

LSTM
— CENTRE FOR —
CAPACITY RESEARCH



Centre for Capacity Research

*Advancing the science of capacity
strengthening for sustainable development*

How to create and use a Theory of Change

Tuesday 19th May 2021



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Session Outline

Training Objectives

How to approach writing the ToC section of proposals including:

1. What is a ToC (or Pathway to Impact)?
2. Why is it useful?
3. When and how to design a ToC
4. How to make sure the ToC and your proposal text are aligned

Session Structure

- Understanding ToC ~45 minute presentation
- Q&A ~30 minute 'clinic' format
- Useful resources are provided

ToC questions received

- How to develop a clear and informative theory of change for a project
- How Junior Researchers can Create Pathway to Impact
- How to apply a theory of change in practice.
- How does a ToC help you be confident your project activities will bring about the specific changes that you intend to facilitate

“Pathway to Impact explains the relationship between your project’s Outcomes and Outputs. For each Outcome, please identify the relevant Outputs and explain how those specific Outputs are expected to produce the Outcome” [extract from proposal instructions]

What is a theory of change?

- A **methodology for programme planning and evaluation** widely used in government and development sectors
- A comprehensive description and illustration of how and why a desired change is expected to happen in a particular context
- This leads to better planning, in that activities are linked to a detailed understanding of how change actually happens.
- It also leads to better evaluation, as it is possible to measure progress towards the achievement of longer-term goals that goes beyond the identification of program outputs.
- ToCs are **bespoke, flexible** and are conceptually distinct from scientific theory

Why is a theory of change useful?

- Provides a **visual snapshot** of how your activities will eventually lead to the desired outcomes and impact [some reviewers may look the ToC first]
- Helps with **project planning** – especially for getting **everyone on board**, and ironing out differing views and expectations
- Makes you **think about the links** between activities, outputs, outcomes and impact and what may stop you achieving them (for your ‘risks/assumptions’ sections)
- Makes you think about **who needs to be involved** at each stage of the research (for your ‘stakeholders/engagement/ dissemination sections’)
- Shows clearly what is and is not **within the control of the project** (so what you can commit to delivering and what you can’t)
- If needed, linking your ToC to the **funders’ scheme ToC** shows how you contribute to their vision

When and how to design a theory of change

When?

- Ideally with partners, face to face very early on in proposal development and refine again before submission
- If everyone is on the same page (through ToC discussions) it makes writing the proposal more efficient and easier to divide up the tasks

How?

- start with a framework (use the funders' one, make your own, adapt someone else's.....)
- some are confidential so ask permission; some projects may have 'internal' and 'external' ToC versions

Examples of ToC

IMPACT

ENHANCED HEALTH, WELLBEING & ECONOMIC DEVELOPMENT IN LMICS

Accelerated development of self-sustaining, responsive, high quality, multi-level research systems in LMICs

Advancement of RCS science leading to evidence-informed RCS intervention in LMICs

OUTCOME

Increased demand for high quality evidence to inform RCS design & implementation ↔ A larger, more cohesive community of multidisciplinary RCS scientists with equitable LMIC participation ↔ Increased supply of high quality evidence to inform RCS design and implementation

RCS stakeholders value and apply RCS evidence and fund dedicated, implementation-focused RCS research projects ↔ Scientists interested in RCS research have a recognizable identity, lexicon and purpose and forums for intellectual exchange ↔ RCS funders and implementers have access to a high quality, continually growing evidence-base to inform RCS design and implementation in LMICs

ACTIVITIES

PILLAR A: RCS RESEARCH DEMAND
 Advocate for evidence-informed RCS intervention & funding for implementation-focused RCS research
Activities:
 RCS stakeholder networking & advocacy
 Compile & communicate RCS evidence & resources

PILLAR B: RCS RESEARCH COMMUNITY
 Foster & support a global community of RCS scientists with equitable LMIC participation
Activities:
 Foster RCS research networks & platforms for exchange
 Support development of LMIC RCS research partners
 Develop & advance RCS theory & concepts

PILLAR C: RCS RESEARCH SUPPLY
 Conduct high-quality, implementation focused RCS research
Activities:
 Conduct research in accordance with CRU priority research agenda

PROBLEM

RCS investment and intervention informed by anecdotal experience and supposition. Minimal funding available to support the generation of robust RCS evidence.

Fragmented and sparse RCS research activity exacerbated by the absence of a recognizable RCS research 'community'

Shortage of high quality, implementation-focused research to inform RCS design & implementation in LMICs

PACE & SCOPE OF PROGRESS DEPENDENT ON LEVEL OF STAKEHOLDER ENGAGEMENT. CRU ACTIVITY INSUFFICIENT IN ISOLATION.



A MALARIA FREE WORLD

Better health outcomes in partnership focus countries

Stronger health systems and better malaria control allow people to get the right intervention, at the right time, in the right place

Global commitment to a malaria free world

Better quality health services for communities affected by malaria

Increased demand for health services by communities affected by malaria

Better gathering and analysis of data informs and improves health services at local and national levels

Better awareness of malaria through sharing strong evidence and storytelling

Public, private and informal health providers have the skills and resources to prevent, diagnose and treat malaria and improve people's health

People know how to prevent and get treated for febrile illness. They understand their right to good health and are able to access the right care close to home

Health providers are able to generate and aggregate high quality data that is used to respond to patients' changing needs

People affected by malaria have their voices and stories heard by the British public, who become more aware and knowledgeable about malaria. Reliable information on the role of health system strengthening for malaria control informs other initiatives

PILLAR ONE

Quality Primary Health Care

Chronic shortage of resources and trained public, private and informal health providers impedes the delivery and consistency of quality health care

PILLAR TWO

Demand for & Access to Quality Primary Health Care

Communities lack awareness of, and access to, appropriate and effective prevention, diagnosis, treatment and care for febrile illness

PILLAR THREE

Surveillance & Information Systems

There's a lack of high quality data that can be aggregated and used by health providers and policy makers to make evidence-informed decisions

PILLAR FOUR

Awareness and Legacy

There's opportunity to increase awareness of malaria amongst the UK public while also highlighting the value of cross-cutting partnerships to strengthen health systems and improve malaria control

Draft Theory of Change

VISION: improved wellbeing and health outcomes for patients with SCD in SSA

IMPACT

GOAL: patient-centred, evidence-based care for patients with SCD in SSA

OUTCOMES

- Patient-centred SCD care, and evidence-based clinical interventions that meet international standards
- Sustainable solutions to barriers in accessing SCD care, with increased uptake in care
- Sustainable network of researchers and institutions able to do/support high quality IR for health problems irrespective of disease focus
- Expansion into a multi-disciplinary, multi-partner pan-Africa Centre for SCD IR

OUTPUTS

- Increased evidence-based clinical practice
- Increased SCD knowledge (advocacy and patient needs)
- Increased uptake of patient-centred care along the life course
- Interventions to increase SCD care based on solutions proposed by patients/families
- Empirically-tested programme theory from realist evaluation
- Proposals submitted for expanded SCD research and capacity strengthening programme across SSA
- Academic publications, briefs for media and policy; social media communications
- Cohort of researchers (including patients) with IR skills applicable to, and beyond, SCD
- Stronger systems in partner institutions to manage IR

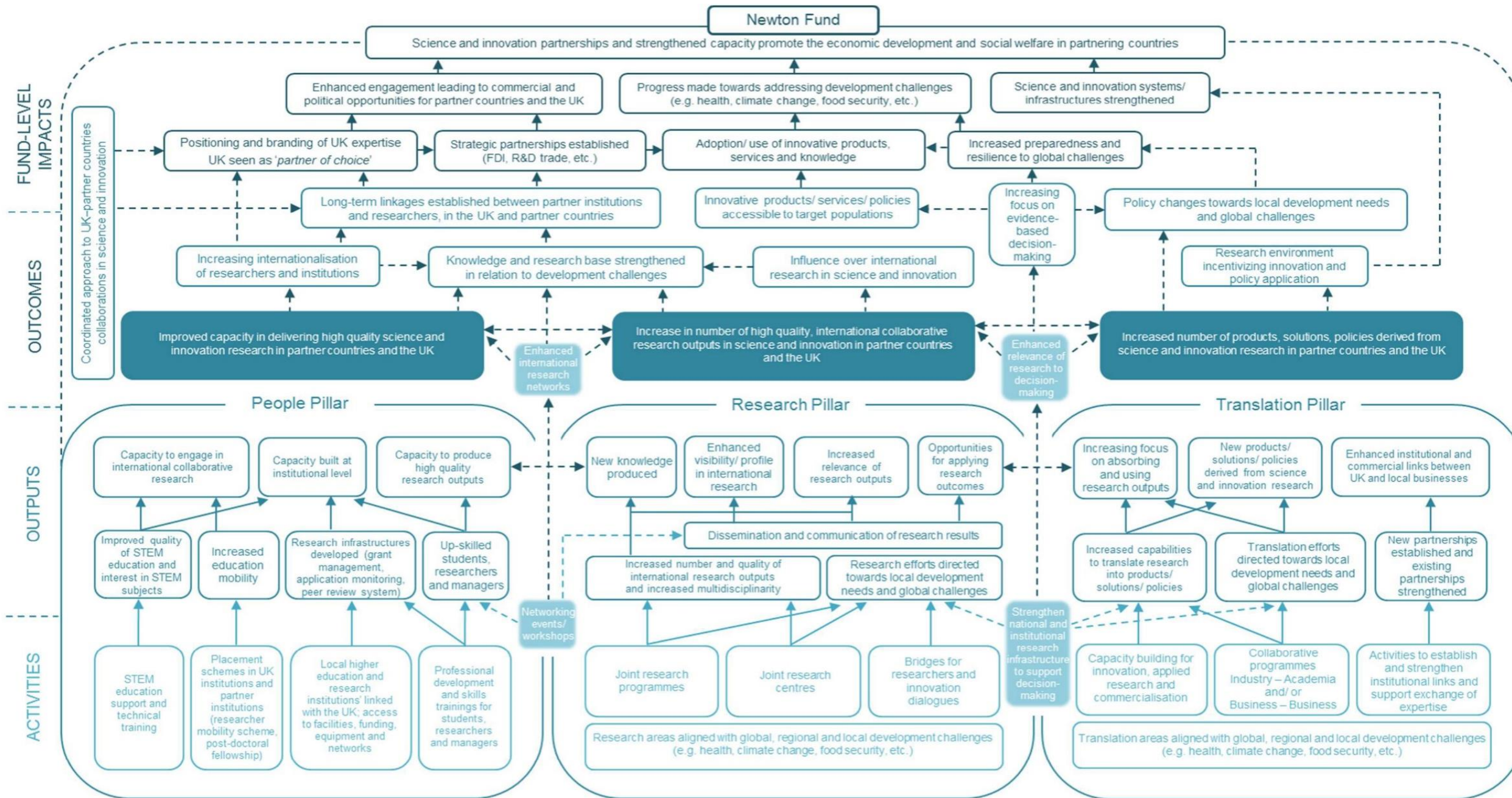
ACTIVITIES

- Situational analysis and qualitative study
Literature and newspaper review
Baseline survey
Community and facility FGDs; informant interviews
- Implementation research
PAC briefings and research cycles (communities)
Standards-based audit (facilities)
Realist evaluation
Mapping/epidemiology study
- Capacity strengthening
Recruit and train PhD students
Training/mentoring for research professionals, researchers/ teams and journalists
Institutional needs assessment for IR; plan and activities to fill gaps

Project contributes

Under project control

PRINCIPLES: patient-centred • country-led • equitable • evidence-based • ethical • sustainable



CAPTION
 → Strong evidence supporting linkages

Designing a ToC: A step-by-step approach

VISION:

GOAL:

IMPACT

OUTCOMES

ASSUMPTIONS

OUTPUTS

ACTIVITIES

Problem?
Pillar?

e.g.INDIVIDUAL

e.g.INSTITUTIONAL

e.g.SOCIETAL

PRINCIPLES:

Project contributes

Under project control

Work backwards and forwards between goal and inputs

Identify the desired long-term programme goal and then work back to identify the components needed in each of the preceding stages

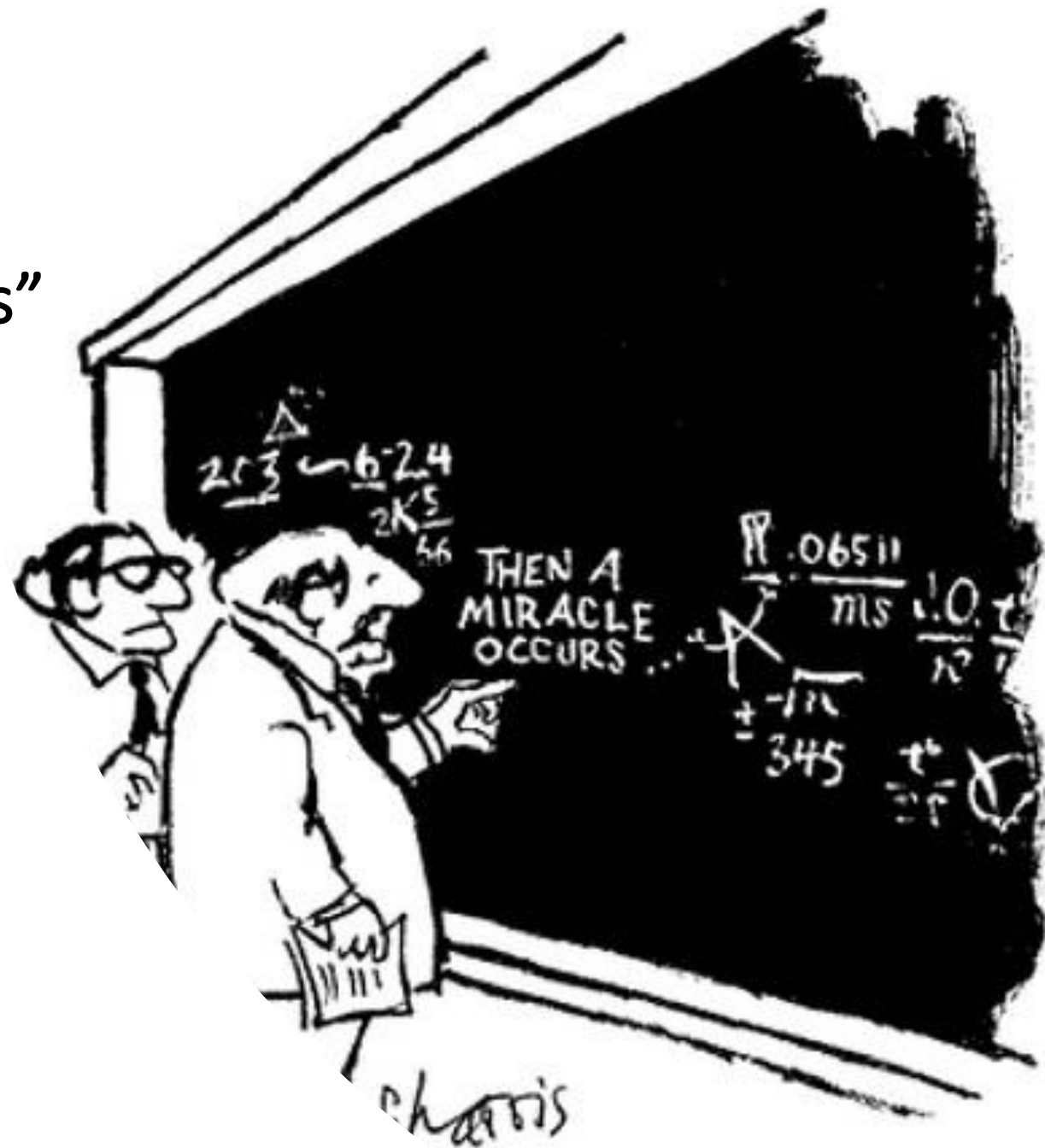
Identify what type of activity or intervention will lead to the outcomes identified on the pathway to achieving the long-term goal



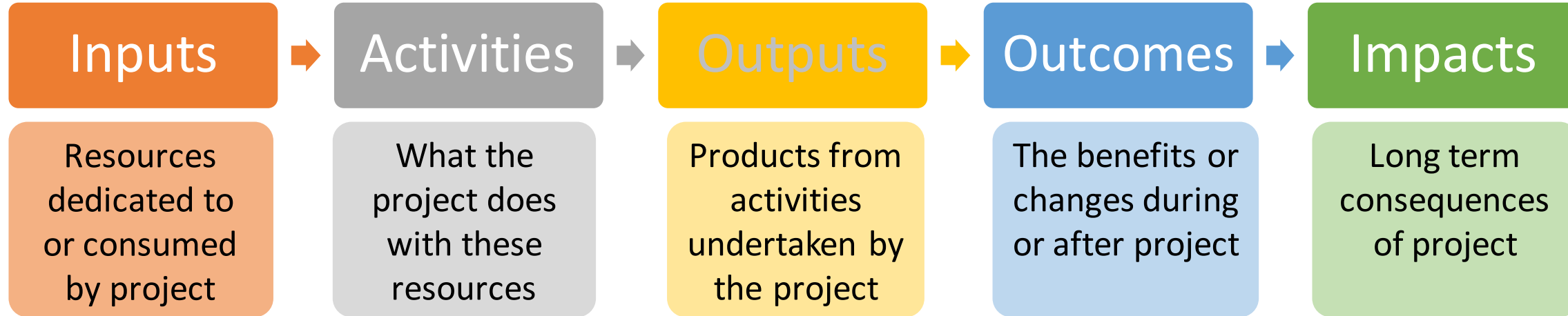
Building a ToC: EXAMPLE

Project goal = "COVID19 vaccinations"

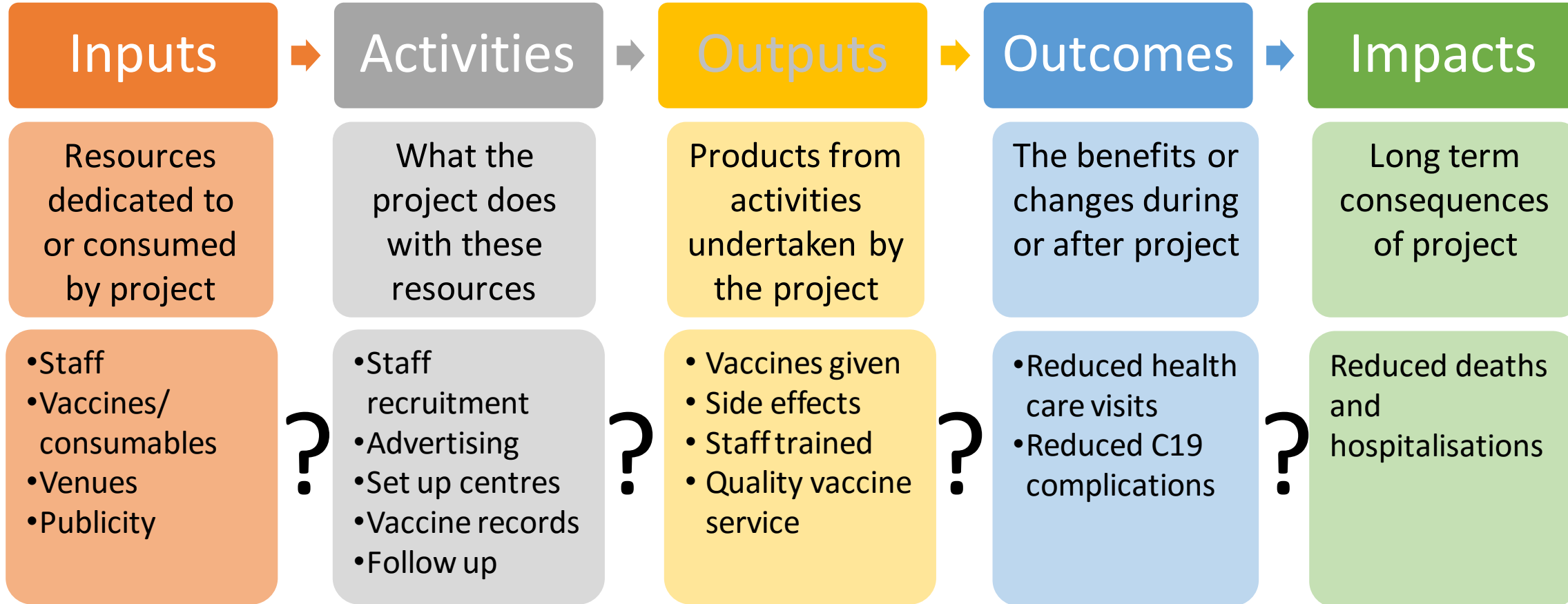
Aim: to set up and start your city's C19
vaccination programme (2 months)



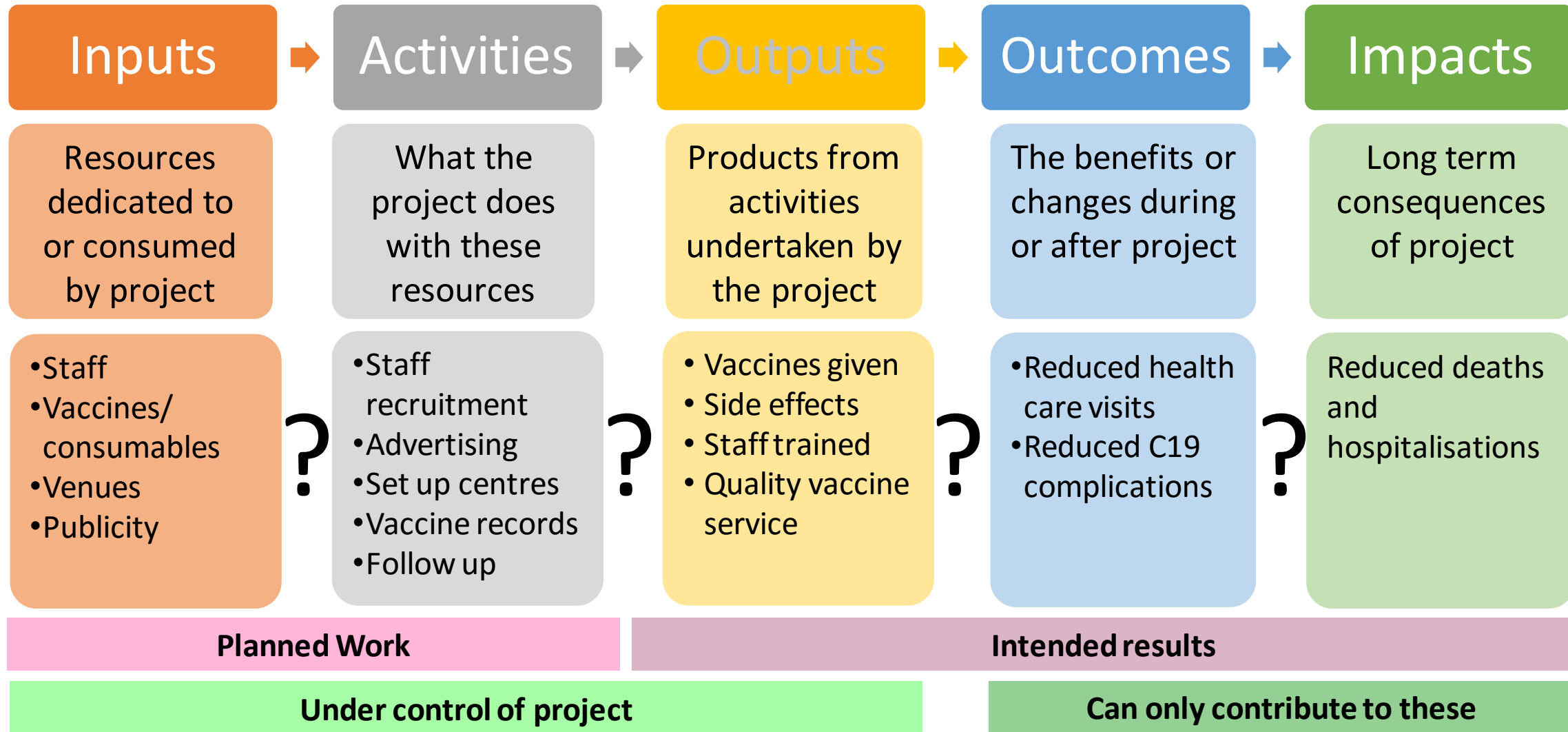
“C19 vaccination”



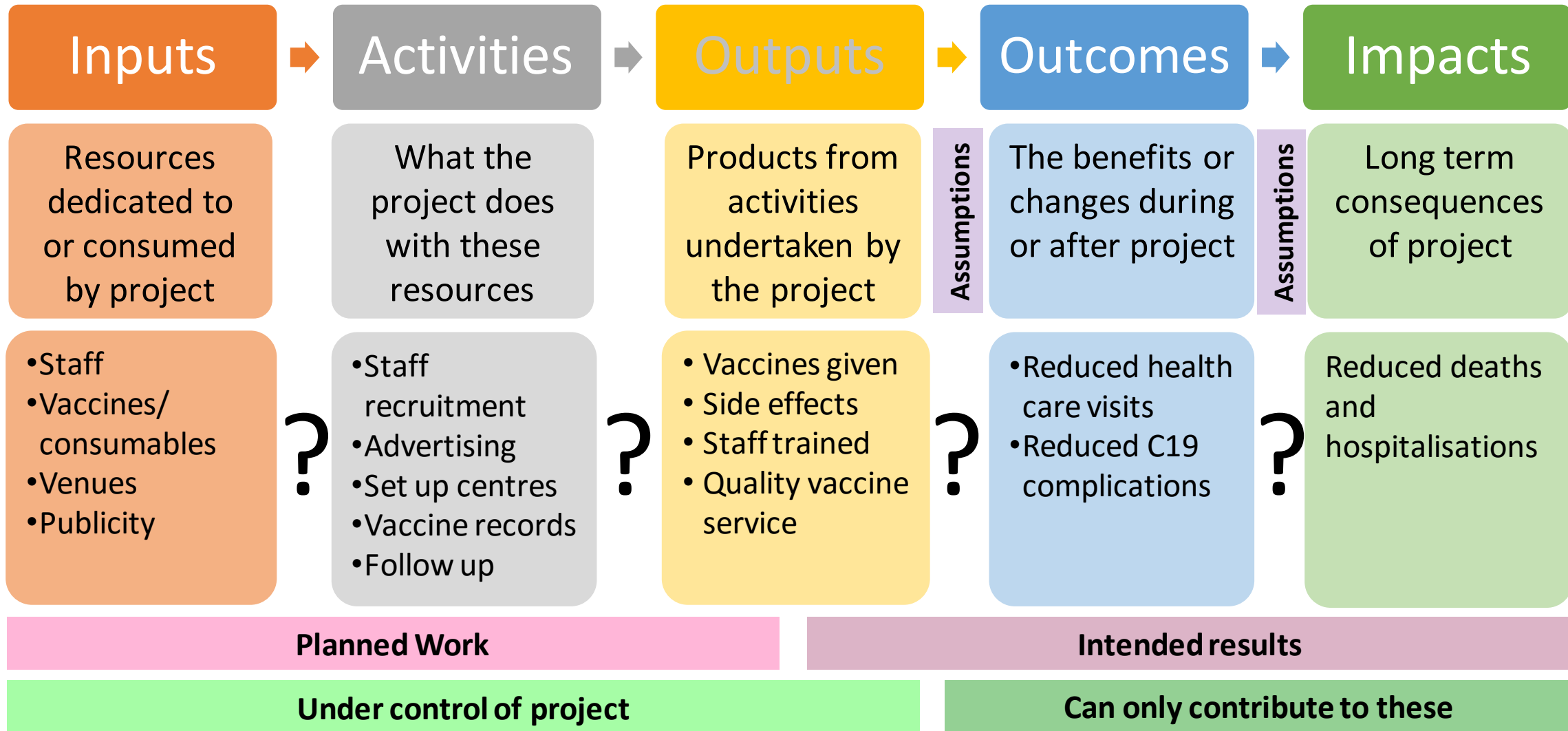
“C19 vaccination”



“C19 vaccination”



“C19 vaccination”



Assumptions

Assumptions

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Describing assumptions and risks

With partners, look (primarily):

- Between outputs and outcomes
- Between outcomes and goal

Describe all the things that could jeopardise moving along the pathway at each of these levels

In the proposal text, describe these things, their effect and likelihood

Describe (and budget for?) mitigations you will put in place

You may want to briefly indicate assumptions in the ToC

'Sustainability' in proposal text (implicit in ToC)

Indicators (proxy) to demonstrate sustainability – by project stage

Early

engagement of stakeholders
explicit plans for scale up and
influencing policies
inclusion of quality
assessments

Mid

improved resources
institutionalisation of activities
innovation and expansion

Late

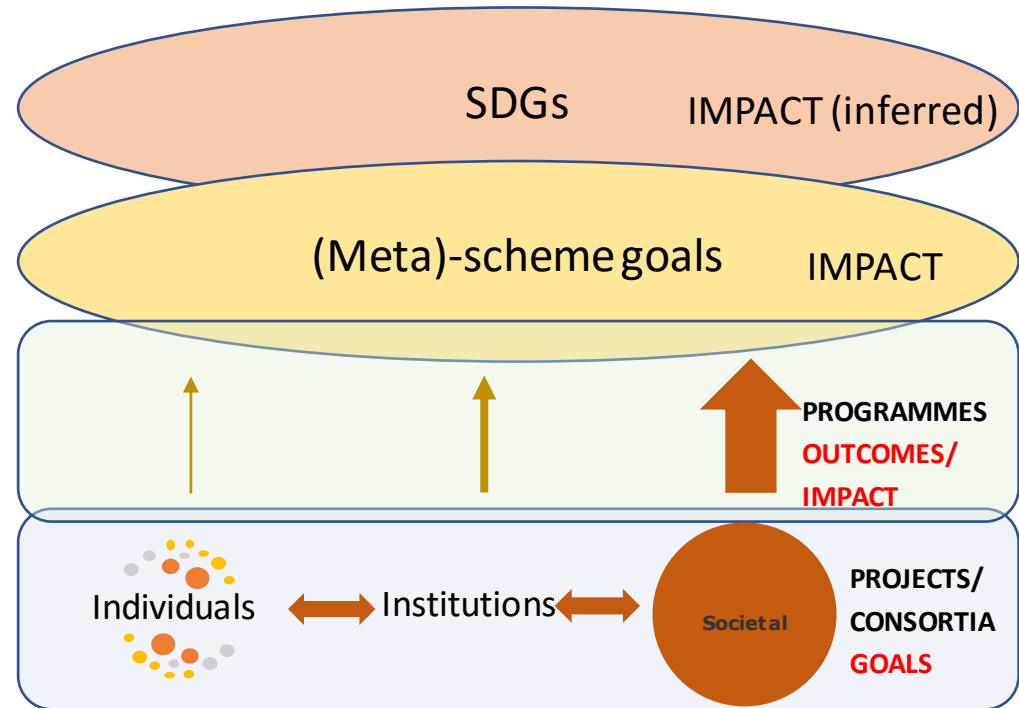
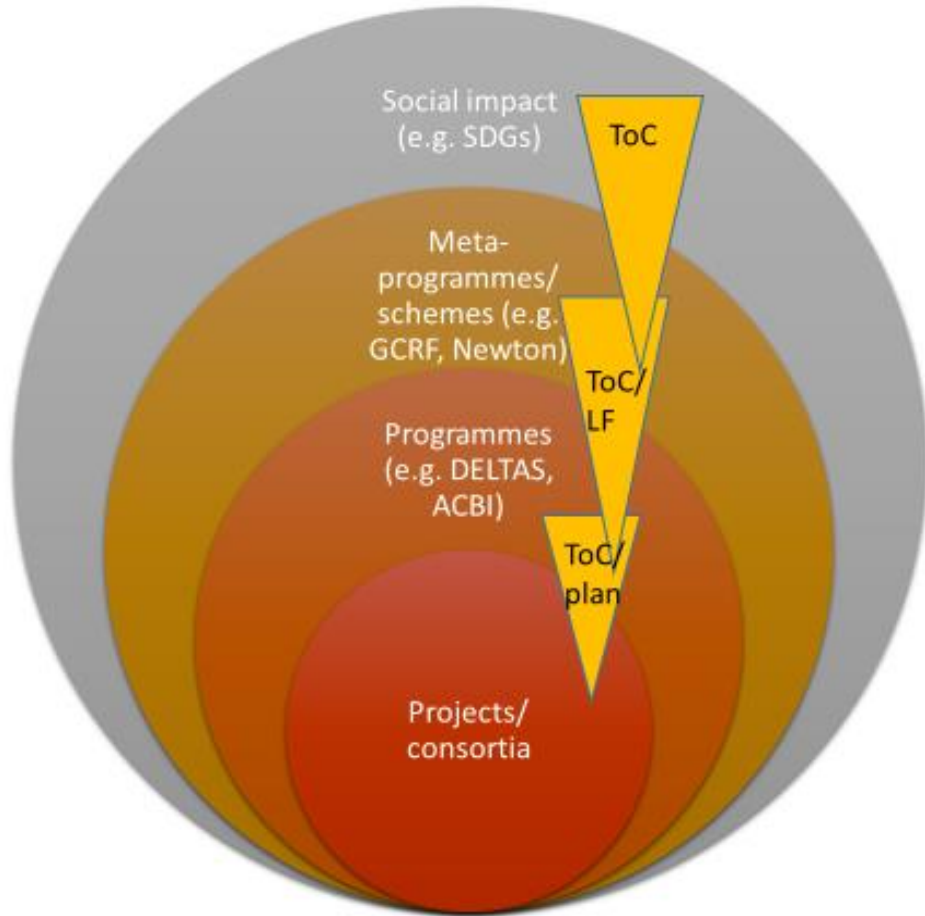
funding for core activities
LMIC-led management and
decision-making

Challenges to achieving sustainability

- high turnover of staff and stakeholders
- embedding changes into existing systems
- securing funding and influencing policy development

Aligning your ToC with the funder's ToC

Nested ToCs



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1. Designing research capacity strengthening (RCS) components within proposals

09:30-11:00, Tuesday 4th May

Dr Justin Pulford

2. How to create and use a 'Pathway to Impact'

09:30-11:00, Tuesday 18th May

Imelda Bates

3. How to manage research consortia

09:30-11:00, Tuesday 1st June

Nadia Tagoe (KEMRI-Wellcome Trust)

4. Teamwork to prepare and submit grant applications

09:30-11:00, Tuesday 15th June

Lorelei Silvester, Imelda Bates, Susie Crossman

5. How to optimise multi-disciplinary research collaborations (MDRC)

09:30-11:00, Tuesday 29th June

Yan Ding

6. How to measure research outcomes and impact (O&I)

09:30-11:00, Tuesday 13th July

Justin Pulford

CCR Seminar Series

Useful Resources

Isabel Vogel for the UK Department of International Development. **Review of the use of ‘Theory of Change’ in international development**

<https://www.gov.uk/government/news/dfid-research-review-of-the-use-of-theory-of-change-in-international-development>

Center for Theory of Change

<https://www.theoryofchange.org/what-is-theory-of-change/>

Bates I, Taegtmeier M, Squire SB, Ansong D, Nhlema-Simwaka B, Baba A, Theobald S. (2011) Indicators of sustainable capacity building for health research: analysis of four African case studies. *Health Research Policy and Systems*, 9(1), 14
doi:10.1186/1478-4505-9-14

Khisa A, Gitau E, Pulford J, Bates I. A framework and indicators to improve research capacity strengthening evaluation practice. African Population Health Research Centre & LSTM. June 2019. <https://www.gov.uk/dfid-research-outputs/a-framework-and-indicators-to-improve-research-capacity-strengthening-evaluation-practice>



Questions?



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