

WHAT IS THEORY OF CHANGE?

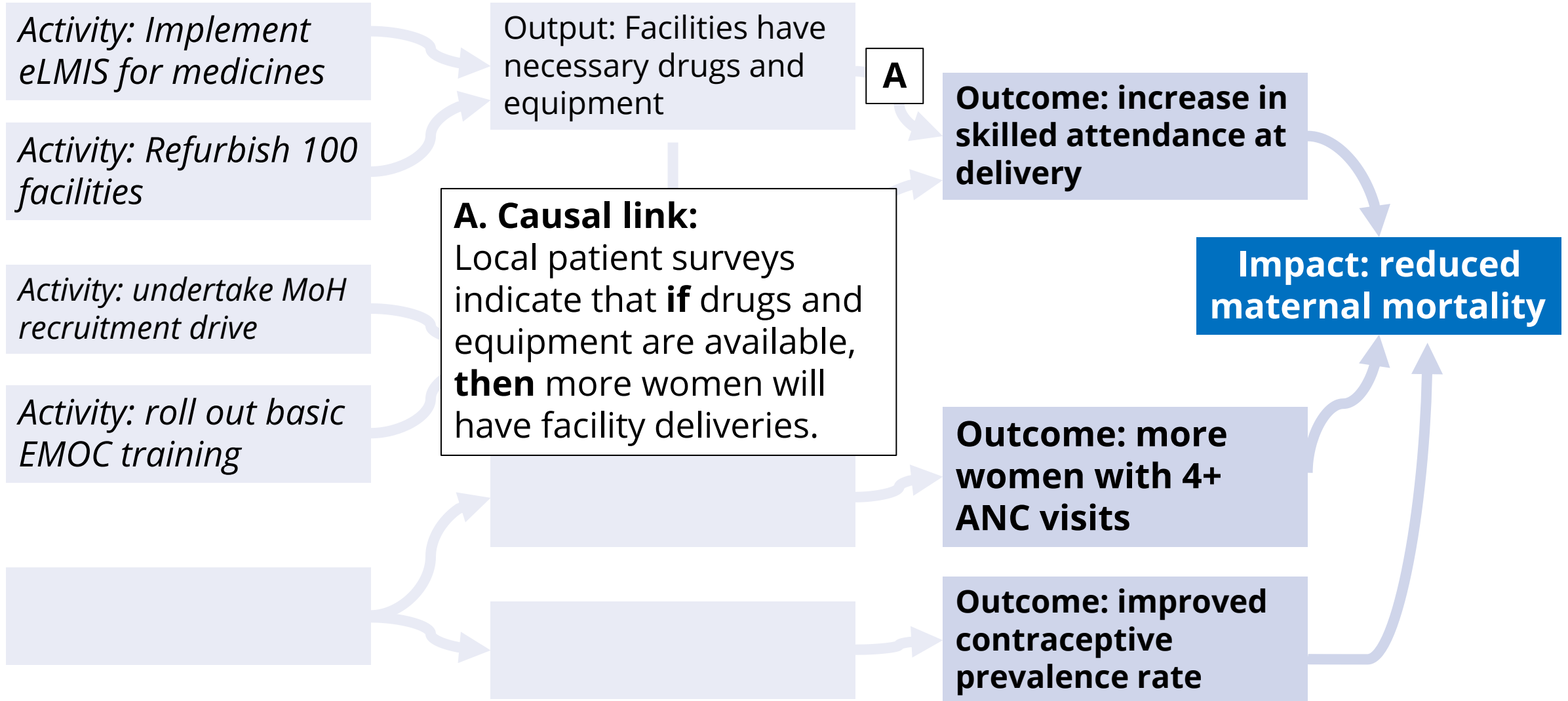
What is 'Theory of Change'?

- *Every* program or project has a theory of change: a hypothesis for how change will happen.
- However, with traditional planning approaches, this is often hidden – we describe activities, outcomes and impact, but make *assumptions* that each of these will lead to the next.

What is 'Theory of Change'?

- Theory of Change (capital letters) is an approach where we discuss and clearly document these assumptions – the chain of cause-and-effect that will achieve our desired impact.
- The term 'Theory of Change' is used for both the **process** (the approach used to understand and plan change) and the **product** (a description/diagram of how change will happen).
- There is not just 'one way' of applying this approach nor one 'right' type of diagram. The key is to have a participatory process that enables stakeholders to share their different assumptions about how change will happen and to build consensus about the most effective way forward.

A simple example: Theory of Change



How is 'Theory of Change' different?

- **Similar to traditional planning approaches**
- Work backwards from our desired impact to identify the outcomes, outputs and activities needed to achieve it.
- **Different to traditional planning approaches**
- Documents 'causal links' (cause-and-effect), drawing on *evidence* that the expected change will work in this context.
- Includes external factors, not just our own activities.
- Not linear – causal links can flow sideways and backwards.

When and why do we develop a ToC?

- During the **identification and prioritization of IC strategies**, to inform discussions on the best ways to achieve the desired impact;
- Prior to **developing the Results Framework** – if the Results Framework is structured around the IC Theory of Change, the whole chain of cause-and-effect can be monitored and course-corrections made if issues arise;
- **During IC implementation**, to help understand and test the assumptions that have been made around cause-and-effect to enable course correction as needed (e.g. during mid-term review).
- **At the end of the IC cycle**, in order to evaluate how the original assumptions and change logic played out in practice and to gain valuable learning for future cycles.

A simple example: traditional planning

Impact: reduced maternal mortality

Outcome: increase in skilled attendance at delivery

Output: Facilities have necessary drugs and equipment

Activity: Implement eLMIS for medicines

Activity: Refurbish 100 facilities

Output: facilities have trained staff

Activity: undertake MoH recruitment drive

Activity: roll out basic EMOC training

Outcome: more women with 4+ ANC visits

Outcome: improved contraceptive prevalence rate

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Causal link: strong global evidence base that increasing skilled attendance directly reduces maternal mortality.

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Causal link: local patient surveys indicate that more women will seek facility deliveries if drugs and equipment are available.

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Causal link:
refurbishing 100 facilities in 4 high-need districts will address 75% of identified equipment shortages.

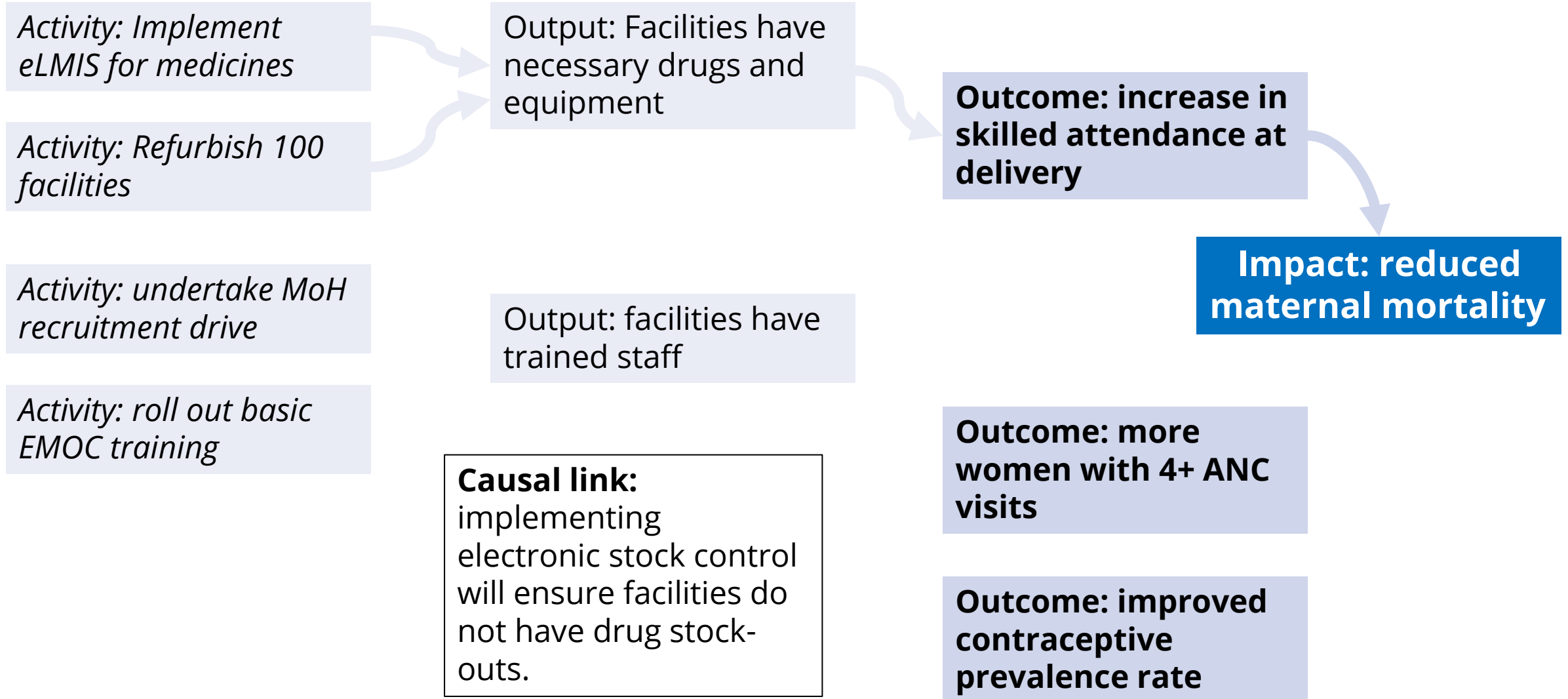
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Thinking through your causal links...

- When developing your Theory of Change, there are two important questions you can ask for each set of causal links:
- Is each of the causal links outlined here **necessary** for change to occur – is anything unnecessary or irrelevant?
- Are the causal links preceding each step **sufficient** to achieve change – are additional steps ('pre-conditions') needed to ensure this change actually happens?
- As you work through your Theory of Change, keep these two questions – **necessary** and **sufficient** – constantly in mind.

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Causal link:
implementing electronic stock control will ensure facilities do not have drug stock-outs.

Outcome: increase in skilled attendance at delivery

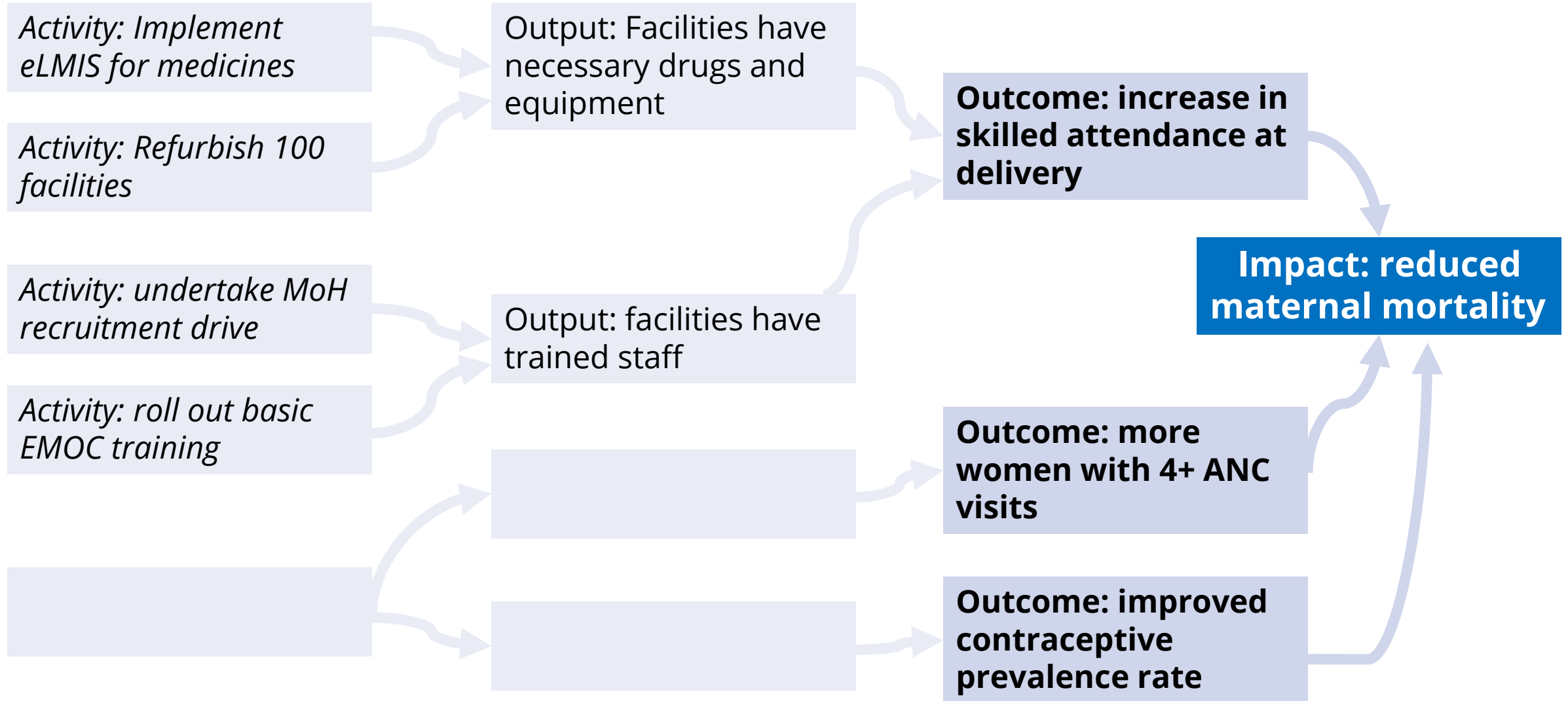
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Is this an evidence-based assumption? Is electronic stock control **sufficient** to eliminate stock-outs?

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