

Exploring the multidimensionality of scale: a study of the community action group for education initiative at Durga Bhagwati Rural Municipality

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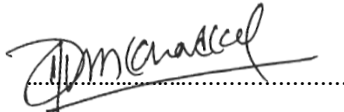
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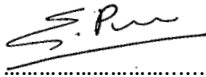
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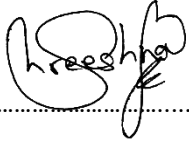


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Declaration

I hereby declare that the report entitled “Exploring the multidimensionality of scale: a study of the community action group for education initiative at Durga Bhagwati Rural Municipality” is my own work and has not been submitted to any academic institution for any other degree.



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September 2023

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Abstract

This paper explores the scalability of the intervention 'Campaigning through Action Group in five wards of the Durgabhagwati Rural Municipality of Rautahat. According to the policy of the Nepal Education System, every school should have at least one SMC and PTA. This has been limited to just implementation and has not been regulated or practiced in the district. In response, scaling science, an emerging paradigm, seeks to understand and address these issues.

The study assesses various aspects of scaling the intervention 'Campaigning Through Action Groups, including examining scaling strategies, evaluating institutional readiness for scaling, assessing adaptability to scaling, and aligning the intervention with four dynamic principles of scaling science: moral justification, inclusive coordination, optimal scale, and dynamic evaluation. Using the Scaling Strategy Worksheet, Institutionalization Tracker, and Adaptation Tracker as tools, in-depth interviews were conducted with the initiative's innovator and the leaders and members of action groups in each ward.

The study's findings highlight the intervention's potential for scalability by addressing the concept of education in the community and the existing gap between policy and practice in Rautahat's public schools. By promoting parental involvement and support in education, the intervention facilitates the improvement of education systems in schools. These crucial aspects enable effective alignment between policy and practical implementation, resulting in enhanced education systems and overall student development. Additionally, the intervention brings about a positive shift in the community's and parents' perception of education, leading to a decrease in the rate of student dropout.

The scientific perspective utilized in this study offers valuable insights for optimizing the scaling process in similar initiatives and ensuring optimal impact. Policymakers and education practitioners can benefit from this understanding to formulate strategies that not only scale interventions but also take into consideration societal values and guarantee their effectiveness in positively influencing students' overall development. As scaling science progresses, applying these principles to tackle the specific challenges of scaling social initiatives becomes vital for achieving lasting and meaningful impacts in the education sector.

Acknowledgement

This dissertation is a result of a Global Partnership for Education (GPE), Knowledge and Innovation Exchange (KIX), and International Development Center (IDRC)-funded project titled "Effectiveness and Scalability of Programs for Children Who Are Out of School and at Risk of Dropping Out in Bangladesh, Bhutan, and Nepal".

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Acronyms & Abbreviation

ESP	Effectiveness and Scalability of Programs
IDRC	International Development Research Centre
R4D	Research for Development
OOSC	Out of School Children
ECA	Extra Curricular Activities
MSI	Management Systems International
CUE	Centre of Universal Education
MoE	Ministry of Education
PTA	Parent Teacher Association
SMC	School Management Committee
NGO	Non-governmental Organization
INGO	International Non-governmental Organization
CSO	Civil Society Organizations
PAR	Participatory Action Research
NCED	National Centre for Education Development
FCHVs	Female Community Health Volunteers
WASH	Water, Sanitation and Hygiene

Introduction

1.1 Background

Scaling is concerned with the increase in both the numbers and the potential outcome of a program. Its meaning is contested, as different fields define it differently. In the field of social science, scaling means understanding how to position research results so that the solutions generated reach the people who can use them and, in a way, endorse them (McLean R, Gargani J, 2019). Till today, scaling is dominated by its meaning as 'Scaling Up.' In the domain of social science, scaling up for social change has been inspired by nineteenth-century industrial expansion, twentieth-century pharmaceutical regulation, and twenty-first-century technology. This is the process of expanding the size, scope, or impact of a specific intervention, solution, or system.

The concept of scaling is not a newly developed concept; rather, it has been in use for quite some time and has evolved with changes in its application and significance in various sectors over the course of time. Scaling was traditionally defined as transitioning from a small scale to a larger scale. Scaling originated historically with advances in manufacturing, machinery, and transportation during the Industrial Revolution, which enabled mass production and distribution of goods on a larger scale. whereas scaling is a relatively new and emerging concept in the social sector. Scaling is considered a 'science' because it is a systematic, principle-based process to improve the effectiveness of innovations. The need to address large-scale social and environmental challenges has been recognized by organizations and initiatives, which has resulted in an increased emphasis on scaling interventions and strategies that are proving effective in the sector of social science.

The International Development Research Centre (IDRC) is one such organization that has aimed to develop a scientific approach to scaling. Scaling science is a critical paradigm for understanding and determining the impact of any research or innovation for societal benefit. IDRC promotes scaling science to encourage researchers and practitioners to use research for development (R4D) when scaling an innovation, based on the scaling science guiding principles of moral justification, inclusive coordination, optimal impact, and dynamic evaluation. This research is part of the Global Partnership for Education Knowledge and Innovation Exchange (GPE KIX) and IDRC project "Effectiveness and Scalability of Programs for Children Who Are Out of School and at Risk of Dropping Out in Bangladesh, Bhutan, and Nepal," with Kathmandu University School of Arts serving as the lead institution. The project examines and evaluates the impact of two interventions, namely, educational campaigns and after-school programs, to gather evidence on what is effective and

what fails to work, including practices, methods, and tools used to identify out-of-school children and those at risk of dropping out. Furthermore, it contributes to a better understanding of how these educational programs work and the factors that influence their success, cost-effectiveness, and scalability.

One of the interventions under this research is 'Campaign Through Action Groups: Enhancing Inclusive Access to Public Schools for OOSC and Children at Risk of Dropping Out'. This study aims to explore and understand the dynamics of the guiding principles that govern the scaling process for the intervention 'Campaign Through Action Groups'. By exploring the intervention through the lens of these guiding principles, the research has attempted to discover the factors that contribute to the successful scaling of this intervention, considering aspects like effectiveness, efficiency, and sustainability.

The study intends to assess the institution's capacity and preparedness for scaling the intervention through an in-depth analysis of its readiness. This analysis has looked at a variety of factors, such as organizational structures, resource allocation, and stakeholder engagement, to determine the institution's ability to support the intervention's expansion. Furthermore, the study has been intended to assess the institution's adaptability to scaling 'Action Group' as an intervention. It has investigated the institution's ability to adjust its policies, processes, and practices to accommodate the increased scope and impact of the intervention, ensuring that it remains responsive to the target population's evolving needs and dynamics.

Moreover, by addressing these objectives, this research has aimed to provide valuable insights and recommendations for scaling the intervention 'Campaign Through Action Groups,' thereby contributing to the improvement of educational opportunities and outcomes for students as well as improving parental involvement and interest in education. This intervention has also sought to improve midday meals for children along with parental involvement in the education system, following the policy of at least one SMC or PTA in each school.

1.2 Problem Statement

These days, there is a lot of investment and research being done in the development sector around the world. Small programs are run as pilots with positive outcomes where the innovator identifies potential challenges, output, and positive outcomes, but when the same program is scaled up, it fails. As a result, there is a problem with investment misallocation, development collapse, and energy and resource depletion. The outcomes of any program are considered more important than the process, which is as important as the outcomes themselves. The replications of better and more successful programs are not being done and are not scaled as well. Pilot programs are always successful, but they are not the ultimate solution to problems. In the end, a revised notion of scaling is required.

The pilot programs do not take into account the genuine needs and requirements of the grassroots community that they intend to serve for an extended period. As a result, these studies frequently fall short of effectively addressing real-world issues. Furthermore, most research efforts are limited in scope and funding, emphasizing short-term outcomes rather than long-term sustainability, retention, and effectiveness. This limited investment makes it difficult for potential interventions to have a long-term impact.

When interventions are scaled up, in most cases the process of scaling is not comprehensive. Hence, lack of proper justification and coordination is frequently seen when scaling up an intervention. The decision to scale is made without conducting preliminary assessments to determine the institutions' readiness, which is the crucial support system while scaling an intervention. This oversight overlooks critical factors such as organizational structures, resource allocation, and stakeholder engagement, all of which are critical for scaling efforts to succeed. Scaling interventions becomes difficult without considering institutional readiness, as the necessary support systems may be lacking. Along with institutional readiness, there is a need to assess the adaptability of interventions against existing policies, practices, and partnerships. By ignoring this evaluation, the intervention's capacity to align with the larger picture and the necessities of the community is hampered. Without such alignment, interventions may face resistance, implementation difficulties, or failure to function effectively with the existing systems.

These drawbacks can be remedied by conducting more comprehensive and community-centered research. This strategy would entail active engagement with grassroots communities, recognizing their specific requirements, and creating interventions to effectively address those needs. Furthermore, scaling efforts need to be accompanied by comprehensive assessments of institutional readiness and adaptability, ensuring that the necessary structures, policies, and partnerships are in place for successful implementation and long-term impact. By taking these considerations into account, research and scaling efforts can be better aligned with community needs, resulting in more impactful and sustainable outcomes. The purpose of this study is to provide a clear guideline for future innovators looking to scale their innovations, highlighting the critical aspects to consider before, during, and after the scaling process.

1.3 Objectives

- To examine the readiness of the institutions for scaling the intervention 'Community Action Group' targeting OOSC.
- To check the adaptability of the institution for scaling the Community Action Group' targeting OOSC.
- To evaluate the intervention 'Community Action Group' within the ESP Project using the four guiding principles of scaling

1.4 Research Questions

These three research questions have been developed in response to the objectives stated above.

- How prepared are the institutions for the intervention that needs to be scaled?
- How adaptable are the institutions in terms of scaling the intervention?
- How does the intervention synchronize with the four guiding principles of scaling?

1.5 Significance of the Study

This study sought to comprehend the scaling strategy and goal as well as determine whether the proposed initiative is progressing toward the intervention's goal. The evaluation of this can help to understand the scaling bases and how scaling decisions are made using the scaling paradigm. This study also attempted to assess the progress and components of institutionalization and plan actions to strengthen and advance institutionalization efforts. This will aid in understanding an institution's preparedness and readiness for the initiative. Furthermore, the research attempted to comprehend the institutions' adaptability for scaling the intervention. The research attempted to check the synchronization of the intervention with four scaling guiding principles through the analysis section. This research is expected to assist practitioners, innovators, educators, and investors in understanding and working thoroughly while developing an intervention or investing in a development project. Furthermore, the current data collected is presented in this research, which can aid in policy changes and encourage positive changes.

1.6 Limitations of the Study

The research was meticulously carried out and implemented to obtain the most reliable analysis; however, the study had some limitations. The following are some limitations:

- The research tools were already available, and the research was done based on those tools; however, only limited questions have been utilized.
- Due to the limitations of the tools employed for data collection, many different cultural, social, and other aspects weren't fully captured.
- The major limitation faced during the whole research was the language barrier, as most of the respondents spoke Bajika, which made it hard for them to understand the questions asked in Nepali.
- Also, as the concept of scaling is new and emerging, it is limited in itself, which resulted in limitations in the research.

Literature Review

This chapter provides an overview of research articles, reports, and other literature relevant to the research topic. This chapter is divided into six themes: the concept of scaling, antecedents, scaling impact, guiding principles, theory of change, and conceptual framework. The following information has been cited in two major works by Robert Mclean and John Gargani: The first Stanford Social Innovation Review was published in 2017; the second, 'Scaling Impact: Innovation for the Public Good, was published in 2019.

2.1 Concept of Scaling

In simpler terms, scaling science is the whole process of identifying the impact and outcome of a project or intervention. The term "scaling science" intentionally encompasses two meanings. The first meaning states that scaling scientific research results in optimized impacts, implying that scaling research impacts is for the public good. Research is broadly defined as the origin of innovation. This process generates solutions to difficult problems. According to this viewpoint, researchers are innovators, and innovators are researchers. The second meaning, on the other hand, refers to the development of a systematic, principle-based scaling science that can increase the likelihood that innovations will benefit society. All scaling approaches should be carefully considered, tested, refined, and implemented. Scaling means understanding how to position research results so that the solutions generated reach the people who can use them and, in a way, endorse them (McLean R, Gargani J, 2019).

Scaling has long been misunderstood as simply increasing resources, i.e., scaling up interventions. Scaling is much more than just resource allocation or scaling up. There are various unseen sides to scaling science. It can also be related to expansion. The scaling process can vary depending on the intended impact. Scaling up, scaling out, and scaling deep are three processes of scaling, where scaling up refers to increasing efficiency; scaling out refers to the process of increasing the number of sites or opportunities; and scaling deep can simply be presented as an enhancement. These scaling processes will be discussed further in this paper.

The emergence of scaling science for social impact was sparked by the Ebola virus in early 2014, when West Africa suffered greatly as a result of a catastrophic outbreak. Despite the fact that the Ebola virus was not a new outbreak, it took two years to control it, and considerably more individuals were killed due to it than any other comparable outbreak due to a lack of pre-existing scientific solutions and weak institutions to eradicate the outbreak. This means there are insufficient reliable

solutions to scale vaccine production and distribution. In this context, the term scale is associated with expanding and outcomes. Scale, on the other hand, considers both growth and reversion and prioritizes the process and the impact. Scaling refers to the process of implementing innovative interventions that are justified by community needs in order to achieve maximum impact and benefits. Throughout this outbreak, a Canadian organization called the International Development Research Centre (IDRC) supported the inventions of social and natural scientists in the Global South, where the development and distribution of a new Ebola vaccine were fought with consistent support. Here, scaling with a solid evidence base and coordination has contributed to a novel way of ending the Ebola crisis.

Scaling is dependent on 'research and innovation' in cases like the Ebola outbreak. Scaling science arose as a result of the growing popularity of research for development (R4D). R4D refers to conducting applied research with positive outcomes. It seeks to achieve impacts that promote development through discovery science or applied science. Why isn't scaling science used as a tool? This aims to have profound effects on people and the environment while also contributing to a larger system of development change.

2.2 Antecedent Events

2.2.1 Traditional Scaling Paradigms

Traditionally, scaling has always focused on the increase in numbers. Scaling up social change was inspired by nineteenth-century industrial expansion, twentieth-century pharmaceutical regulation, and twenty-first-century technology, which reflect an old mindset in which organizations are scaled up rather than down, where scaling up is proof of success and an absolute requirement. The notion of 'bigger is better' is presented by a traditional scaling approach, where the main goal of scaling is commercial success. The idea of scaling has been changing and improving through the centuries, and modern scaling paradigms are emerging. The concept of scaling an innovation has existed since the 19th century's industrialization period, when scalability was defined as the ability to grow in size and number while lowering costs. This concept of traditional scaling paradigms has been passed down through time in the form of industrial scaling, pharmaceutical production rights, and lean scaling paradigms that are targeted at the need for rapid growth in a competitive capitalist economy.

The traditional approach consists of three scaling paradigms.

- **Industrial Scaling Paradigm**

The industrial scaling paradigm prioritizes growth and market share. It is more concerned with the need for a large number of standardized physical objects to be produced and distributed at a low cost. It is more focused on the output. Scaling is interpreted as expansion in this paradigm. For example, consider the global expansion of any business, let's say KFC. In this case, the ultimate definition of scaling is the globalization of KFC. Connecting this paradigm to social science, scaling up here refers to the allocation of resources for increased market share without regard for whether or not it is required.

- **Pharmaceutical scaling paradigm:**

The pharmaceutical scaling paradigm is a more limited, controlled, and organized paradigm. This paradigm is more concerned with authority involvement. After recognizing the market, the authority determines the scale, and resources are allocated accordingly. This paradigm does not allow for learning.

- **Lean Scaling Paradigm:**

The lean scaling paradigm was developed in response to the need to grow quickly in a competitive market. It is a learning process that focuses on understanding the market through customers and then scaling resources based on needs and demands.

Scaling is equated with and concentrated on growth and expansion through numerical increments in all three scaling paradigms. They can all be applied to social impact; however, a more complex approach with a focus on public good should be the goal for their application in social science. In the twenty-first century, the applicability of scalability to the social sector is gradually being studied, not only to scale up and grow but also to increase and deepen the benefits for people in order to have a positive impact.

2.3 Scaling Impact

Scaling impact is a coordinated effort to achieve a collection of impacts at an optimal scale that occurs if it is both morally justified and warranted by the dynamic evaluation of evidence (Scaling Playbook). The phenomenon of scaling impact describes how an action or process becomes more effective or efficient as it is applied on a larger scale. Scaling impact, in other words, refers to the positive outcomes that can be obtained when an effective approach, idea, or initiative is replicated or expanded to cater to a larger audience. The scaling impacts of an intervention influence scaling science. Impacts are changes that are observed directly or indirectly and experienced as an outcome or at various levels of intervention.

The traditional scaling idea of 'more is better' is rejected by scaling impact. It bases the scaling process on moral justification and encourages optimal impact through collaborative efforts. Furthermore, the entire scaling process must be evaluated dynamically with evidence. Thus, the scaling impact includes scaling science's four guiding principles: moral justification, coordination, optimal scale, and dynamic evaluation.

There are three kinds of scaling processes that can differ according to the intended impact of an intervention. The following illustrated figures and examples of bush and rose have been used to briefly describe the various types of scaling processes that have been extracted by 'Scaling Playbook'.

- **Scaling up:**

Scaling up produces more in the same amount of space, i.e., increasing efficiency. Here, Figure 1 presents how one bush, when scaled up, becomes bigger in size and output in the same given area.

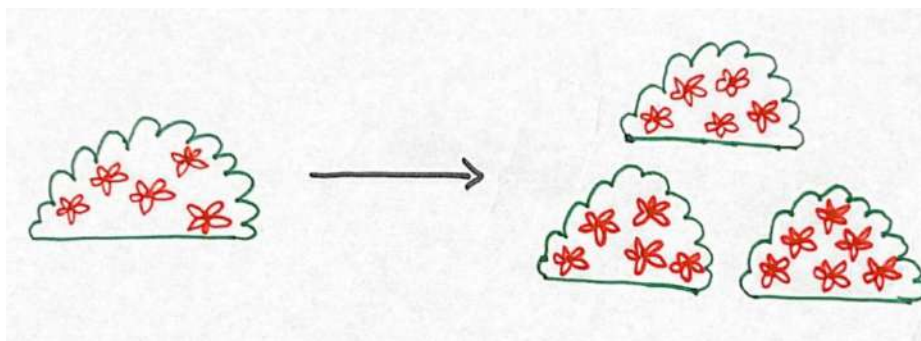
Figure 2.1 Scaling up: from a small bush with fewer flowers to a bigger bush with more flowers



- **Scaling out:**

Scaling out broadens geographical coverage, affecting a larger number of people. It focuses on expanding the scope of the intervention. Here, Figure 2 represents the idea of scaling out, where when the same brush is scaled out into a larger or wider area, it increases the output, i.e., it produces more flowers.

Figure 2.2 Scaling out: From one bush with fewer flowers to more bushes with more flowers



- **Scaling deep:**

Scaling deep enhances an intervention. It improves the quality and depth. Figure 3 represents scaling deep, where there is enhancement in the output represented by the change in size of the flowers. Scaling deep doesn't focus on quantity but instead on the quality of the output.

Figure 2.3 One bush: same-sized bush enhanced flowers



2.4 Guiding Principles of Scaling Science

According to Robert Mclean and John Gargani, scaling science is based on four guiding principles that assist innovators in exploring the path from ideas to impacts.

It is critical for innovators to address these principles in order to avoid obscuring the main goal of organizational growth. These principles inspire innovation, originality, and structured risk-taking to understand the scaling impact.

2.4.1 Moral Justification

According to moral justification, scaling is controlled by and for those who are affected by it. Scaling is not required for every intervention program. Before proceeding, the scale must be justified. Justification is based on sensible scaling, which starts with values and the question, "Why scale? "Who makes the decision?" and "What kind of scaling should be used? "Is the intervention deep, medium, or light in scope?". The promise of effectiveness is then balanced against the risk of impact. According to this principle, the issues are ethical. Moral justification encourages innovators to justify scaling by answering questions like, 'Is replication appropriate and liable?' with evidence-based effectiveness. An innovator must meet the scaling criterion by determining whether the scaling is within 'acceptable impact risk'. The impact risk assesses the level from low to high in relation to the size of the scale. It also considers factors such as the level of risk, the urgency of the problem, the cost of failure, the diversity of perspectives, the availability of competing solutions, and the likelihood of negative consequences.

Furthermore, it justifies scaling based on whether or not the innovation is effective. This serves as evidence for an innovator to demonstrate the need for or sufficiency of scaling the innovation. Justification incorporates both technical and moral considerations. Because it can produce specific effects, technical justification enables innovators to scale. This is insufficient because just because an innovator is capable of doing something does not mean they should. Combining morality ensures the importance of scaling innovation while taking into account both values and evidence that it should have an impact. When justifying scaling an innovation, innovators must ensure three rationales: the scaling decision must be justified and within acceptable impact risk; the scaling decision must align with personal values and be supported by evidence; and the scaling decision should be made by both innovators and directly impacted people. Only after these justifications are considered can innovation be scaled.

2.4.2 Optimal Scale

This principle implies that implementing innovation in the most effective and efficient manner will aid in maximizing the impact of an initiative, resulting in optimal impact. This fundamental calls into question the notion that solutions to any social or environmental problem are dictated by the expression bigger is better. It implies that more is not always necessarily better. Optimality considers trade-offs and seeks to optimize rather than maximize scale. The issues are judgmental in this context. It emphasizes three major ideas for guiding innovators to understand the optimal scale of their innovation. Firstly, optimality refers to the level of impact that should be achieved and scaled, as well as how we can measure the impact and how it should be measured. Second, it necessitates careful consideration and comprehension of the collective effects of scaling. Finally, innovators must critically address the four dimensions of change: magnitude, variety, equity, and sustainability. These

dimensions help to determine why the scaling decision, such as what, how, when, where, and why, is being used and included.

- **Magnitude**

Magnitude describes the amount of impact produced, which may include the average size or quality of impacts, the number of people who benefit or are harmed, and the importance, value, or merit of impacts as determined by stakeholders as a whole. Magnitude is the statistical information of an intervention that includes factors such as the number of people involved, the number of people affected, the extent to which the people are affected, and the overall geographical coverage of the innovation. It answers questions like, "How much or how many differences is it making?" and "How much impact will the intervention create?"

- **Variety**

Variety refers to the various variables within an innovation, such as the various impacts of the innovation, how diverse the impacts are, which may include the number of different impacts that are produced, the number of levels at which an impact is created (individual, community, and societal), the number of independent ways that an innovation creates the same impact, and the range of contexts in which the innovation is effective. It clarifies concerns like, "What is the range of impacts (health, economic), and which kinds are counted? (Socioeconomic, Economic, and Environmental): "Will there be different kinds of impacts?"

- **Equity**

Equity refers to the fairness with which the impact is distributed. This dimension assists innovators in identifying unequal access, discontinuing unequal practices, and producing an equitable impact that benefits everyone. It sheds light on how impacts are distributed fairly, which may include prioritizing access based on need, which shall not replicate or contribute to existing inequalities (gender, wealth, race, and ethnicity), ensuring that one group does not benefit while another is unfairly harmed, and balancing the benefits and harm experienced by individuals in ways that they consider acceptable.

- **Sustainability**

The duration of an innovation's impacts, the time it takes for the innovation to become ineffective, and how much effort and planning are required for an innovation to continue long-term are all examples of sustainability. Sustainability seeks to determine how long impacts last, which may include the duration of impacts felt by people, places, or things, the length of time that is required for an effort to create an impact that can be sustained, and the period during which competing forces (antibiotic resistance, market forces, and social norms) have yet to cause an innovation to be ineffective.

2.4.3 Inclusive coordination

The need to plan and adapt for the many actors involved in bringing impact to scale is referred to as coordination. This principle serves as a reminder to researchers that scaling occurs in complex systems and that complexity necessitates a flexible scaling process. It is critical for innovators to understand the importance of connecting with those who will be impacted by the innovation as well as the actors who will enable scaling. When coordinating efforts, it is critical to recognize the multidimensionality of factors affected by scaling, such as people and places, and that each serves a distinct purpose in the process. Coordination is not always easy because various obstacles arise while working towards it. Undirected coordination can be successful in cases where different actors work independently but form a holistically organized system. The innovators ought to comprehend that a project is highly unlikely to succeed without the participation of various actors, each serving their own purpose. Coordination entails researchers taking into account a broader range of initiators, enablers, competitors, and impacted parties. These groups may influence or be influenced by scaling in ways that alter intended outcomes.

- **Initiators**

Initiators are those who are new to the scaling process. They are essentially people, places, and things that enable a change in scale to begin. They can be innovators, researchers, funders or investors, determined community members, committed government officials, or experts. Before scaling begins, these actors will have already permitted and accepted the innovation.

- **Enablers**

Enablers facilitate the scaling process. They can be people, places, or both. Policymakers, government agencies, the community, professionals, schools, and service providers are some examples of enablers. Enablers in this intervention include teachers, principals, students, ward officers, parents, and so on.

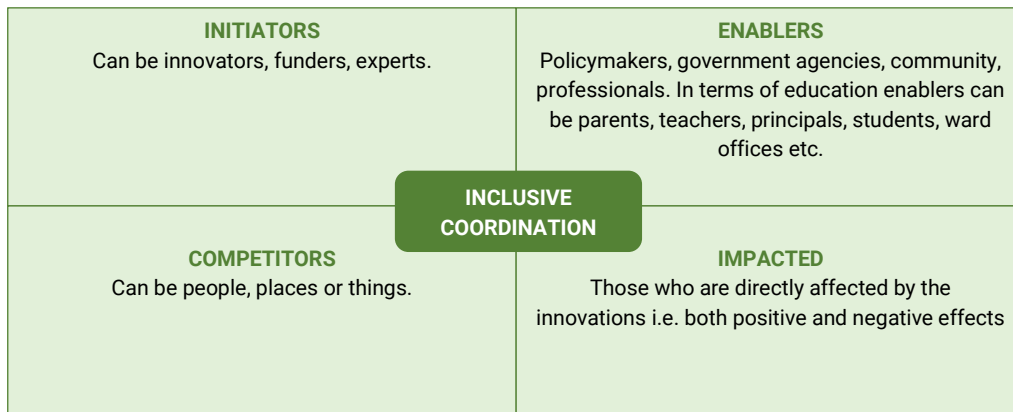
- **Competitors**

Competitors are the alternatives to scaling innovation that can be people, places, or things that, in combination, assist in providing more efficient or effective ideas that can benefit them as well as valuable insight into optimizing and enhancing the scaling process.

- **Impacted**

Impacted are the ones who experience the positive and negative results of scaling. They are directly affected by the innovations, which can have both benefits and detriments.

Figure 2.4 Actors for Coordination



2.4.4 Dynamic Evaluation

A dynamic evaluation is one that is performed before, after, and during scaling. It is a process of continuous learning and evaluation in which scaling is an intervention. It assesses the collective impact of scaling as an intervention. There is no fixed guideline for evaluating dynamic evaluation. The guideline itself is dynamic and dependent on how the scaling process proceeds. Scaling science employs the principle of dynamic evaluation to accommodate impacts that may be weaker, stronger, or qualitatively different in response to a variety of actions and scaling effects. Dynamic evaluation is based on evaluating the benefit to the impacted, worth, and significance of the innovation while ignoring the limitations of traditional evaluation tools, which primarily focus on understanding the impact of the innovation and are insufficient to understand how the impact changes if that innovation is scaled. It assesses the impact of innovation at various stages of the scaling process as well as directly observes the scaling impact.

The primary goal of dynamic evaluation is to continuously compare the scaling impact to the scaling action in order to calculate the outcome. It contributes to the process of producing an optimal impact by assisting involved actors in continuously understanding the scaling effects throughout various processes, which can be accomplished through constant measurement of the scaling effects by the concerned parties. It must be applied in such a way that the ever-changing nature of scaling actions and their effects are not only accepted but also questioned at various levels of scaling processes. Scaling effects are an important aspect of dynamic evaluation, so they must be monitored on a regular basis to distinguish whether the impacts produced are the result of the scaling action or external factors indirectly related to the innovation.

As scaling progresses, the optimality of scaling's impact may change. Dynamic evaluation aids in understanding the constantly changing optimal scale and better guides the scaling process. Dynamic evaluation rejects a linear view of change in favor of continuous evaluation, asking not only if it works but why and under what conditions it works. The emphasis on scaling dynamism then propels the standard realist assessment forward. Innovators can use dynamic evaluation to question and re-question how the scaling process can augment impacts in new contexts and over time. It can be applied to all social processes, particularly wicked, messy, and complex problems. The issues in dynamic evaluation are paradigmatic.

2.5 Scaling Theory of Change

Scaling science seeks to create a new approach to developing a theory of change (a standard component of evaluation and program design) to help innovators put four principles into action, which is referred to as the 'scaling theory of change'. The traditional theory of change, or program theory of change, explains how a program is expected to have an impact at a given scale, whereas the scaling theory of change, on the other hand, explains how scaling is expected to change the way a program achieves impact as it scales. The scaling theory of change does not contradict the traditional theory of change; rather, it complements it. It aims to achieve the dynamism of innovation. The scaling theory of change is made up of three components: a path to scale, a response to scale, and partners to scale, each of which is a key component in any scaling program.

2.5.1 Three components of the scaling theory of change

2.5.1.1 Path to Scale

The path to scale is the series of stages that an innovation is expected to go through as it scales. A path may begin with the generation of a promising idea that may result in a solution, followed by the development of the knowledge to implement the idea, the application of the knowledge to take action, and finally the expansion of action to achieve impact at scale.

2.5.1.2 Response to scale

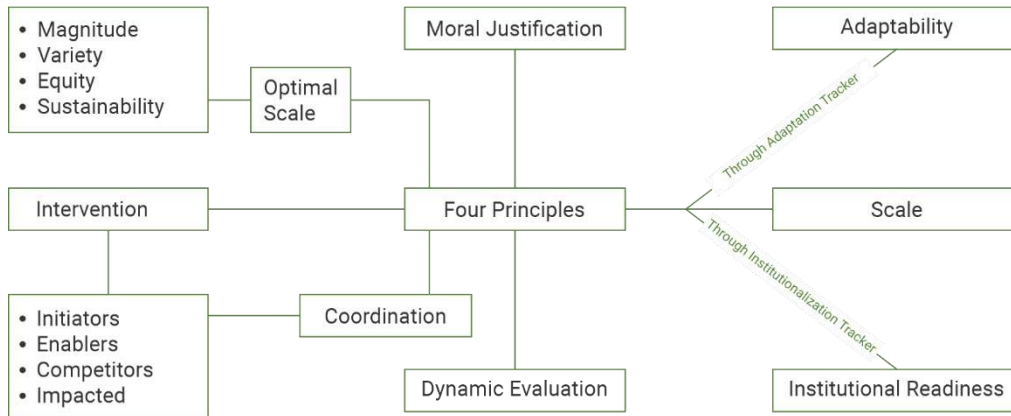
The response to scale is an explicit statement of how the impact is expected to change as the solution scales. Changes in the magnitude, quality, and type of impact are possible.

2.5.1.3 Partners for scale

Partners for scaling often have intricate arrangements and roles involved in scaling a solution. Coordination is essential when two groups of partners collaborate on research and development as well as implementing and scaling innovation.

2.6 Conceptual Framework

Figure 2.5 Conceptual Framework of Scalability



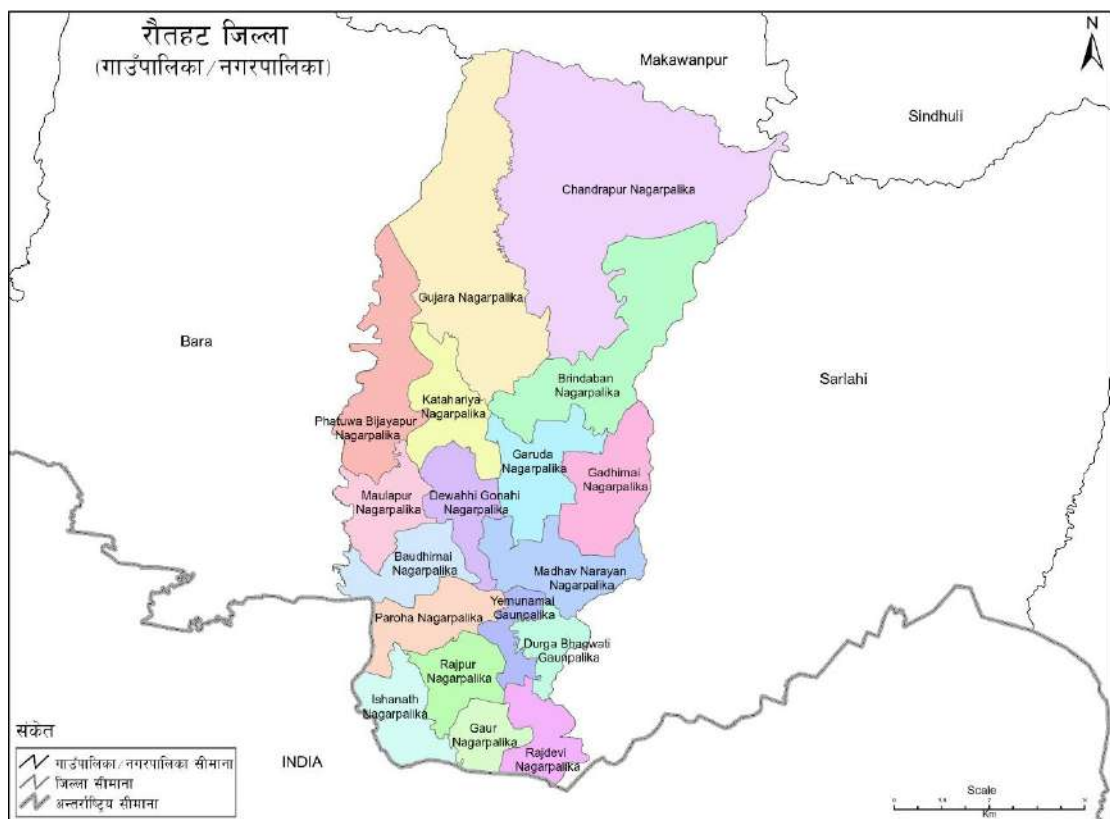
The figure above illustrates the connection between the guiding principles of scaling and the tools used in the intervention. The process begins with assessing whether scaling is morally justified and determining the optimal scale based on four dimensions: magnitude, sustainability, equity, and variety. Inclusive coordination involves engaging with initiators, enablers, competitors, and the impacted throughout the scaling process. As for the engagement of the initiators, enablers, competitors, and impacted for inclusive coordination, it occurs prior to starting the intervention as well as during the scaling process.

Finally, as the intervention is scaled, dynamic evaluation ensures continuous learning. Three tools are used to examine the guiding principles: the Scaling Strategy Worksheet, the Institutionalization Tracker, and the Adaptation Tracker. The Scaling Strategy Worksheet aids in determining the scalability of the intervention, whereas the latter two tools provide more detailed information for a better understanding of the intervention. It is important to note that the relationship between the variables is not linear, implying that complexity and dynamic interactions may exist.

Methodology

This study was primarily an output of the "Effectiveness and Scalability of Programs for Children Who Are Out of School and at Risk of Dropping Out in Bangladesh, Bhutan, and Nepal" project carried out at the Learning Innovation and Knowledge Exchange lab. The project consists of two interventions. I) Campaign through action groups to enhance inclusive access to public schools for OOSC and children at risk of dropping out, and II) ECA after school. This research looks at 'Intervention I: Campaign through Action Groups Enhancing Inclusive Access to Public Schools for OOSC and Children at Risk of Dropping Out.

Figure 3.1: Map of Rautahat District



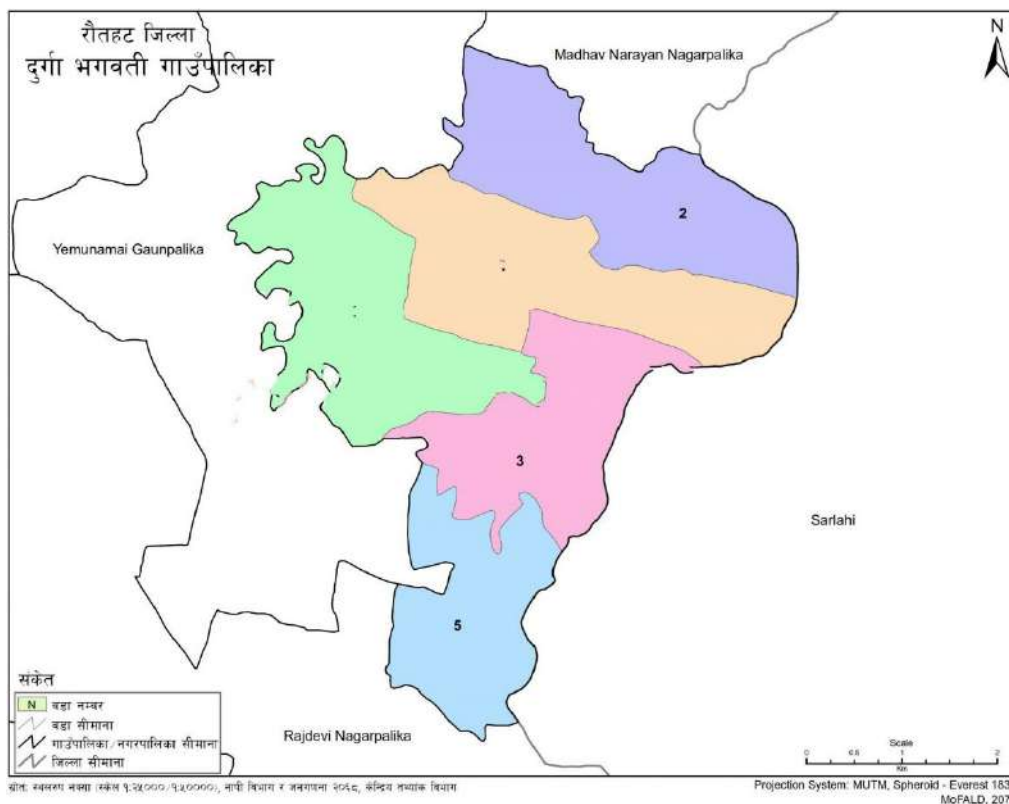
संकेत: गाउँपालिका/नगरपालिका सीमाना, जिल्ला सीमाना, अन्तर्राष्ट्रिय सीमाना
 Projection System: MUTM, Spheroid - Everest 1830 MOFALD, 2074

3.1 Study Site

This research looks after 'Intervention I: Campaign through action groups enhancing inclusive access to public schools for OOSC and children at risk of dropping out, which is centered in Rautahat district, Nepal, which is one of Nepal's 77 districts and is located in Narayan zone, Madhesh province. It is located in the southern part of the country, surrounded by Sarlahi district in the east, Bara district in the west, Chitwan district in the north, and the Indian state of Bihar to the south. Gaur is the headquarters of the Rautahat district. The total area of the district is 1,126 kilometers square. In total, there are 16 municipalities and two rural municipalities ("Nepal Tourism Hub," 2018).

This study is based in one of the rural municipalities of Rautahat, Durgabhagwati Rural Municipality. The Durgabhagwati rural municipality was established in 2016, encompassing the current five wards of Gangapipara, Bhalohiya, Matsari, Pachrukhi, and Badharwa. It covers an area of 19.80 km² with a total population of 22,599 ("Wikipedia", 2018). This rural municipality has two secondary schools, 12 primary schools, and one *madarasha*.

Figure 3.2 Map of Durgabhagwati Rural Municipality



3.2 Research Design

A mixed research design is used in this study, which includes both qualitative and quantitative research methods. A scaling strategy worksheet and an adaptation tracker are used to collect qualitative data, while for quantitative data, an

institutionalization tracker is used. In-depth interviews with innovators were conducted, as well as with five action groups from each ward.

3.3 Data Collection

This report's primary data was gathered using three scaling tools: a scaling strategy worksheet, an institutionalization tracker, and an adaptation tracker. Through the guidance of these tools, in-depth interviews were conducted where data was collected from the innovator of the initiative and other stakeholders. On the other hand, secondary data were gathered through a variety of literature reviews, including articles, blogs, reports, and books.

3.4 Sample Selection

Data obtained from initiators of the intervention was used to guide the scaling strategy component of the study. The institutionalization tracker was utilized during Intervention I, which had five respondents (community action group leaders) from each ward of the Durgabhagwati Rural Municipality. Finally, the key respondent for the adaptation tracker was the intervention's innovator.

3.5 Data Analysis Tools

3.5.1 Scaling Strategy Worksheet

The Scaling Strategy Worksheet is a tool that helps initiators plan the scaling process of their initiative as well as analyze its scalability. This tool is based on the "Scaling Plan Template," which was originally developed by Management Systems International (MSI) and later adapted to education by the Center for Universal Education (CUE). Later in July 2021, the tool was developed by Molly Curtiss Wyss, Patrick Hannahan, and Jenny Perlman Robinson under the Center for Universal Education (CUE). The tool's primary users are practitioners, policymakers, and funders, who are the contributors to scaling the initiative.

The scaling strategy worksheet investigates various aspects of the initiative to assist innovators in better understanding the initiative's capacity to scale and receiving updates on new variables, changes, or data. There are various elements within the Scaling Strategy Worksheet that are mentioned in the figure presented below. The scaling strategy worksheet should be the result of the collective thinking of the scaling process's key actors. The participation of various actors and stakeholders in the scaling process varies depending on the level of scaling, the stage of the initiative, and the context in which it operates. Developing and mastering a scaling strategy is an ongoing process that requires gathering information from discussions, experience, and existing data with stakeholders, as well as political economy analysis.

This tool in this study assisted in evaluating the scalability of the initiative 'Community Action Group' by understanding the scalability goal, problem recognition, funding and resource sustainability, enabler support, inclusion integration, and alignment with policies and local culture.

Figure 3.3 Elements of the Scaling Strategy Worksheet



3.5.2 Institutionalization Tracker

The Institutionalization Tracker is a tool for tracking the progress of efforts to institutionalize or mainstream an initiative within a formal education system (CUE, 2021). Molly Curtiss Wyss, Patrick Hannahan, and Jenny Perlman Robinson developed the Institutionalization Tracker in July 2021 with assistance from Real-time Scaling Lab partners, advisory group members, interns, and other coworkers.

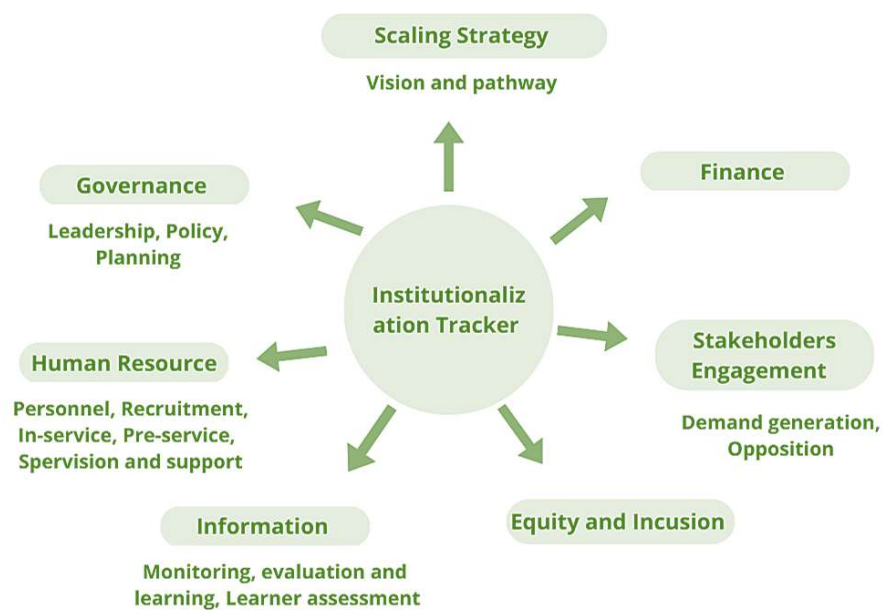
Institutionalization Tracker is used as one of the methods of scaling impact in education, also known as "vertical scaling. It is the process by which an initiative or components of an initiative are integrated into the formal education system and are led and sustained by government actors. The tool's ultimate goal is for the initiative to become part of the government's policies, plans, procedures, budgets, and daily activities so that it is no longer branded separately and effectively "disappears" into the broader system, thereby ensuring its long-term sustainability.

This tool aims to assess the integration of a new educational initiative into the existing educational system. It is intended to be a dynamic planning tool for implementers, policymakers, and funders to identify and address areas in the vertical scaling process that require additional attention. The tool is organized by educational system building blocks, where each component is further subdivided into specific elements. A figure depicts the education system building blocks as well as the subdivided elements. Each element has its own set of criteria that should be taken into account when scoring. The score is based on a scale of 1 to 4, with 1 representing "low institutionalization" and 4 representing "full institutionalization." It is important to remember that the amount of progress required to move from a score of

3 to 4 is usually much greater than the amount of progress required to move from 1 to 2. It is important for one to comprehend that the amount of advancement required for a transition from a score of 3 to 4 is generally much greater than the amount of advancement required to shift from a score of 1 to 2.

This tool evaluates the progress of institutionalization efforts within a single ministry, specifically the Ministry of Education (MoE). In a decentralized system, this tool aims to track progress toward national-level institutionalization, but it can also track institutionalization for the appropriate sub-national education authorities. This tool should be used in conjunction with a resource such as the Center for Universal Education's (CUE) "Scaling Strategy Worksheet" to inform the development and/or refinement of a broader scaling strategy. As a result, both tools—scaling strategy and institutionalization trackers—are linked.

Figure 3.4 Elements of the Institutionalization Tracker



3.5.3 Adaptation Tracker

Adaptation Tracker is a tool designed to help education actors in the process of scaling an initiative plan for, document, and learn from adaptations made to the model and/or the scaling approach during implementations (CUE, 2021). This tool aims to help practitioners plan and document adaptations regularly, as part of an ongoing learning cycle, to strengthen efforts to scale and sustain education initiatives. This tool should be used simultaneously with a more extensive scaling strategy or theory of change.

Individuals and organizations can use this tool to broaden and deepen the impact of their initiatives by following the cycles outlined below.

- **Identity**: Identify key challenges or opportunities and develop plans to test the adaptations.

- **Plan:** Implement those adaptations and collect related data.
- **Test:** Document spontaneous or unplanned changes taking place.
- **Reflect:** Reflect upon the results and make decisions accordingly.

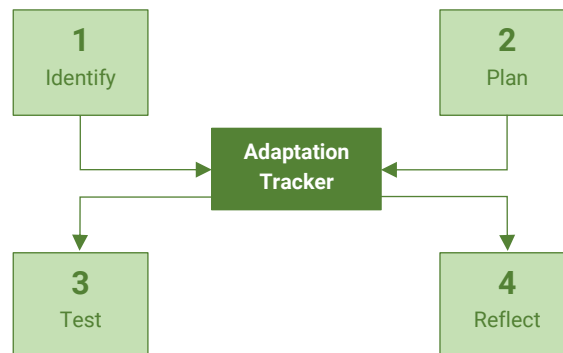
Individuals ought to check the tool at various stages of the continuous learning cycle. The length of these cycles depends on the adaptations being tested, the measurements collected, and the stage of the process (early testing of an idea may be faster than later refinements). However, the cycles must be short enough so that the collected data remains accurate, relevant, and useful for swift comprehension and decision-making.

At the beginning, the overall scaling goal for the initiative should be identified, and the major scaling driver should be determined. After the scaling drivers are decided, this tool can be used to assess related challenges or opportunities and plan actions in response to them. The next cycle is testing the planned adaptations during implementation.

3.6 Ethical Principles

All respondents were assured of their security and confidentiality. Throughout the data processing and analysis, anonymity was maintained.

Figure 3.5 Adaptation Tracker



Findings and Analysis

4.1 Ascertaining the indicators and strategy for scaling the intervention program

An in-depth interview was conducted with the initiator of the intervention, "Campaigning through Community Action Group to Enhance Inclusive Access to Public Schools for OOSC and Children at Risk of Dropping Out. The tool 'Scaling Strategy Worksheet' contains a number of elements that aid in the scaling process. Specific questions listed in this tool were asked in order to determine the indicators and strategy for scaling the intervention based on the guidance provided by the tool for developing a scaling strategy. The following findings and analysis have been developed based on the responses.

- **Vision**

The intervention "Campaigning through Community Action Group to Enhance Inclusive Access to Public Schools for OOSC and Children at Risk of Dropping Out" aimed to decrease the rate of children dropping out of school and increase enrollment by involving parents in their children's education. The intervention is located in Durgabhagwati Rural Municipality, where there are a total of five wards. Each ward has a community action group with ten members. The intervention is expected to raise parental awareness of the importance of parental involvement in their child's education while also lowering school dropout rates. This intervention encourages parents to take the lead and monitor the education system to ensure its long-term viability, resulting in a better education for their children. Through community action groups, the goal is to establish a parent-teacher association and a school management committee.

- **Summary of the Scaling Strategy:**

Scaling deep shall be used to improve available resources and action groups in order to affect a positive shift in the attitudes of parents, teachers, and the community towards the value of education. The intervention aimed to provide the people and their community with a reality check on the state of education. The intervention's foremost objective is to educate the community about the importance of parental involvement in their children's education. The implementer had designed a curriculum calendar for schools that included

holidays, examination dates, and many other things, and those calendars have been successfully distributed to the schools.

Along with this, posters have been created and distributed throughout the community to educate the community and its people about the significance of education for all, the education of girls, the need to prevent child marriage, and other issues. The implementer had also planned and designated leaders for each action group, where the group members worked together and devised strategies to achieve the ultimate goal on their own. Plans were developed in response to the situation and as per the requirements.

The benefits of the intervention can be sustained through the support of local government in strengthening the capacity of the action groups as well as advocacy. The intervention is limited to Durgabhagwati Rural Municipality and was carried out only in the treatment groups chosen through randomized control trials. As per the implementer, the intervention can be scaled up by implementing it in rural municipality control groups. Aasaman Nepal, the intervention's supporting NGO, had also proposed conducting the intervention in Baraha and Janakpur in addition to Rautahat. Some of the issues discovered during this intervention included the presence of political issues in the community and schools. The involvement of politics in the community and schools altered both the outcome of the intervention and the process by which it was implemented. There were no strong and credible solutions to this problem.

To summarize, the 'scaling deep' approach was used to increase the community's capability. The already functioning groups, such as the children's and mothers' groups, were scaled. The action groups monitored school activities such as midday meals and worked to establish a PTA and SMC in schools. Various other activities had been carried out in order to raise community awareness. The major issues and challenges of the intervention were also discovered.

- **Credibility of the proposed initiative:**

The initiative's core strategy was to educate and mobilize the action group about the value of education, with a focus on parents and the community. When asked about the initial plan, the implementer explained that the initial plan was to involve parents only, but the ward chief and political parties raised questions.

The community members developed their own plans and interventions based on the need and situation, and the initiative was well received by the community. The initiative was inspired by the 1940s Participatory Action Research (PAR) approach, which involves researchers and participants working together to understand and improve a problematic situation. The ongoing 'Beti bachau, beti padhau' campaign in Province 2 was used as evidence. The Government of India initiated this campaign, which has since spread to many other countries with the goal of improving girls' education. Also, through previous experiences and the interest of the faculty in PAR, the initiative was designed.

At last, the innovator gave the intervention a 3 out of 5 in terms of credibility. The intervention's score has not changed since the initial phrase because the action groups sometimes made untrustworthy action plans that were difficult to carry out.

- **Recognition of the problem and support for change:**

According to the 2068 education policy, each public school must have one SMC and one PTA. There should also be a separate group monitoring the effectiveness of the PTA and SMC.

The government admitted that the policy had failed, but no alternatives were proposed to address the issues. Parents recognized the importance of monitoring their children's education and discovered that schools were not providing adequate midday meals, classes were not held on a regular basis, and so on. The parents had many more complaints about the school system and realized the need to speak up. After all, they recognized the existing gap in school for problem discussions, and the intervention was greatly appreciated by the parents.

However, the intervention was heavily criticized by the head teachers, who did not like the idea of involving the parents. The intervention's partners were Aasman Nepal and community leaders, and for the sustainability of the intervention, partnership with ward leaders and head teachers is required to improve and bring about positive changes. According to the implementer, one of the major issues with the intervention that has been affecting its impact is the action groups themselves. The action groups were overly ambitious, which led to their failure. The action groups were responsible for developing action plans to address the issues, but they often created unrealistic action plans that could not be carried out. The action groups are required to understand what action plans are more practical and fruitful for improvement.

- **Advantages of the proposed initiative over alternatives and the status quo:**

The intervention provided training to educate the community and involved parents in their children's education. According to government policies, every public school should have one SMC, but due to political interests in schools, there are no SMCs, and even if there are, they are influenced by political interests. This intervention attempted to establish an SMC and PTA that are run by community members rather than political leaders. This intervention is motivated by community and parental concerns rather than political considerations. This intervention has also attempted to involve and bind the ward as well as other actors. The evidence that more people in the community wanted to be a part of action groups indicates that a greater number of people in the community understand the importance of such action groups. They were able to understand their situation and had become aware of it. This evidence may have helped this intervention gain acceptance in larger systems. Also, new principles should be created regarding the involvement of parents in education. The main benefit of this initiative will be the achievement of the main goal, which is parental involvement in education. This will result in a better education for children. In addition, community involvement in SMC and PTA can help prevent resource exploitation.

- **Enabling conditions and partnerships for scaling:**

The action groups themselves can be considered valuable assets in terms of scaling. Any educational program must be approved by action groups. Additionally, community members and wards can be valuable assets in scaling the intervention. Political interference, on the other hand, can be a huge challenge in terms of scaling the intervention. Schools face a lot of political interference, which can cause a stumbling block when scaling. At the moment, community leaders are the most vocal supporters of expanding the initiatives. So far, schools have not given the intervention their full support. Support from wards, non-governmental organizations (NGOs), international non-governmental organizations (INGOs), civil society organizations (CSOs), and community leaders is critical for scaling the initiative.

- **Ease of transferring and applying the initiative at scale:**

The most difficult aspect of the intervention was raising awareness in a community where education was not valued at all. In terms of providing a reflection of the reality of the community, the intervention encountered a number of challenges. There was a scarcity of experts to deal with situations like this. To scale the initiative, experts in the PAR sector should be involved, as well as other experts who are familiar with the situation in these communities. Along with this, it was realized that this intervention would be impossible to carry out without providing some sort of incentive or attraction to the residents of the community. As a result, simple snacks were provided as a draw for community members during this initiative. The daily monitoring of schools, such as midday meals, shall be continued and maintained during scaling, as well as working with wards for the continuation of the initiative. The initiative's data collection process can be made more cost-effective and simpler. Paid monitors are currently being hired to monitor and collect data on the initiatives. Even so, the results are ineffective and cannot be presented in the form of data. As a result, the data collection process can be made more efficient and convenient.

- **Organizational capacity to implement initiatives at scale:**

In terms of organizational capacity, it is most likely present, but it may not be available for an extension of the initiative. The lack of ownership of the initiative is the most concerning issue in terms of long-term implementation. Because the ward was not officially involved, no ward leadership was present. Organizational capacity can be built through incentives, motivational sessions, and the appointment of group leaders. Community members must also be persuaded to step up and take ownership of the initiatives, recognizing their significance. Additionally, if scaling necessitates additional resources, the initiative's collaboration with the ward can ensure this. The data gathered through the endline data of the initiative can be presented to the ward, and community action groups can be linked or connected to the ward. Additionally, planning will be done in collaboration with the ward and community action groups.

- **Financial sustainability of the proposed initiative:**

The initiative officially began at the end of August 2022, and the final data was evaluated in July 2023. The initiative's expenses were covered by the ESP project run by the Learning Innovation and Knowledge Exchange Lab (LIKE LAB). A total of thirteen thousand five hundred rupees was given to five action groups each month to conduct meetings and other activities. Wards should set aside a budget or fund for action groups in the long run. Ward support is critical for long-term funding through resource mobilization. In addition, Asaman Nepal may be a major investor in this initiative.

- **Actions, milestones, and timetables:**

At the start of the initiative, group leaders were sought, and monthly meetings were held. There was a total of ten leaders. A facilitator is assigned to oversee the initiative and its processes. In addition, Asaman Nepal assisted in monitoring the initiative. Human capital is the most effective approach and is more valued than capability by the people in Rautahat. The human capital approach is the only one that can be used to carry out any interventions.

The community there is more concerned with money and profit, so interventions should include some sort of hoarding. Hoardings could motivate communities to make any intervention effective and successful. For many years, the PTA and SMC were not on their side of concern, but they gradually realized the need and importance. The community members were working hard to implement PTA and SMC in schools, following government policy.

With ward ownership, the intervention is highly scalable. On a scale of 1 to 5, the implementer rated the intervention's scalability as 2, which is due to the government's lack of emphasis on education as well as a lack of awareness among people regarding the importance of education.

The scaling strategy worksheet is a guiding framework that provides guidance on setting a specific, measurable, and time-bound scaling goal to organizations or institutions engaged in the planning or implementation of a scaling initiative. Most importantly, the goal of the Scaling Strategy Worksheet is to determine whether or not an intervention is scalable.

According to the findings, the intervention can be scaled up. Scaling deep entails improving the quality of campaigns led by action groups to ensure the intervention's effectiveness in reducing the number of out-of-school children and those at risk of dropping out, as well as increasing parental participation in their children's education. Involvement of the municipality, wards, and community is critical to achieving this goal and establishing SMC and PTA in schools. There were also significant challenges to achieving the goal. The schools were not collaborating and supporting the action groups, and the municipality is not giving the initiative much priority as well as education. The involvement of political parties in schools is preventing parental involvement in schools. The presence of a human capital approach also resulted in a hindrance when starting any campaign or initiative. The people were more into profits and earning incentives instead of working for the betterment of the education system. It is not always possible to provide those incentives, and it is not a sustainable solution to make initiatives work.

4.2 Evaluating and assessing the readiness for scaling the implementation of the intervention

The “Campaign through action groups enhancing inclusive access to public schools for OOSC and children at risk of dropping out” initiative was carried out in one of Rautahat's rural municipalities, Durgabhagwati Rural Municipality. The Durgabhagwati rural municipality is divided into five wards: Gangapipara, Bhalohiya, Matsari, Pachrukhi, and Badharwa, with one action group in each ward. For this intervention, a community action group of 12–15 community members were formed, with one leader in each of the five wards, to campaign and share or discuss community education issues. The leaders of each action group were thoroughly interviewed to better understand the community situation and examine and access the ward using the institutionalization tracker, which is designed to track the progress of efforts to institutionalize or mainstream an initiative within a formal education system. The collected data was later analyzed and rated on a scale of one to four, with one representing "low institutionalization" and four representing "full institutionalization.”

Graph 4.1 Average Scoring of DurgaBhagwati RM

Average scoring of Action group of Durga Bhagwati Rural Municipality



To understand and score scaling that program, specific questions about different sub-elements of system building blocks, which include scaling strategy, governance, human resources, information, finance, stakeholder engagement, equity, and inclusion, were asked. Based on the responses of all five ward action group leaders, the following findings and analyses were developed using a radar graph: Based on the five respondents who shared all of the elements, the score was assigned to examine the entire rural municipality's wards. In the overall scoring of Durgabhagwati Rural Municipality, which can be found in the annex part of this report, Ward 1 is represented by blue, Ward 2 is denoted by brown, Ward 3 is denoted by green, Ward 4 is denoted by yellow, Ward 5 is represented by red, and lastly, the average scoring is represented by light blue.

The figure above depicts the Institutionalization Tracker results for the average scoring of all five wards of the Durgabhagwati Rural Municipality. The figure depicts

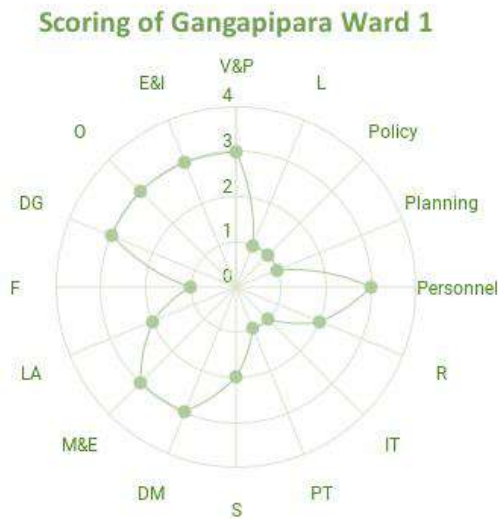
the Durgabhagwati Rural Municipality's overall ward readiness in terms of action group mobilization, capacity building, and the possibility of scaling to improve inclusive access to public schools for OOSC and children at risk of dropping out. The above graph and score were created by averaging the results of all five wards in the Durgabhagwati Rural Municipality. To begin, in the above figure, the rural municipality as a whole hasn't scored full institutionalization (Score 4). A total of 6 significant elements has a score of 3: vision and pathway, personnel, recruitment, data management, demand generation, and equity and inclusion, whereas a total of 6 significant elements have a score of 2: leadership, planning, supervision, monitoring, and evaluation, learner assessment, and opposition. Furthermore, four significant elements have a score of 1, indicating low institutionalization: policy, in-service, pre-service, and finance. The municipality should focus more on these four critical areas to increase its capacity and potential for scaling.

- **Ward 1 (Gangapipara)**

The graph below shows the overall score of Ward 1 Gangapipara of Durgabhagwati Rural Municipality. To begin, in the above figure, Ward 1 as a whole hasn't been institutionalized fully (Score 4). A total of 7 significant areas—vision and pathway, personnel, data management, monitoring and evaluation, demand generation, opposition, and equity and inclusion—have scored 3, whereas a total of 3 significant areas—recruitment, supervision, and learner assessment—have scored 2. Lastly, a total of six significant areas—leadership, policy, planning, in-service training, pre-service training, and finance—have a score of 1, indicating low institutionalization. This ward's action group currently lacks a leader and requires one to be appointed.

Furthermore, SMC and PTA are yet to be established. Besides, as indicated by the respondents, training has not been provided to the action groups on the negative aspects of child marriage and the importance of education. There is no financial assistance from the municipality or any other source. Positive changes have been seen in terms of the system in schools where students have been provided with better, clean, and nutritious midday meals, teachers have started coming on time to school, parents have become aware of the importance of education and parental involvement in the education system at the community level, and also while sending their children to school, parents have also become aware of proper sanitation and cleanliness through the action group in the ward. According to the respondent, the major drawbacks of the intervention are child marriage and gender violence in the community.

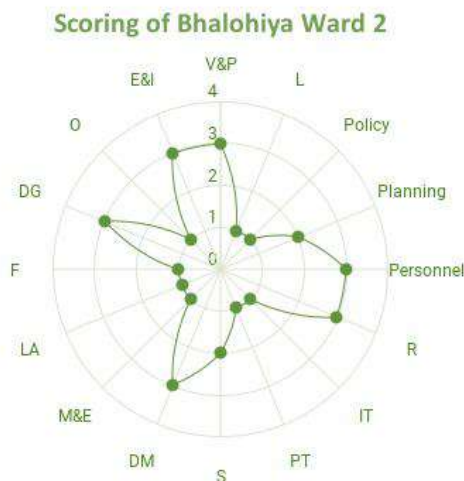
Graph 4.2 Scoring of Ward 1 Gangapipara



- **Ward 2 (Bhalohiya)**

The graph below shows the overall scoring of Ward 2 Bhalohiya of Durgabhagwati Rural Municipality. In the above figure, Ward 2 as a whole hasn't been institutionalized fully (Score 4). A total of 6 significant areas—vision and pathway, personnel, recruitment, data management, demand generation, and equity and inclusion—have scored 3, whereas a total of 2 significant areas—planning and supervision—have scored 2. Lastly, a total of 8 significant areas—leadership, policy, in-service training, pre-service training, monitoring and evaluation, learner assessment, finance, and opposition—have a score of 1, indicating low institutionalization. This ward has the lowest score compared to other wards. The schools in Ward 2 do not support the action group and are against the idea of parental involvement in the school. SMCs and PTAs have not been formed yet. There is no financial assistance from the municipality or any other source. According to the respondent, students in schools are still not provided with nutritious food and are given stale food instead.

Graph 4.3 Scoring of Ward 2 Bhalohiya

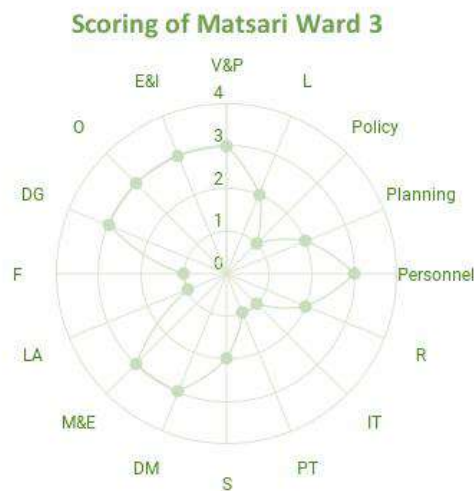


- **Ward 3 (Matsari)**

The graph below shows the overall scoring of Ward 3 Matsari of Durgabhagwati Rural Municipality. In the above figure, Ward 3 hasn't been institutionalized fully (Score 4). A total of 7 significant areas have scored 3: vision and pathway, personnel, data management, monitoring and evaluation, demand generation, opposition, and equity and inclusion. On the other hand, four significant areas scored 2: leadership, planning, recruitment, and supervision. Lastly, a total of five considerable areas have scored 1, indicating low institutionalization. The SMC and PTA have yet to be formed, but we have been planning on forming them.

According to the respondent, good and nutritious midday meals were not provided to students prior to this intervention, and the school dropout rate has also decreased as a result of this intervention. Training on the importance of education and the concept of equality in the community should be provided. For the action groups to be successful, educated people are also required. The ward and schools have enthusiastically supported the initiative.

Graph 4.4 Scoring of Ward 3 Matsari



- **Ward 4 (Pachrukhi)**

The graph below shows the overall scoring of Ward 4 Pachrukhi of Durgabhagwati Rural Municipality. In the above figure, Ward 4 hasn't been institutionalized fully (Score 4). A total of 11 significant areas—vision and pathway, leadership, planning, personnel, recruitment, supervision, data management, learner assessment, demand generation, opposition, equity, and inclusion—have scored 3. On the other hand, a total of 5 significant areas—policies, in-service, pre-service, monitoring and evaluation, and finance—have scored 1, indicating low institutionalization. The main goal of the action group is to establish PTA and SMC. They had been working on plans and strategies to form PTAs and SMCs. They had been following a 'Ghar Dahilo' program in which members of the action group visit each house in the ward to make them aware of the situation.

According to the respondents, training on the negative consequences of child marriage, the importance of education, and equality should be provided. In terms of proper midday meals and teacher behavior, there has been a significant improvement since the initiative. So far, the rural municipality has provided no financial assistance for the implementation of the initiative. The wards have given no time to monitor the initiative, while members of the action group and the initiators have been doing so. Furthermore, the schools have been completely supportive of the initiative.

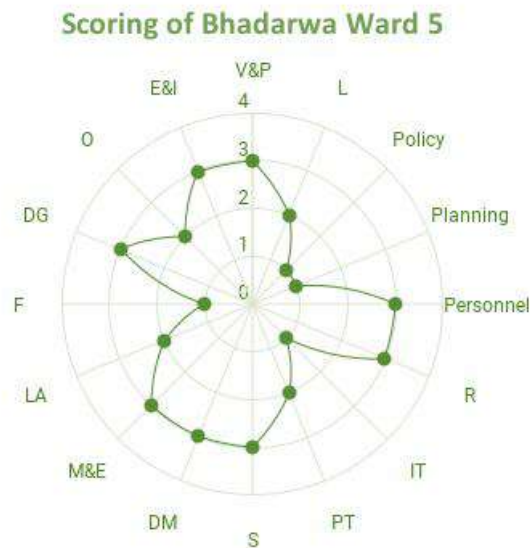
Graph 4.5 Scoring of Ward 4 Pachurkhi



- **Ward 5 (Bhadarwa)**

The graph below shows the overall scoring of Ward 5 Bhadarwa of Durgabhagwati Rural Municipality. In the above figure, Ward 5 as a whole hasn't been institutionalized fully (Score 4). A total of 8 significant areas—vision and pathway, personnel, recruitment, supervision, data management, monitoring and evaluation, demand generation, and equity and inclusion—have scored 3, whereas four significant elements—leadership, pre-service, learner assessment, and opposition—have scored 2. Lastly, four significant elements—policy, planning, in-service, and finance—have scored 1, indicating low institutionalization. According to the respondent, the rate of school enrollment had increased and the number of students present had remained consistent following this intervention. The parents are aware, and they regularly visit the school to monitor it. Children's activity levels have also increased. There had been no protests from schools or teachers, but they support the initiative less than parents. The PTA and SMC will be formed soon. Training is required to make the community and its people aware. So far, neither the ward nor the municipality have provided financial support for the initiative, and there is no hand from the ward for monitoring and evaluating the initiative. The initiative is being monitored and evaluated by the members of the action group and the initiators themselves.

Graph 4.6 Scoring of Ward 5 Bhadarwa



To summarize, Ward 2 is the least ready of the five wards for scaling, while Ward 4 is the readiest of the five wards for scaling, according to the institutionalization tracker's scoring.

The main goal of the institutionalization tracker is to assess the preparedness of the institutions that will form the foundation of the intervention. Vision and pathway, personnel, recruitment, data management, demand generation, and equity and inclusion are the highest-scoring elements. The action groups appear to be clear about the intervention's vision and pathway, as well as about the need for SMCs and PTAs. The action groups had also kept records of their meetings and the data gathered through monitoring. Finance, policy, in-service, and pre-service trainings, on the other hand, had the lowest scores.

Since the beginning of the intervention, there had been no training provided, which eventually resulted in a lack of trained individuals equipped with the necessary skills to form effective and dependable action plans. The action groups were also not receiving any kind of financial help from the municipality or wards, because of which there was no guarantee of their sustainability. This intervention can be sustained only if the municipality, wards, and community take ownership of the project.

4.3 Learnings from adaptations made throughout the scaling process of the intervention

An in-depth interview was conducted with the intervention's initiator. There are four steps to the continuous learning cycle in this tool: identify, plan, test, and reflect. Specific questions from the tool were asked to determine the adaptations made and learnings from the intervention based on the tool's guidance to strengthen efforts and sustain education initiatives. Based on the responses, the following findings and analyses were developed:

1) Identify:

- **What is the scaling goal? What is the priority scaling driver to focus on for this cycle?**

According to the initiator, the intervention can be scaled up in the future. Endline data has shown a 20% decrease in OOSC in the intervention's selected treatment areas. Because Province 2 has a high number of OOSCs compared to other provinces, the intervention can be expanded to include the entire province. The OOSC, as well as their parents and schools, will benefit from this scaled intervention. Parents will be able to express their views and participate in their children's education. Parents can also negotiate with schools to improve their children's education. Parents have become confident and aware enough to share their views and negotiate with the responsible parties.

Scaling the intervention will take at least 1 to 2 years. The time required also depends on how the intervention will be scaled and promoted at the municipal level. The main goal of the intervention will be to reduce OOSC. This scaled intervention will also have an impact on raising awareness about the importance of education in children's lives and changing people's attitudes toward education. Collaboration among community members, as well as the school's support and cooperation for action groups, can be the primary scaling drivers for the intervention, along with active members of action groups like mother's groups and religious leaders with greater influence over the community and its people. The engagement of municipalities and wards is also a major scaling driver for the intervention. Involving the female community health volunteers (FCHVs) in the action groups might also help to change the mindset of the community members.

- **Plan:**
- **What key challenges or opportunities related to this scaling driver do you want to address, and why?**

One of the major challenges for scaling drivers will be the mindset of community members and parents that it is acceptable and sufficient to monitor the schools their children attend rather than the entire education system in the district. The intervention can be sustained by changing the mindset of the parents, and community members can use the resources available in the community to improve the schools and education provided to the children without the involvement of other agencies. Furthermore, the educational system will be enhanced, and available resources will be mobilized. The community can care for Rautahat's education system on its own and become self-sufficient. They would not have to seek assistance from other organizations such as NGOs, INGOs, and so on.

- **What proposed adaptation will you test to address this challenge or opportunity, and why? What is the plan to execute this adaptation?**

A group of 10 to 15 parents was formed at the start of the intervention, but it was quickly realized that parents alone could not carry out the intervention and that certain types of leadership roles were required in each group. Active participation in the groups was required. As a result, some new members were introduced to

the groups later on, and the intervention proceeded smoothly after that. Some sort of campaigning can be done to instill in the community a positive mindset that they should not only focus on the schools where their children attend.

They should also recognize that other schools in the community must be monitored because the children studying there are also part of their community, and the only ones who can improve their quality of education are the community members themselves. Various people from their community who are working abroad can be introduced and asked to share their views on the importance of education through campaigns. They will understand the difference between people who went abroad without any education and educated people who went abroad as a result of this. In addition, community role models and people with greater influence in the community can be called and asked to share their thoughts on the importance of education.

Because the intervention site believes more in human capital, some sort of incentive, such as a lunch-providing system, should be provided to people in order to assemble them in a group. So far, this has motivated them to attend the meetings. There are very few teachers in the schools. Apart from emphasizing PTA and SMC in schools, a small campaign in which spare laptops and computers are collected and the videos uploaded by the Nepal Center for Education Development (NCED) and the curriculum are uploaded to those computers in such a way that the internet is not required to present those videos to the students. It is possible to create an audiovisual room that will be monitored by the action groups themselves. Action groups and schools can be linked with the help of this, and as a result, education can improve.

- **How will you measure if this adaptation led to an improvement in addressing the challenge or opportunity? What information will be collected and how, by whom, and how often? How will this data be used for decision-making?**

The improvement in adaptation can be efficiently measured by regular monitoring and evaluating the attendance rate of students in schools. The information gathered through monitoring and analysis of student attendance in schools, interviews with action groups, and interviews with teachers can be a major source of information that can aid in the measurement of its impacts and improvements. Monitors from Asaman Nepal or the project itself will collect the data. The data should be gathered once or twice every six months. The data collected will present the impact of the adaptation, which will help decide whether it should be scaled or not. Decisions on municipality and ward involvement can be made with the help of these data. Furthermore, the number of technically literate people can be seen through the data, and action groups will be able to know how the resources are mobilized and obtain a record of their operation. They can then make an informed decision as per their needs.

- **What do you predict will happen?**

The outcomes of the intervention will be a reduction in OOSC as well as the provision of quality education in the district. In addition, the virtual curriculum that NCED has uploaded to various sites will be presented to students in grades 1–5. Each chapter will be presented for 30 to 35 minutes. In Rautahat, the teachers

teach the students in Bajjika, but their exams are given in Nepali and English. Students can learn other languages besides Bajjika through this virtual curriculum, such as English and Nepali, and they can also easily grasp their course and curriculum.

Step 3: Test

- **As the adaptation is being tested, are there any observations or unexpected circumstances to document? Were any changes made to the planned adaptation while it was being tested? If yes, detail the changes and the intention behind them.**

There were several unexpected positive and negative outcomes. Parents' curiosity and interest in education grew rapidly. On the other hand, schools did not encourage parental involvement in school systems. The teachers refused to accept parental involvement in schools and were rather scared of the parents and their interest in the school system. In between the interventions, one of the action groups became nonfunctional as the members kept changing. In every meeting, new members showed up without any idea in search of incentives. Parents would sometimes send children messages telling them that food would be provided. Because the new members were unaware of what was going on and were unable to grasp the entire concept, the action group collapsed.

Step 4: Reflect

- **What are the results of testing the adaptation? Did the adaptation lead to an improvement? What worked and did not work? Were any spontaneous or unplanned adaptations made to the original plan? How did the results compare to the predictions? What lessons were learned?**

The intervention has reduced the rate of OOSC by 20% and successfully increased parental knowledge. A total of 128 students have been saved from the risk of dropping out through this intervention. Even if only in a small percentage of cases, the intervention has resulted in improvements. There were no unplanned or spontaneous changes to the original plan. The intervention's results matched the predicted result by 80%. The intervention was designed using PAR. Other interventions can also be designed using the same process.

- **Based on this learning and reflection, what next? Will you maintain or expand the adaptation, tweak or adapt it, or abandon it to try something else? Is this driver still a priority? Begin a new "plan" section to flesh out the proposed next steps.**

Based on the intervention's learning and reflection, the next goal could be to introduce technology to the school and create an audio-visual room where students can learn about the curriculum by watching videos uploaded by the Nepal Center for Education Development (NCED). Municipalities should also present their actual OOSC data and work to help cover the cost of children through budget allocation. According to the initiator's data analysis, rural municipalities can invest approximately Rs 950 per child per year to reduce OOSC

and the risk of dropping out. The municipality should also organize capacity-building training for parents and others. The adaptations should undoubtedly be expanded. Not only parents but influential leaders, religious leaders, and others in the municipality should be educated as part of the intervention. The scaling drivers prove to be crucial. Each action group is responsible for 6 to 7 households. When religious leaders and influential leaders, such as mayors, are encouraged and their interest in children's education grows, the community will eventually follow their path.

The following investigates the intervention's adaptability to scaling by analyzing the priority scaling drivers and the scaling challenges associated with these drivers.

The intervention, 'Campaign through Action Group, aims to scale up primarily in Province 2, which has a high rate of OOSC. The primary goal of scaling up the intervention is to reduce the rate of OOSC, increase parent organizations that represent their voice and interests, and increase parental involvement in the education system. To accomplish this goal, the innovator has identified four priority scaling drivers: 1) Community members' collaboration, school support, and cooperation for action groups; 2) Municipal and ward involvement 3) Inclusion of female community health volunteers (FCHVs) in action groups 4) Involvement of religious and influential individuals The intervention's scaling driver presents its own set of challenges and opportunities. Implementing the first scaling driver presents a greater challenge. The mindset of community members can be changed, but existing social values can be a hindrance to changing people's mindsets. Furthermore, it appears that schools do not readily support action groups.

In terms of the second scaling driver, there is the existing policy that each school should compulsorily have one SMC and PTA, but this is not being implemented. The municipality and ward should be sincere and honest about the intervention and should monitor the activities frequently. In terms of the involvement of religious and influential individuals, it depends upon the environment, social values, and priorities. The mindset and beliefs of people differ according to their lifestyle. In a society where discrimination is available among caste, gender, and religion, religious people can cause dissatisfaction among communities. FCHVs work mostly on motherhood, child health, family planning, and other public health aspects. Involving the members of FCHVs in the action groups can increase the knowledge of the community, but in terms of education, there is a doubt that it might not bring immense changes.

Analyzing the four principles of scaling with the intervention

5.1 Moral Justification

The objective of the intervention "Campaign through Action Groups Enhancing Inclusive Access to Public Schools for OOSC and Children at Risk of Dropping Out" is to decrease dropout rates and increase enrollment by actively involving parents in their children's education. Parental engagement is considered crucial for the success of this initiative.

Along with this, the formation of PTA and SMC is also one of the objectives of the intervention. Previously, the community did not prioritize education and lacked awareness of its significance. Moreover, the schools suffered from various issues, such as irregular teacher attendance and providing unhygienic and inadequate mid-day meals to the children. However, after implementing this intervention, positive changes have been observed. Action groups now regularly monitor the schools, leading to improvements in the quality of midday meals, teacher behavior, and various other aspects.

Additionally, the intervention has successfully changed the community's perception of education. As a result of these efforts, the rate of out-of-school children (OOSC) has decreased by 20% in Durga Bhagwati Rural Municipality. Furthermore, the intervention strives to establish school management committees (SMC) and parent-teacher associations (PTA) in schools across Durga Bhagwati Rural Municipality in Rautahat, in line with the government's policy. Overall, this intervention has played a significant role in enhancing educational opportunities and inclusivity in the community, promoting better educational outcomes for children at risk of dropping out and those previously out of school.

5.2 Optimal Scale:

The concept of optimality revolves around achieving and scaling the desired level of impact while determining how to effectively measure that impact. To attain an optimal scale, it is crucial to thoroughly analyze and understand the cumulative effects of scaling. This principle takes into account four crucial elements of change: magnitude, diversity, fairness, and sustainability.

The ideal scale considers several essential factors regarding demand and defines the level of impact required while also adopting appropriate methods to measure that impact.

In relation to the intervention 'Campaign through Action Group,' the objective is to bring about a transformation in the community's ideology and raise awareness among parents through training sessions, discussions, awareness programs, etc. The ultimate goal is to decrease student dropout rates, and OOSC represents the desired level of impact to be attained. The most accurate measurement method of the impact of this intervention is through observation and evaluation of a percentage of the total student dropout rates annually, evaluating and comparing the dropout rates of control areas with the treatment areas using the Randomized Control Trial (RCT) method.

The table below presents the four dimensions of the connection to the intervention

Table 5.1 Four dimensions within Optimal Scale

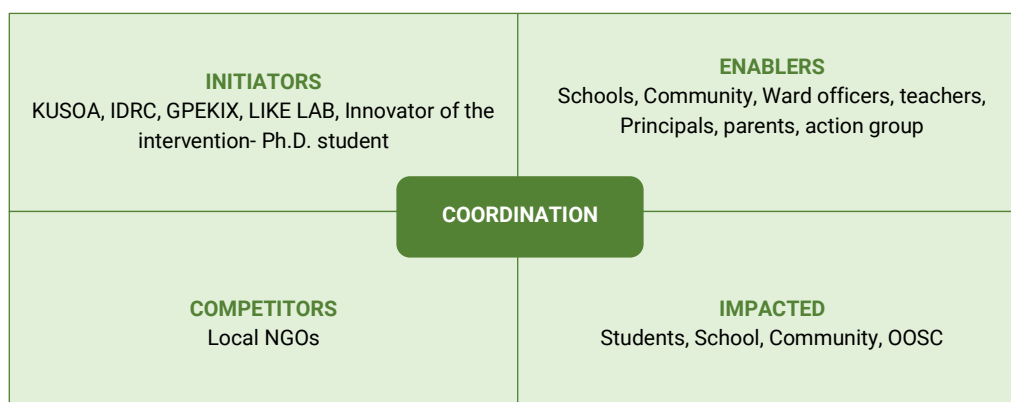
S.N.	Dimensions	
1.	Magnitude	<p>The intervention's impact magnitude primarily involves the parents of different wards within Durgabhagwati Rural Municipality in the Rautahat district. It also includes the parents of children who are currently out of school (OOSC). By targeting parents, the intervention aims to engage them actively in their children's education and address the issue of at-risk students and runaways. As the intervention seeks to scale deep, a crucial indicator of its success is the level of awareness provided to parents regarding the significance of parent-teacher associations (PTAs) and school management committees (SMCs). By promoting the establishment and active involvement of PTAs and SMCs, the intervention aims to reduce the risk of student dropouts and runaways.</p> <p>The extent to which parents understand and embrace the roles of PTAs and SMCs in supporting their children's education can be measured, leading to positive outcomes such as improved school attendance, better academic performance, and overall improved well-being for at-risk students and OOSC.</p>
2.	Variety	<p>The intervention's impact can be influenced by several key variables. The first variable is the type of educational activities conducted for the community. The second variable is the frequency of these activities carried out by the action group. Lastly, it is crucial to organize regular activities involving schools, parents, and the action groups to ensure their active participation and realization of the intervention's importance. By carefully considering and managing these variables, the intervention can achieve different levels of impact.</p>
3.	Equity	<p>The intervention is already equitable as it ensures the active involvement of all parents, regardless of their gender or social class, in the community action groups. This inclusive approach is essential for establishing Parent-Teacher Associations (PTAs) and School Management Committees (SMCs) in schools and aims to enhance the welfare and educational achievements of the children. The intervention's emphasis on engaging all parents creates an equitable platform, promoting diverse perspectives and contributions to positively impact the overall educational experience of the students.</p>
4.	Sustainability	<p>To achieve long-term sustainability, it is vital to have the municipality monitor and evaluate the action groups. By transferring ownership of the action groups to the municipality, it ensures consistent and high-quality implementation of Parent-Teacher Associations (PTAs) and School Management Committees (SMCs) in schools, thereby guaranteeing the intervention's lasting effectiveness and continuity for reducing OOSC and children at risk of dropping out.</p>

5.3 Inclusive coordination

Inclusive coordination refers to the need to plan and adapt for the many actors involved in bringing impact to scale. It can be done only with the willingness and participation of the coordinators for the intervention to achieve the ultimate goal.

All the actors played equally significant roles in executing and achieving the intervention’s success. The innovation and planning of the intervention were carried out by the Kathmandu University School of Arts and LIKE LAB. The intervention was funded by GPEKIX and the IDRC. Asaman Nepal assisted in monitoring and evaluating action groups and their activities. The community, along with ward officers, teachers, principals, parents, and action groups, facilitated the intervention’s execution. The pivotal role was played by action groups, responsible for raising awareness, overseeing school meals and education, and forming PTAs and SMCs. This joint effort of all the actors led to a reduction in OOSC, minimized dropout risks, improved student attendance, quality and hygienic meals, and an enhanced learning environment. The coordinated engagement of initiators, enablers, competitors, and those affected was pivotal in ensuring the intervention’s triumph

Figure 5.1 Inclusive coordination



5.4 Dynamic Evaluation:

Dynamic evaluation is vital for understanding the changing optimal scale of the intervention and improving its scaling process. When replicating the intervention in different areas, customization to the specific cultural and social context is crucial for relevance and acceptance. Conducting a pre-assessment helps identify potential barriers and facilitators, allowing tailored strategies for greater effectiveness and impact.

The effectiveness and success of the intervention can be ensured through an evaluator approach, where each stakeholder evaluates and balances the other stakeholders. In the case of this intervention, local government members can monitor and evaluate the work of action groups and their impact on society and schools, especially on the children of the community. Simultaneously, action groups can monitor community behaviors and activities and evaluate schools, school leaders, and principals. This collaborative and self-reflective approach encourages all stakeholders to continuously improve themselves, fostering the best possible impact of the intervention.

Conclusion

To conclude, the scaling strategy worksheet, the institutionalization tracker, and the adaptation tracker were used to evaluate the intervention indicators and strategies. As a result, it is possible to conclude that the intervention "Campaign through Action Groups Enhancing Inclusive Access to Public Schools for OOSC and Children at Risk of Dropping Out" has a clear vision, goal, and required understanding. The innovator is well aware and has well drafted the intervention plan with vision, the scaling approach that will be used, creativity, problem recognition, and support for change, along with partnership, collaboration, and organizational capacity.

Using the scaling strategy worksheet and in relation to the research objective, it is clear that scaling indicators can be determined with the necessary scaling strategies of the initiative. It is also clear from this that a scaling strategy can be implemented in order to determine the program's potential. On the other hand, the use of an institutionalization tracker additionally enables the assessment of the institution's readiness for the intervention. It is clear from this that the readiness of any institution for scaling can be used to measure scaling and positive changes.

In "Campaign through Action Groups Enhancing Inclusive Access to Public Schools for OOSC and Children at Risk of Dropping Out", the institutionalization tracker indicates that the intervention municipality's ward is not fully institutionalized in all areas or elements, and four elements, namely finance, policy, in-service, and pre-service training, should be focused and prioritized. The adaptation tracker enables practitioners to plan and document adaptations regularly, as part of an ongoing learning cycle, to strengthen efforts to scale and sustain education initiatives. It can be concluded that the adaptations made in the intervention "Campaign through Action Groups Enhancing Inclusive Access to Public Schools for OOSC and Children at Risk of Dropping Out" can still be practiced for the long term. The primary scaling drivers are: 1) community members' collaboration, school support, and cooperation for action groups; 2) municipal and ward involvement; 3) inclusion of female community health volunteers (FCHVs) in action groups; and 4) involvement of religious and influential individuals.

Furthermore, we can conclude from this research that scaling strategies can be evaluated using existing indicators while examining institutional readiness as well as the adaptation of the intervention. The findings could be valuable for potential utilization in municipalities at the education ministry level for research, data collection, and a thorough understanding of the current education system in Rautahat and Durgabhagwati Rural municipalities. Besides, when the intervention is scaled up to other areas, the collected data can be put to use for further analysis and evaluation.

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Annex

- **Questionnaire of Scaling Strategy Worksheet:**

Name:

Date:

1)	Vision		
a)	What is the name of the intervention?		
b)	What is the intervention trying to achieve? What is overall the main goal of this intervention?		
c)	Why is this intervention required? What problem is this intervention trying to address?		
d)	Where is this intervention located/ where is it being done? (municipality, area) Who are the targeted participants? What is the targeted number of participants?		
e)	What result are you expecting from scaling this intervention?		
2)	Summary of Scaling strategy		
a)	What type of scale is this intervention using? Up, deep or down?		
b)	What is this intervention trying to scale? What aspect of this intervention is being scaled?		
c)	What plans did you make for scaling this intervention in the initial phase (pre-plans)? How is the intervention going? Is everything going on as per your plans? Have you made strategies to follows the plans for scaling?		
d)	How can the intervention's benefits be sustained? Have you developed any strategies for sustaining the benefits of scaling this initiative?		
e)	Have you thought about scaling this initiative in other areas/ places? How have you planned to address the problems that may arise? If no, have any other municipalities of rautahat or other area approached for the same intervention?		
f)	Did this intervention have any negative consequences? Had you assumed any negative consequences during the initial phase?		
3)	Credibility of the proposed initiative		
a)	What is the Core strategy of the initiative?		
b)	What was your initial plan to achieve the core strategy? Are the initial plans working or did you have to bring changes to the plans? What kind of strategy have you developed to ensure that communities accept the initiative?		
c)	Are there any evidences backing this initiative? – inspiration, evidences		
d)	Score the effectiveness of your initiative from the scale of 1-5. (How trustworthy)		
e)	Has the score evolved from the initial stages of intervention? Why do you think it has changed?		
4)	Recognition of the problem and support for change		
a)	What evidence/s is there which presents that	Criticism	Support

	communities and policymakers recognize the urgency of the problem the initiative is working on?		
b)	Describe the systemic benefits or potential partnership (or affiliations) that the initiative would take advantage of for change?	Supporting actors (Currently)	Supporting actors required
c)	Are there any opposition or issues that could affect the impact? How has the initiative tackled or mitigated those issues?	Issues/ oppositions (org, community)	Mitigation
d)	How does the initiative fit into the existing policies/ provisions? Which policy/ provision?		
5)	Advantage of the proposed initiative over alternatives and to the status quo		
a)	How does the initiative differ from existing provisions and alternative approaches? Please provide proof.		
b)	Provide evidence that the initiative is perceived as more effective by policymakers, practitioners, and communities, as well as a description of whether implementing organizations and other larger systems will accept the initiative.		
c)	What might be the overall advantages/ benefits of this initiative?		
6)	Enabling conditions and partnerships for scaling		
a)	What are the key elements in the larger system that can be considered as assets for scaling? investors, funders, supporters?		
b)	What are the key elements in the larger system that can be regarded as challenges for scaling?		
c)	Are there any partnerships that are already in place to support scaling? Before/ Current partners		
d)	What partnerships are needed to support scaling and sustain it?		
7)	Ease of transferring and applying the initiative at scale		
a)	What are the most challenging adaptations or adjustments in the initiative to scale?		
b)	How can these challenges be addressing?		
c)	Which aspects of the initiative have been identified as 'core' to its impact and must be preserved during scaling?		
d)	Which aspects of the initiative can be simplified or redesigned to be more cost-effective?		
8)	Organizational capacity to implement initiative at scale : optimal scale(equity)		
a)	Does the implementing organization currently have the organizational capacity to scale the initiative, based on previous experiences?		
b)	How can organizational capacity be developed by the implementing organizations to bring the initiative to scale?		
c)	What kind of institutional capacity is lacking for large-scale implementation of the initiative? How can they be addressed?		
d)	How will the implementation process be transferred from one organization to another actor? What are the dangers of doing so?		
e)	How can you ensure adequate resources and capacity if scaling requires additional human and institutional resources?		
9)	Financial sustainability of proposed initiative		

a)	How can the resources be mobilized to establish a sustainable funding base for scaling the initiative?		
b)	Can the initiative be implemented within the existing system, utilizing the infrastructure, human resources, etc?		
c)	What budgetary processes should be considered to mobilize longer-term domestic financing?		
d)	What is timeframe of the initiative? (When will it be done/ how long?) Thoughts After endline		
e)	Where will it be invested? Who will invest? How it is financially managed?		
10 Actions, milestones, and timetables			
a)	Can you describe the entire scaling process from start to finish?		
b)	Key Targets	Was it achieved or not? Challenges, ease?	Timeframe for achieving the target
c)	Actions	Monitoring Support (How was it monitored? By whom?)	Overall reflection
	Progresses of scaling		
	Assumptions that scaling was based on		
	Strategies on collecting additional data that were missed		
	Securing additional support (financial, technical, technological) needed		
d)	What are your learnings from this initiative?		
e)	What is your overall reflection on the scaling process?		
f)	Who are the responsible parties for monitoring and reflective activities?		
g)	Is this intervention scalable? Please rate from 1-5 for its scalability with reason. Scale up, out & deep		
h)	Would you like to add anything else? Concluding remarks		

- **Questionnaires of Institutionalization Tracker**

Interview date:

Responder name:

Municipality:

Ward no:

No.	System Building Block	Element	Questions	Score	Remark
1.	Scaling strategy	Vision and pathway	Is there a clear vision & pathway for scaling the initiative within the MoE?		
			Did you know about the intervention before? How is the situation different from before?		
2.	Governance	Leadership	Are there ongoing leadership and coordination efforts for the initiative (at first by champions and later by a structured group within the MoE)?		
			Is there anyone taking the lead for the initiatives? How is it being done?		
		Policy	Does the initiative align with existing policies , or where policies do not exist, has the MoE implemented necessary policy to support the initiative?		
			Are you aware of PTA, SMC existing in the policies?		
		Planning	Has the MoE included the initiative in national plans or strategies ?		
3.	Human resources	Personnel	Are government parents, community people delivering the initiative?		
		Recruitment	Are there sufficient no. of parents, communities to deliver the initiatives at scale?		
		In-service	Does appropriate MoE in-service teachers training include the initiative?		
		Pre-service	Does appropriate MoE pre-service teachers training include the initiative?		
		Supervision	Is the initiative included in regular MoE supervision and support activities ?		
4.	Information	Data management	Is the initiative integrated into the MoE's Education Management Information System (EMIS) or an alternative existing data management system? Data about schools		
		MEL	Has the MoE defined and implemented a strategy for monitoring and evaluating the initiative and using results to modify the initiative? Is the monitoring and evaluation being done regularly?		
		Learner assessment	Is assessment of learning outcomes related to the initiative integrated into official MoE learner assessment?		

5.	Finance	Finance	Are all aspects of delivering the initiative financed by the government?		
6.	Stakeholder engagement	Demand generation	Is the MoE engaged in generating demand and buying for the initiative among potential beneficiaries and key stakeholders in the education ecosystem?		
			Do the wards, schools support the initiative?		
		Opposition	Is the MoE identifying and engaging with potential opponents to scaling and those who stand to lose from the initiative becoming widespread?		
			Do the initiatives get support from opponents like teachers?		
7.	Equity and inclusion	Equity & inclusion	Has the MoE ensured marginalised and disadvantaged learners will have equitable access to the initiative?		
			Is there equal treatment or equality for participation?		

- **Element codes for radar graph:**

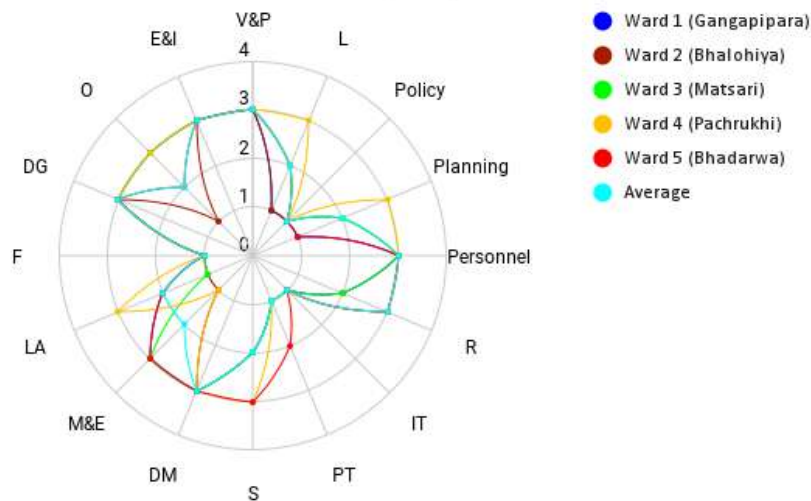
System Building Block	Elements	Code
Scaling Strategy	Vision and Pathway	V&P
Governance	Leadership	L
	Policy	Policy
	Planning	Planning
Human resources	Personnel	Personnel
	Recruitment	R
	In-service Training	IT
	Pre-service Training	PT
	Supervision	S
Information	Data management	DM
	Monitoring and evaluation	M&E
	Learner assessment	LA
Finance	Finance	F
Stakeholder engagement	Demand generation	DG
	Opposition	O
Equity and Inclusion	Equity and Inclusion	E&I

● **Institutionalization Tracker Scores**

System Building Block	Elements	Ward 1 (Gangapipara)	Ward 2 (Bhalohiya)	Ward 3 (Matsari)	Ward 4 (Pachrukhi)	Ward 5 (Bhadarwa)	Average
Scaling Strategy	Vision and Pathway	3	3	3	3	3	3
Governance	Leadership	1	1	2	3	2	2
	Policy	1	1	1	1	1	1
	Planning	1	2	2	3	1	2
Human resources	Personnel	3	3	3	3	3	3
	Recruitment	2	3	2	3	3	3
	In-service	1	1	1	1	1	1
	Pre-service	1	1	1	1	2	1
	Supervision	2	2	2	3	3	2
Information	Data management	3	3	3	3	3	3
	Monitoring and evaluation	3	1	3	1	3	2
	Learner assessment	2	1	1	3	2	2
Finance	Finance	1	1	1	1	1	1
Stakeholder engagement	Demand generation	3	3	3	3	3	3
	Opposition	3	1	3	3	2	2
Equity and Inclusion	Equity and Inclusion	3	3	3	3	3	3

● **Overall Scoring of Action Group of Durga Bhagwati Rural Municipality**

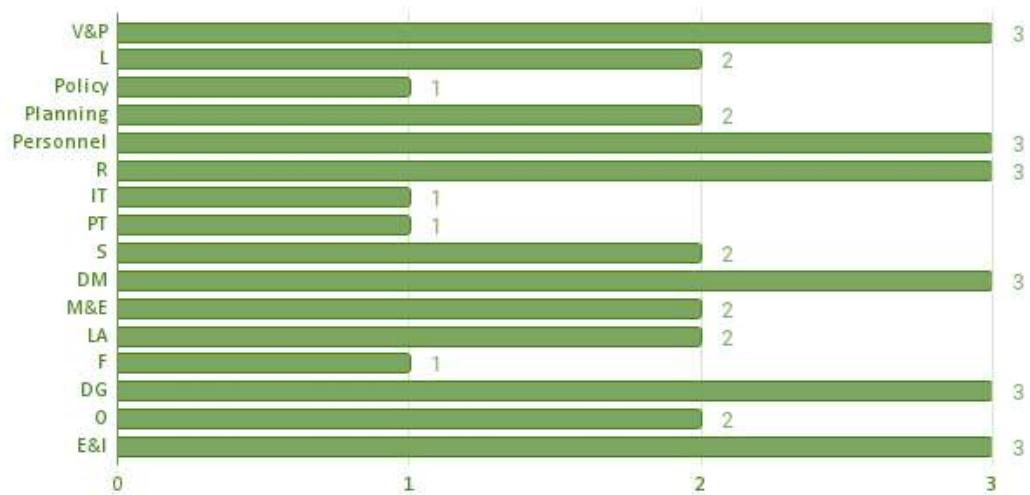
Overall Scoring of Action Groups of Durga Bhagwati Rural Municipality



● **Bar Graphs:**

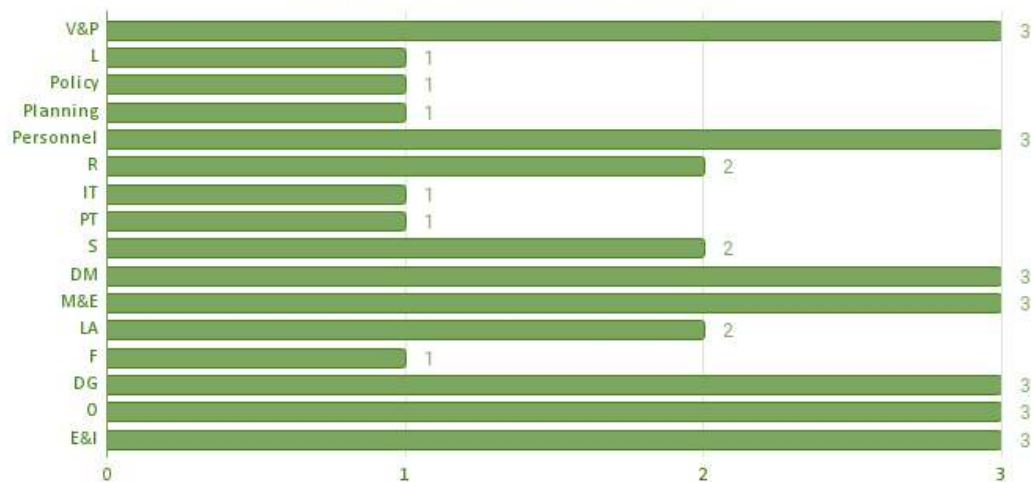
1) **Average scoring of Durga Bhagwati Rural Municipality**

Bar Graph of Average scoring of actions groups in Durga Bhagwati Rural Municipality

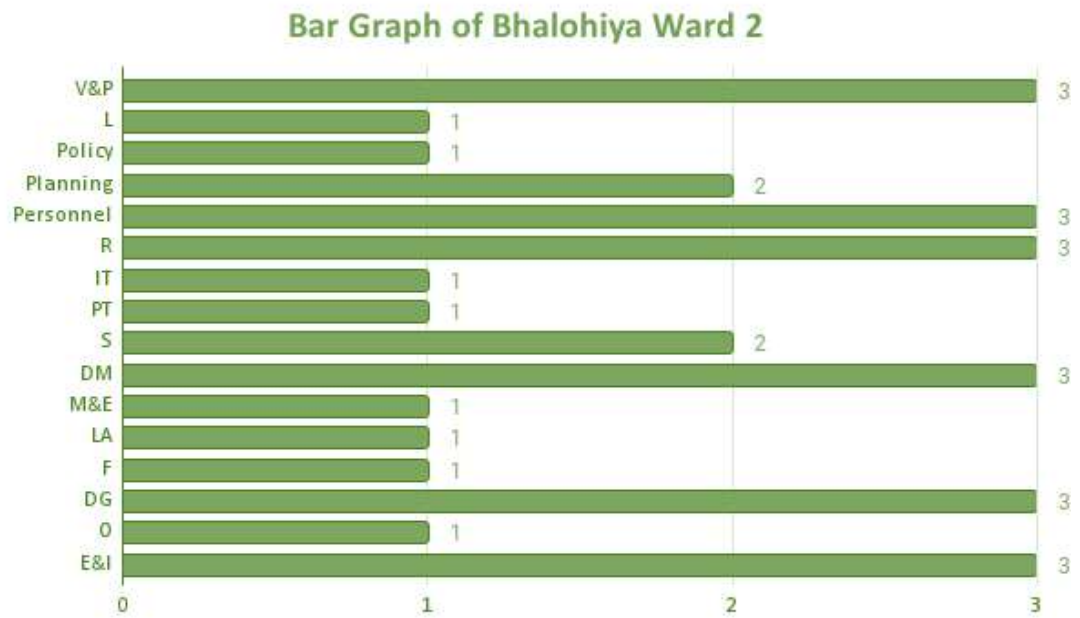


- 2) Ward
- 3) 1 Gangapipara

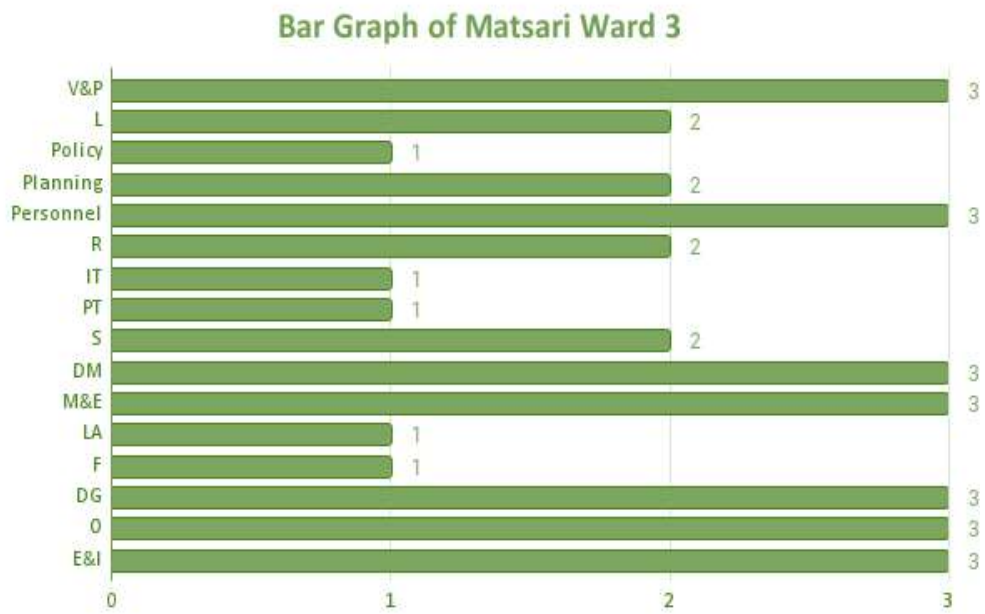
Bar Graph of Gangapipara Ward 1



4) Ward 2 Bhalohiya

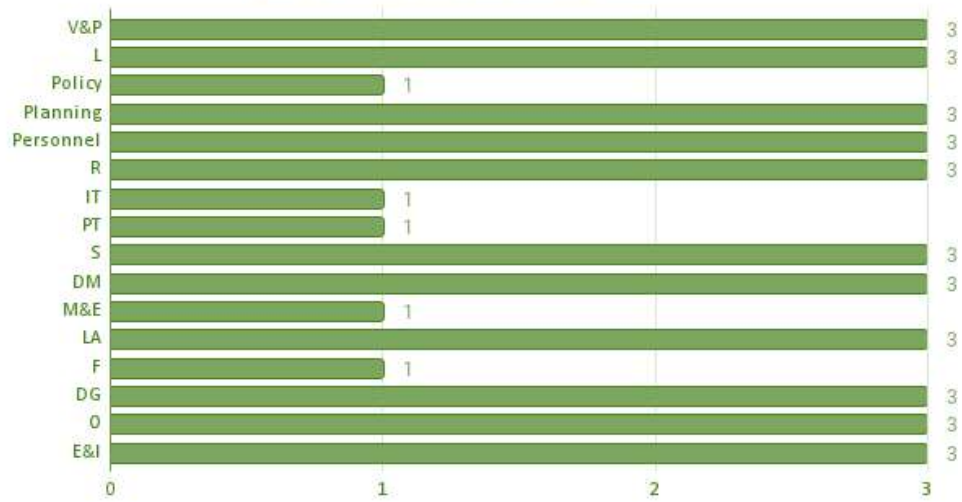


5) Ward 3 Matsari



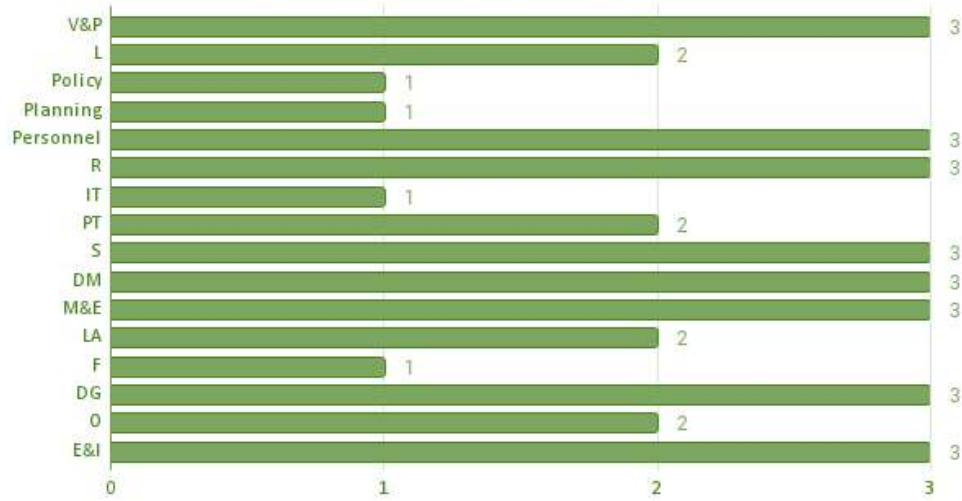
6) Ward 4 Pachrukhi

Bar Graph of Pachrukhi Ward 4



7) Ward 5 Bhadarwa

Bar Graph of Bhadarwa Ward 5



- **Questionnaire for Adaptation Tracker**

Respondent:

Date:

Step 1: Identify	
<i>What is the scaling goal (including initiative or components of the initiative being scaled, size and scope of proposed scaling goal, intended beneficiaries, timeline, and intended impact)? The scaling goal should be specific, measurable, and time bound. What is the priority scaling driver to focus on for this cycle?</i>	
As the initiative is already being scaled, what kind of scaling do you propose for this intervention in the future? (in size, numbers and scope)	Scaling goal:
Who will be the intended beneficiaries for the scaled intervention?	
How much time do you think will be needed for scaling the intervention? A year? Five years?	
What will be the intended impact of this scaled intervention?	
What will be the scaling driver of focus to scale this intervention?	
Step 2: Plan	
<i>What key challenge or opportunity related to this scaling driver do you want to address and why?</i>	
What will be the key challenge to this scaling driver?	
What will be the key opportunity to this scaling driver? (Special provision in Rautahat that no place has?)	
<i>What proposed adaptation(s) will you test to address this challenge or opportunity and why? What is the plan to execute this adaptation?</i>	
What kind of adjustments do you plan to make to the intervention to address this challenge?	
What kind of adjustments do you plan to make to the intervention to fully benefit from this opportunity?	
How do you plan to make this adjustment? How will the process go?	
<i>How will you measure if this adaptation led to an improvement in addressing the challenge or opportunity? What information will be collected and how, by whom, and how often? How will this data be used for decision-making?</i>	
How will you measure if the adjustment has addressed these challenges or opportunities and has improved the intervention?	
For this kind of measurement, what kind of information will be needed?	
How will it be collected? By whom?	
How often will it be collected? Weekly basis? Monthly basis?	
How will you or other stakeholders use this data for decision-making?	
<i>What do you predict will happen?</i>	
What do you think will be the outcome after this adjustment to the intervention?	
Step 3: Test	
<i>As the adaptation is being tested, are there any observations or unexpected circumstances to document? Were any changes made to the planned adaptation while it was being tested? If yes, detail the changes and the intention behind them.</i>	
During this intervention, were there any unexpected outcomes or observations that you experienced? (positive or negative)	
As the intervention proceeded, were there any changes that you made to make it run more smoothly?	
Why did you make such changes?	
Step 4: Reflect	

<i>What are the results of testing the adaptation? Did the adaptation lead to an improvement? What worked and did not work? Were any spontaneous or unplanned adaptations made to the original plan? How did the results compare to the predictions? What lessons were learned?</i>	
What is the tentative results from this intervention?	
Do you think the intervention led to an improvement?	
Were any spontaneous or unplanned adaptations made to the original plan?(besides CAG monitor)	
How did the results of the intervention compare to your initial predictions?	
What did you learn about the intervention? In short.	
<i>Based on this learning and reflection, what next? Will you maintain or expand the adaptation, tweak or adapt it, or abandon it to try something else? Is this driver still a priority? Begin a new "plan" section to flesh out the proposed next steps.</i>	
Based on this learning and reflection, what next? What should be done	
Will you maintain or expand the adaptation, tweak or adapt it, or abandon it to try something else?	
Is the scaling driver still a priority after completing the intervention?	

Pictures



Interview for Institutional Tracker with Action group of Ward 4



Interview for Institutionalization Tracker with leader of Ward 3 Action group



Interview with Action group leader of Ward 2 for Institutionalization Tracker



Interview with Action group leader of Ward 1 for Institutionalization Tracker

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