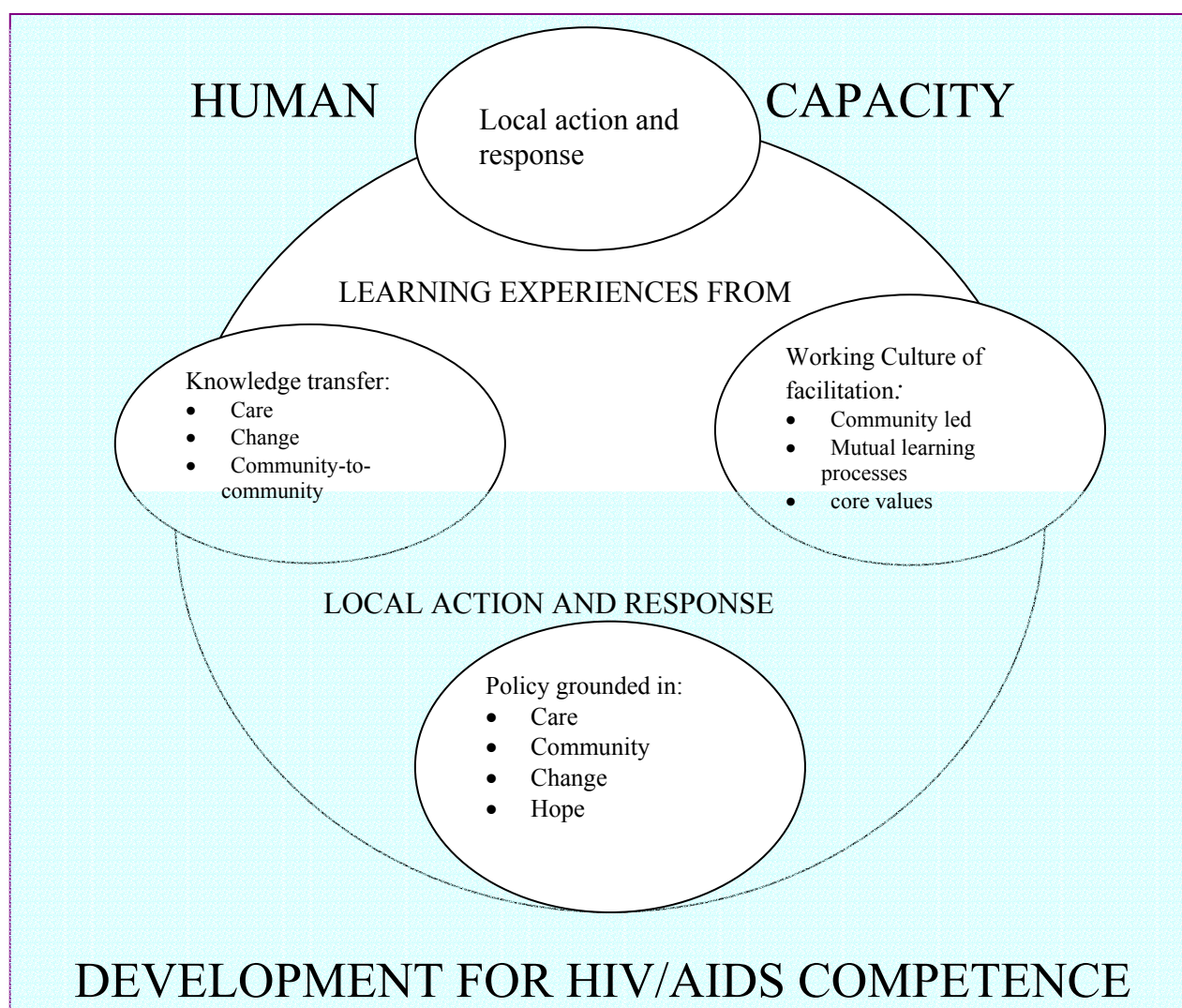
Local learning experiences are at the core of both human capacity development and organisational change.

To be effective, these learning experiences must be set in a context of local responses and must be participatory in character. The aim is to create an environment of shared *HIV/AIDS competence* (see Box on page 9), in which HIV/AIDS is acknowledged, action is being taken, and there is a sense of responsibility and hope for the future.

The rest of this document expands on what a local learning experience is and how to work through this approach. For the purposes of this paper, it is assumed that learning experiences will take place either through visiting homes or communities to gain experience of local action and response or in the context of a workshop. There are many settings in which learning from local action can happen – the main principles and approaches are the same.

## 2. What are local learning experiences?

The value of learning experiences, especially in the context of the HIV/AIDS epidemic, is that they lead to action and often to change. To be effective local learning experiences need to draw on real experience and to be used in such a way that the meaning and consequences of local action are understood by participants. This is a different process from describing activities.



To lead to change, learning experiences have to be based on living and changing action rather than being pre-constructed, standardised, or theory-driven. Answers are drawn from discussion and reflection on real-life experience rather than from issue-based or position-based analysis. Reflection on experience and local action, and analysing the process of applying the learning which comes out of such reflection can then shape theory and the understanding of issues around HIV.

***To achieve this, local learning experiences need to a) have certain key characteristics, b) include identified elements, and c) be based on a set of core values or concepts which can be transferred or shared.***

Facilitation of local learning experiences includes understanding all of these and ensuring that they are part of the process.

### **a) Key characteristics of effective local learning experiences: a shaped setting**

Local learning experiences are not formally structured, but need to be within a carefully designed *setting* to make it possible for all the participants to learn. In addition to this environment, the most important characteristics are the nature of *relationships* between the participants (usually visitors from outside and those working on local projects or community processes), and the *qualities and approaches* of the people participating.

#### *Shaping the setting*

The environment in which the learning experience takes place needs to make it possible for all participants, on a basis of equality, to learn from each other while respecting differing values. The way in which the experience is organised means ensuring that there is not an overwhelming advantage to one “side” of an exchange – either in terms of perceived superiority of knowledge, or in terms of a power base.

#### *Sharing ownership*

In 1993, 19 field organisations and 13 UK NGOs working in development, brought together through the UK NGO AIDS Consortium met to work out a research framework for a Collaborative Study<sup>iv</sup> looking at effective elements of NGO work on HIV/AIDS. At the beginning of the week long meeting, the UK NGOs, who had started the process, and were in a position of control, led the workshop. By the end of the week, the local NGOs and partner organisations were leading the sessions and the process had become one of shared ownership and leadership. Discussing what enables a change in ownership, participants at a workshop on learning experiences in Chiang Mai in 2002 suggested:

- Openness to learning
- Respect for others
- Recognition of the capacity of field partners, both by themselves and by the UK agencies
- Shared understanding of learning as a process
- Critical number of participants with the same vision on shared ownership

#### *The nature of relationships*

Shaping the environment in this way helps to influence the nature of the relationships between participating individuals and/or organisations. The setting helps to ensure that the relationships demonstrate the some essential characteristics:

- There is room for the views and voices of all participants to be heard and valued.

- The way in which sharing experience and knowledge is carried out enables a shift in the power base – in other words that the “visitors” in a community visit do not judge what they are seeing, but are prepared to learn from it, and that if appropriate there is an opportunity for them to share their experience with communities hosting the visit. While the primary focus of the visit is to give space to understand and reflect on the “host’s” local experience, sharing leads to the identification of common experiences. Finding that their experiences are echoed and validated by other people’s similar experiences leads people to value their own work and to understand more fully the potential impact of their own responses.
- Through a process of learning from local community action, organisations can

*In both Zambian and Thai languages there is an expression of the concept of gaining strength through knowing that others share the same understanding and are doing similar things.*

*In Bemba, “Umuchinshi wanseba kwimina pamo” (“When the birds are all together if a stone is thrown, they will fly together and no-one will be left behind.”)*

understand local capacity more clearly. Effective learning in this context is a mutual process – learning through shared reflection on and understanding of processes and actions – and the way in which local learning experiences are shaped needs to reflect this. It is not a process in which one side of the exchange is giving and the other receiving. All the participants give and receive information and understanding. In a host/visitor situation, for mutual

learning to succeed, the “visitors” need to accept they are “guests”, and that control is shared, so that they do not dominate the exchange to their own advantage.

- Participants are given the opportunity and are facilitated to apply learning personally as it happens – through discussion and reflection – and therefore to experience a growth in their personal understanding and capacity through appreciating how apparently different experiences connect.

### *Qualities and approaches of participants*

To be able to learn from local action and experience, people participating in an informal learning experience need certain qualities, which include:

- Openness to learning together
- Openness to shifts in power relationships
- Respect for others
- Ability to give oneself space to learn
- Ability to hear and understand others’ experience as well as being prepared to share one’s own
- Openness to working closely with others without a hierarchical structure, but with a willingness to trust others, respect differences and avoid competition - a “relational” approach that is inclusive, open, respectful and based on trust.

Not everyone has these qualities, but nearly everyone can learn them. The essence of human capacity development is that learning experiences, in particular learning from local experience and action, can bring about change in people (and in organisations).

This change includes change in attitude and approach, leading to an appreciation of “we together” rather than “them and us”.

### **b) Elements of learning from local action and experience**

This section on the elements of creating learning experiences as a way of learning from local action and local responses is based on the work of the Salvation Army over the last 15 years. Sharing experiences is a key part of any process including workshops, either in the form of story-telling by participants, or, preferably, through exposure to local action and experience in community visits. Analysis of experiences, including reflection on the meanings and drawing out the concepts and values demonstrated is an essential part of the process.

#### ***A local learning experience in Thailand***

The participants at the workshop in Thailand visited a sub-district health bureau office. In small Support and Learning Groups (about 5/6 people in each team) they then made home visits to different families. In one, a family member had recently died. In one, an orphan child was being raised by aunts. The third visit was to a volunteer worker.

Reflecting on their experiences, the teams observed strengths: for example, there was a long history and experience of HIV in the community; risk perception was high; the family visited was living positively; there was openness to sharing and listening, including with outsiders; there was extended family support; there was a sense of “heart in the Thai sense of acceptance, comfort and confidence. They also noted challenges still existed for the community: families were trying to challenge other families to be open by being open themselves – while this was a strength as well as a challenge, the family did not feel that they were being successful; the Village AIDS Council is now being made responsible for other diseases as well as HIV; the local official observed that volunteers need more support from the official health services.

### **The main elements which have to be included to shape a learning experience are:**

#### ***Preparation***

This is about building relationships and motivating ownership before the event. It is not a paper exercise – it involves bringing key people together to create a functioning group, developing a sense of teamwork and shared vision, and ensuring that a critical mass of participants share the kind of approach outlined above. Preparation also helps people to understand the nature of facilitation. It is more than the mechanical process of arranging the event, and should go beyond the process of good management to enable shared vision.

#### ***Using experience as a basis for:***

- Thinking through the influence of **identity**. (Who am I? who are we?) Building trust means that we need to go beyond labels such as job titles into personal identity. Each person in a group brings their own set of values and sense of who he or she is, and what has formed those values. Recognising these differences provides the opportunity to build on common qualities.
- Establishing the common **concern**. Experience of the local situation as it exists reveals what is preventing the identification of a solution to a problem. The

**concern** is the basis of how to address this and solve the problem. A “needs analysis” approach is generally carried out at a more superficial level. Establishing a common concern requires a more complex understanding of the environment and a longer-standing relationship with the community. Where “needs” tend to be interpreted mainly as material, “concern” carries with it a sense of personal, family and community values, implying motivation and therefore touching human capacity.

*Examples of personal vision statements:*

“A community which does not lose hope in spite of the impact of HIV.”

“A world united, not divided by its response to HIV.”

*Participants at Chiangmai workshop, Thailand, March 2002*

- Identifying and understanding the **vision** of what the situation will be like after the concern is addressed. Reflection on what is happening in a community as a result of HIV/AIDS and death and loss leads to a desire for change. A community’s first response may be chaotic, but through the process of identifying a vision of how change can come about, and developing confidence that it is possible, communities can work together effectively to create change.
- **Approach and ways of thinking** need to reflect a belief in human capacity rather than dependence on technology or external solutions.
- **Opportunities for reflection are more valuable than issues and information** in the context of local learning experiences. Structured learning and structured workshops usually depend on formal presentations of technical information which may be lengthy. In an informal learning environment intended to lead to action, explanation of issues or giving of information is not usually necessary and need not be longer than a few minutes. Direct learning from community experiences, either through visits or story-telling from participants or facilitators, with a space for reflection on the meaning of these experiences in terms of human capacity development, is more effective than lectures or static descriptions of activities.
- Local learning experiences should always be shaped to lead to action and **application** by participants and by communities. A learning experience only gains validity if it is applied and leads to change.
- In some workshops, but not all, the determination of **collaboration pathways** is appropriate. Multi-organisation workshops frequently have an objective to generate commitments to follow up, which are often not fulfilled. There is also a tendency to follow up with a decision to develop networks, or to carry out training, which may be useful but does not usually involve learning from local responses. Shifting the emphasis in such workshops to human capacity development would be more effective, as such a shift would enable participants to identify a shared vision of desirable outcomes and direction and mutual strengths, all of which help to sustain action and application of learning.

*Application frameworks should be based on:*

Concern analysis rather than needs analysis

Strengths analysis rather than “weakness” analysis alone

Understanding of local experience rather than reliance on external expertise

Analysis of ways of thinking and learning as well as activities.



***Follow-up***

Learning experiences are not intended to stand alone. Learning is part of a continuum and should always lead to action and reflection, further learning from this reflection and further action. Continued contact and support for action and change following learning experiences can be provided through the development of facilitation teams, formed through a process of human capacity development. Support and contact for local implementing teams by a facilitation team consisting of people from other regions is more effective and sustainable than external “expert” evaluation and monitoring.

These elements are all cross cutting – they are not in any fixed sequence in a given workshop, and each of the elements needs to be addressed each day of a workshop, illustrating the interlinked nature of local experience, identity, approach, values and vision, knowledge and application. The section on “How to do it” explains how these elements can be brought together to create effective local learning experiences.

***HIV/AIDS Competence and learning experiences***

*HIV/AIDS Competence can be achieved by communities, organisations and nations. It is characterised by shared acknowledgement of HIV and the impact it has on communities, care for those affected, change in the environment and community around aspects of HIV and in behaviour for individuals in the community, approaches and policies (at both community and national level), hope and action as opposed to a feeling of inability to respond and inaction. Learning from local responses can show the way to achieving this, through experiencing others’ responses and sharing the elements of success.*

**c) Core values or concepts**

Many core values are part of human capacity development, and help to create effective local action and effective learning from local action and response. A central part of the process of applying learning is the understanding, analysis and transfer of these core concepts. Capacity for care, a sense of community, capacity for change and hope are among the essential concepts in responding to HIV. Identification and analysis of these concepts, and the way in which local responses are rooted in them, are an important part of reflection and learning from local action.

***Care***

Care encompasses a range of different qualities: it includes

- accompaniment, or presence with the person being cared for
- protection, especially for those who are vulnerable
- sharing painful experience and burdens (solidarity)
- encouraging response
- willingness to break through taboos and social barriers to enable inclusion

***Community***

A community is characterised by belonging with others and a shared vision. Communities can be strengthened through coming together in the face of an external threat, such as HIV.

***Change***

The concept of change in a human capacity development context is change from within, rather than change imposed from outside:

- a personal transformation
- openness to learning from local community experiences, leading personal, organisational or community change
- an understanding of the need to adapt old values to new realities
- change involves learning together

Openness to change means accepting a challenge, and openness to learning from unexpected sources and in particular from local responses and action. Communities can change themselves – outside stimulation may not be necessary

***Hope***

Hope represents the confidence to deal with the present and the future at the same time while drawing on the past as a source of strength. (from “A short note on AIDS competence”)<sup>v</sup>

***Concept analysis***

The role of these core concepts in local responses and in applying learning is approached through reflection following local visits and through concept analysis. This is a process of exploring the different meanings which these concepts have for different people, in order to identify shared understanding. Participants are able to draw on their own personal experiences, possibly also using their work or professional perspective, to understand the concepts in greater depth.

The process of analysis helps to illustrate that while these are essential elements of a response to HIV, applying them can be both strength and a challenge. For example, analysis will clearly show the way that communities demonstrate capacity and the ability to develop this capacity further. Analysis and reflection following local learning experiences also clearly shows that providing for communities suppresses local responses because it maintains a power balance tipped in favour of the outsider. Yet, even after appreciating this, people visiting a community may still have a tendency towards offering provision. This tendency may reflect a sense of guilt at having more resources, or it can reflect a lack of belief in the capacities of communities to respond themselves.

***Knowledge transfer and community-to-community learning and learning from local action and experiences***

*The most effective response to HIV is that generated by the people affected themselves, not from external interventions. Communities can transfer their experiences and learning without external intervention, through participating in and then sharing opportunities for learning from their own and others' local actions. The Salvation Army Regional Facilitation Team in Africa has demonstrated the process of community transfer, initiated both by demand from communities to understand and build on the successes of their neighbours, or through the actions of individuals returning to their communities or organisations and passing on what they have learned from the experience of sharing others' local responses.*

### 3. How is it done?

Facilitation of successful learning experiences needs an approach which accepts that there is a need to take risks – levels of learning will vary among participants and it is not always clear what the outcome will be. Facilitation is a challenge to facilitators as well as participants. By giving space for reflection the facilitation team is also open to the challenge of questioning whether they are capable of continuing to learn themselves, and whether they are able to trust the participants to think for themselves and come up with their own solutions. This means being constantly aware of and reviewing the relationships discussed under the earlier section on “Shaping the environment”. It is easy to shift to instructional or “expert” approaches, especially where participants are still grappling either with a new way of working or with a concept that can be viewed in different ways.

The process does not standardise or predetermine where the group will go. People within a group make different progress according to where they have come from and what steps they can take. However, although flexibility is essential, learning experiences and the way they are shaped have objectives as well as a specific approach. These need to be transparent. While agendas may adapt and the pace of a workshop or other learning experience may vary, the end point is still to enable learning which will lead to change and to a better, more effective response to the epidemic. Guiding the nature of the relationships and shaping the environment of learning experiences are crucial parts of the role of the facilitator.

#### a) How to shape successful local learning experiences

The following are important aspects of shaping successful learning. Some are obvious, some seem obvious but are more difficult to realise. The approach and qualities which are needed to be able to facilitate informal learning can be learned by anyone who has a capacity for change. Participation in local learning experiences is training in itself for facilitation.

- a. **Sequencing:** in a workshop context, each of the elements described above needs to be addressed each day in a workshop context so the process is cumulative.
- b. **Preparation** is often more than a single event – its purpose is to build relationships and teamwork, establish an understanding of participant’s identities, and begin to build a shared vision.
- c. **Follow-up** can be done by different people in different ways, and does not necessarily need to involve only the original team. Since learning is for action, not for the sake of learning, follow-up should help to sustain action and change, and where possible should be focused on participants’ action within their own communities or organisations.

#### b) Approach and the “culture of facilitation”

An approach based on a culture of facilitation rather than on a philosophy of provision demonstrates some key characteristics in the way that learning experiences need to be shaped. The approach is participatory, and uses many of the techniques of participatory learning, but must avoid falling into the trap of “facipulation” or manipulation through facilitation. While there are objectives and a desired end point, there must also be recognition that people learn and change in their own way, based on their identity and previous experience, and that discussion and analysis of learning

and concepts may lead people in different directions. In follow up as well as during the learning itself, the facilitators do not control or “correct” participants.

***A culture of facilitation and learning experiences***<sup>vi</sup>

*Enabling learning from local action and response in order to promote action and change requires a culture of facilitation rather than intervention. While intervention tends to introduce external ideas and solutions, facilitation fosters the development of responses built on local understanding and local strengths. Facilitating learning from local action where it has already been effective, or sharing experiences as a way of overcoming obstacles allows participants to search out their own solutions based on their own capacity, and at the same time develops their capacity for action and change.*

Ways of working include:

- Participatory exercises are meaning based, and “icebreakers” and wake up exercises are meaning-based as far as possible.
- In a workshop setting, the process includes a constant reading of the group, re-evaluating where it is, where it is going and the pace. The participants influence the way in which a workshop progresses and its end result.

***Support and Learning Teams (SALTs)***<sup>viii</sup>

*In Zambia, a workshop on Human Capacity Development has led to the formation of a National Facilitation Team of twenty volunteers from government, NGOs, donors and people living with HIV/AIDS who have come together to learn and share experience with communities and organisations nationally. The Churches Health Association of Zambia (CHAZ) has been affirmed as the co-ordinating organisation, to work in partnership with UNAIDS Technical Network Development Unit. The National Facilitation team functions as a Support and Learning Team (SALT), in which members will respond to requests from communities and organisations within the country, and work with them to learn from local action and experience to extend and scale up the local responses to HIV to achieve national impact. The team itself is part of a dynamic process of change, and is itself a learning environment. While the team will help to stimulate a continual cycle of action and reflection on action with communities, it will also be going through this experience itself, constantly reflecting and learning from its own interaction and from the local responses it is helping to nurture and sustain.*

**Facilitation teams and how they work**

An ideal team, which can include anyone concerned about the epidemic and willing to work in this way, has a shared vision, and a shared understanding of ways to behave. This can be learned, given openness to learning and sharing.

Within team interactions, effective teams are able to:

- Share leadership
- Hold each other to account through creative criticism
- Maintain continual mutual briefing and de-briefing
- Be open to learning from others and willing to share this.

A team which is facilitating learning experiences with the objective of creating change in the response to HIV also needs some mutual qualities or approaches:

- A belief in the capacity of people which can be translated into trust of the participants (see below).

- An approach based on concepts and strengths rather than on pre-determined issues or subjects
- An approach that is community-driven rather than commodity-driven, and that relies on facilitation of responses rather than provision of services or commodities
- An appreciation of participatory ways of working
- An approach which is based on experience (both the team’s own and participants’ experience), and more than expertise
- A commitment to sharing ownership of processes and results.
- A commitment to human capacity development.

<b>Challenges and opportunities in a Support and Learning Team</b>	
<i>Challenges</i>	<i>Opportunities</i>
Do we think we bring in something which is “ours”?	Learning events clarify and expand best practice
Do we think we are “superior”?	People are encouraged to look at concepts and best practices
Are we a “full glass of tea” or do we have room to take in more?	Dynamic change is motivational – the team itself is something which is changing – this is a learning experience
Part of the challenge is the diversity of ways that people in different contexts understand and interpret experience and information We have to understand and hear as well as bringing in our own experiences	The team itself is a learning environment

**Trusting the group**

The facilitating team needs to demonstrate it trusts the group in order to make it possible for the participants to take over ownership of their learning, and take action in their own settings and with their own level of capacity. The group also needs to know that the team has confidence in:

- participants’ ability to reflect on experience rather than on a description of activities or pre-constructed answers based on theory, analysis of issues or statements of positions.
- participants’ ability to reflect on experience rather than rely on automatic answers. The facilitators need to be able to push until participants begin to analyse their own experiences in terms of core concepts and links with local action and response.
- participants’ ability to find a positive step forward. While obstacles need to be acknowledged, discussion and analysis are based on ways forward, not problems.

**In conclusion**

Learning from local experiences and responses, through a facilitated approach based on teamwork, core concepts and values, real life experiences and successes of communities which have responded, however imperfectly, must be the basis of ensuring that communities, organisations, individuals and countries reach a stage of HIV/AIDS competence. This is relevant for people within hierarchies and organisations as well as for communities, as it is an approach rather than an organisational structure, and can be applied in different settings. HIV/AIDS

competence means having the capacity to face the epidemic and to initiate change to address it successfully. Understanding of local responses by communities and organisations crosses cultural and contextual barriers and reveals universal core concepts which work. This opens up the possibility of scaling up across continents as well as within countries.

There are still some critical questions which need to be explored as experiences and processes are analysed and documented. For example, we need to understand the particular reasons why a national team such as the National Facilitation team in Zambia has the energy and commitment to follow up its formation, and what particular elements have created the circumstances in which this team has successfully started to operate.

It is clear in the experience so far documented and analysed, that local responses and local experience are the basis for a widespread and effective global response, and that learning based on this is not difficult or expensive. Moreover, it is self-sustaining through a facilitation process based on a belief in people's capacity to respond both as individuals and as members of a community or organisation.

It is an accepted truth that the response to HIV/AIDS so far has been inadequate. Currently, the notions of "scaling up" and "scaling out" are both topical. But it is essential to look more closely at what needs to be scaled up, and whether more provision of services which have been developed over the last 20 years will make a real difference. The assumption behind this paper on learning experiences is that while scaling up provision of services is needed, this alone will not lead to a breakthrough in tackling HIV/AIDS. The development and scaling out of human capacity to respond to HIV/AIDS is the missing link, and we need to address this urgently.

## Appendix

<b>PROTOCOL FOR FIELD EXPOSURE AS PART OF A NATIONAL CONSULTATION ON HUMAN CAPACITY DEVELOPMENT WORKSHOP, ZAMBIA 15TH – 19TH OCTOBER 2001</b>
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### PROCESS:

1. Teams of five are formed for briefing
2. There will be a local host to introduce the group
3. There will be a team facilitator (drawn from the working group) to coordinate briefings, the visit and the debriefing

### OBJECTIVES:

1. To encounter an experience of HIV in living situations
2. To draw out key concepts, relevant to response and to programme development
3. To characterize the facilitation team approach needed within the country to nurture the local responses
4. To reflect upon strategies for shared learning between local responses/districts, and for application approaches and tools within a country or region.

### GUIDELINES:

The purpose is not to evaluate, nor to look at activities primarily. The purpose is to share experiences and to explore meanings contained in the experiences of people in families and communities.

In order to explore during the visit, open questions can be asked, related to concerns, hopes, history and future.

It will not always be appropriate to ask questions at all, but sometimes to observe.

The group should meet together each day to reflect on the day. (The questions which follow are intended for use as a guide during this daily reflection).

### DAILY DEBRIEFING GUIDE

- What capacity/strengths have I seen today in terms of community, caring, positive change, loss, hope and future?

- What issues and questions have emerged for me today?
- What have been important ‘ways of working’?
- How have we needed to relate and ‘be’ in the situation, as visitors?
- How have we seen others working? (in what spirit, with what attitude, in what context)

END OF VISIT DISCUSSION GUIDE

- How has this been a learning experience for us (the visiting group)?
- How can this kind of process be developed to help expand and scale up local responses?
- What are the characteristics of the facilitation team approach needed to support the local response?
- What are some creative learning processes that can be developed to help expand/scale up the local responses?

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<sup>i</sup> Chris Collinson and Geoff Parcell, *Learning to Fly: Practical lessons from one of the world's leading knowledge companies*, Capstone, 2001

<sup>ii</sup> UNAIDS Technical Network Development Unit, *Draft Strategy Note*, October 2001

<sup>iii</sup> Rader, Alison, et al: *Zambia National Facilitation Team: a case study of a human capacity development initiative*

<sup>iv</sup> UK NGO AIDS Consortium: *Effective HIV/AIDS Activities: NGO work in developing countries. Report of the Collaborative Study*, 1996

<sup>v</sup> Campbell, Ian: *A short note on HIV/AIDS Competence*, draft, November 2001

<sup>vi</sup> A Culture of Facilitation, as a means of sustaining change and hope in responses to AIDS and HIV. Campbell, I; Rader, A; Moody, R;. 1998, The Salvation Army International Headquarters, London.

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*Further reading*

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