## 'Good' Theories of Change

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## What are ToCs?

- Models showing how interventions are expected to (or do) work
- Beyond that, no general agreement; hence the need to define what you mean by a ToC
- Furthermore, ToC can be seen as
  - A product
  - A process for agreeing and understanding
  - A framework for MEL
  - An intervention planning & design tool
  - A basis for theory-driven evaluation

## What are ToCs?

- Examples, much less 'definitions', of what a ToC is are all over the map
- Often ToCs seem to be anything with boxes and lines/arrows that represent in some fashion an intervention
- Lots of criticism:
  - Just something dreamed up and hence of questionable validity
  - No or little empirical basis
  - Too messy to use: spaghetti maps
  - Too simplistic

## Theories of change

- Impact pathways/logic models/results chains show the logic of an intervention & key steps along the way to impact
- ToCs add the causal link assumptions behind the pathway

## What are 'Good' ToCs?

Adding to the confusion, there is much less written about what comprises a good ToC.

Most if not all interventions aim at changing the behaviour of target groups and/or institutions. Hence for me, a good ToC reflects this behaviour change in an intuitive way.

Further, a good ToC is supported by prior research

Finally, a good ToC is robust: plausible and structurally sound.

## Behaviour Change ToCs

- There has been extensive social science research on behaviour change
- There a few behaviour change-based ToCs discussed, such as Bennett's hierarchy
- The common outputs, outcomes, impact ToC, I argue, is not that useful; not intuitive

## Useful ToCs

## I have written about behaviour change-based 'Useful ToCs':

Mayne, J. (2015). "Useful Theory of Change Models." *Canadian Journal of Program Evaluation* 30(2): 119-142. Available at <a href="https://evaluationcanada.ca/system/files/cjpe-entries/30-2-119\_0.pdf">https://evaluationcanada.ca/system/files/cjpe-entries/30-2-119\_0.pdf</a>

## Since then I discovered an even better behaviour change model:

Michie, S., M. M. v. Stralen and R. West (2011). "The behaviour change wheel: A new method for characterising and designing behaviour change interventions." *Implementation Science* 6(42): 11 pages. Available at

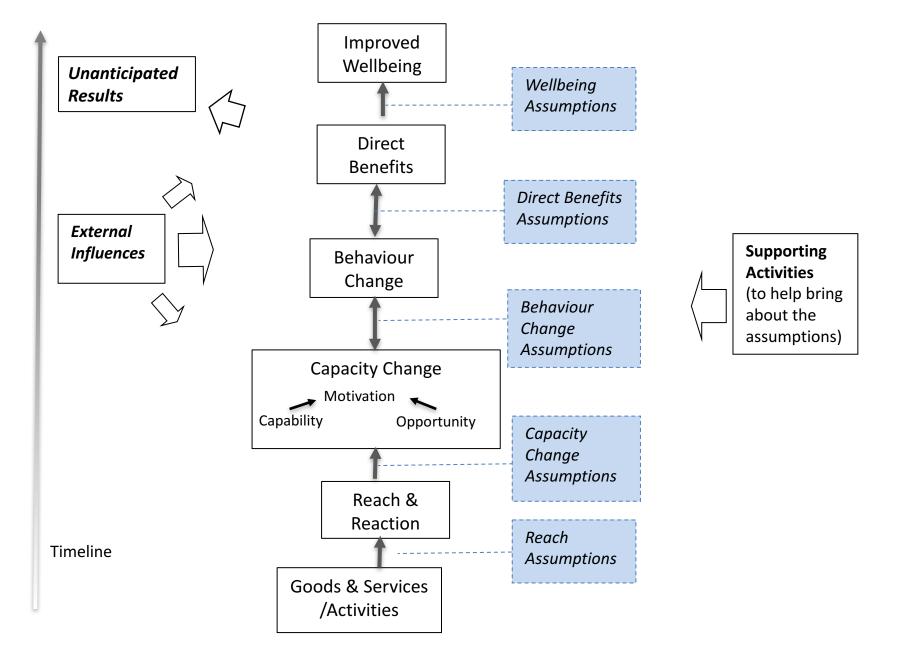
http://www.implementationscience.com/content/pdf/1748-5908-6-42.pdf

## COM-B ToC Model

Behaviour change is brought about by three *necessary* elements

- Capabilities (knowledge, skills)
- Opportunity (all the factors that lie outside the individual that make the behaviour possible or prompt it)
- Motivation (habitual processes, emotional responding, as well as analytical decisionmaking)

#### The COM-B Theory of Change Model



## Causal Link Assumptions

- Events and conditions that are (likely) necessary for the causal link to work
- They are NOT descriptions of the link
- The 'likely' allows for probabilistic interpretations: if the assumption doesn't occur, then the link is unlikely to be realized
- Can be based on prior research and/or experience, stakeholder beliefs, logical analysis

## Supporting Activities

- Actions taken to help ensure that causal link assumptions are realized
- Often means engaging with other partners
- Results in a more complicated but more likely successful intervention a comprehensive or multifaceted intervention

# The Strength of the COM-B ToC Model

- Based on a social science theory of behaviour change, rather than the usual collection of ad hoc ideas and beliefs
- Provides a structured and intuitive way to develop a ToC
- Looks, but is not linear
- A great basis for developing ToCs in complex settings

### Building a COM-B ToC

- Figure out the pathways to impact
- Develop initially in text, first setting out each step in the pathway, including when the steps are likely to occur
- Then add in the assumptions needed to get from step to step
- May then be able to intelligently simplify it
- Then can draw it
- Then get feedback on it
- Is the result a good ToC, or at least good enough?

# Theories of Change as a Model of Contributory Causes

## A ToC is a model of the intervention as an (INUS) contributing cause, identifying:

- The causal chain to impact (generative causality)
- The causal package (intervention outputs plus the assumptions)
- Explaining how and why intended results are expected to occur

## **Contribution Analysis**

Using a generative perspective on causality, CA shows that an intervention is a **contributory cause**:

- The expected result occurred
- The ToC (causal package) is sufficient
  - support factors (assumptions) occurred and any other support factors have been included in the ToC
- The intervention is necessary for the ToC to be sufficient
- Can explore the role the intervention played, such as a trigger
- And can explore the contribution played by other influencing factors

## Making a Causal claim

- Using the ToC models discussed, one can make credible causal claims about the intervention
- Provides a credible, theory-based and practical way to address causality without the need for counterfactuals

### A Nutrition Intervention

This example is of an intervention aimed at improving the nutritional diets of young pre-school children in a particular region by providing knowledge and training to mothers.

The **theory of change narrative** would be something like:

By educating and informing mothers about the importance of a nutritious diet for their children, mothers will change their past behaviour and seek to improve the diets of their children.

The **rationale assumption** here is that better information will change behaviour.

Figure 1: A Nutrition Intervention Impact Pathway

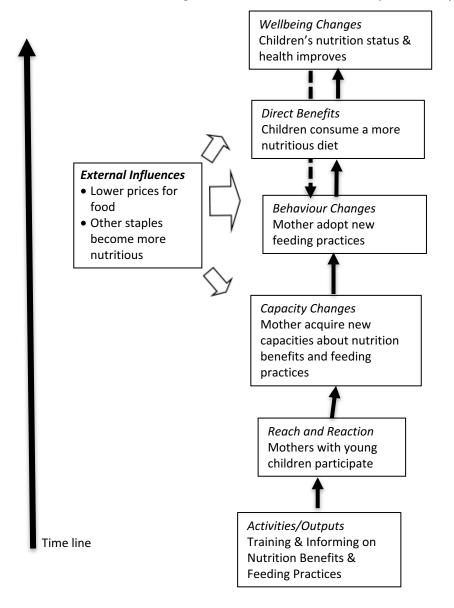
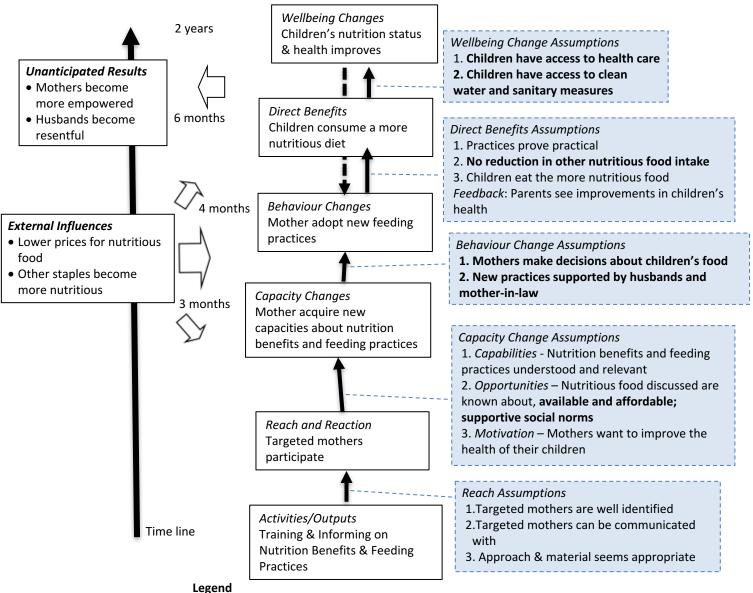


Figure 2: The Nutrition Intervention Theory of Change



**Bold** text – assumptions at-risk

Wellbeing Changes Children's nutrition status 2 years Wellbeing Change Assumptions & health improves **Unanticipated Results** 1. Children have access to health • Mothers become more care 2. Children have access to clean empowered **Direct Benefits** water and sanitary measures • Husbands become resentful 6 months Children consume a more nutritious diet **Direct Benefits Assumptions** 1. Practices prove practical **External Influences** 2. No reduction in other nutritious food intake 3. Children eat the more nutritious food • Lower prices for nutritious **Behaviour Changes** 4. Parents see improvements in children's health food Mother adopt new • Other staples become more feeding practices 4 months **Behaviour Change Assumptions** nutritious 1. Targeted mothers acquire new capacities 2. Mothers make decisions about children's food Activities/Outputs 3. Identified nutritious foods are known, available Training & Informing on and affordable **Nutrition Benefits &** 4. New practices supported by husbands and Timeline **Feeding Practices** mother-in-law

Figure 3: A Simplified Nutrition Intervention Theory of Change

#### Notes

**Enabling Environment** (Context) – Nutritious foods available and affordable, new practices supported, mothers make decisions, children have access to health care, clean water and sanitation

**Bold** text – assumptions at-risk

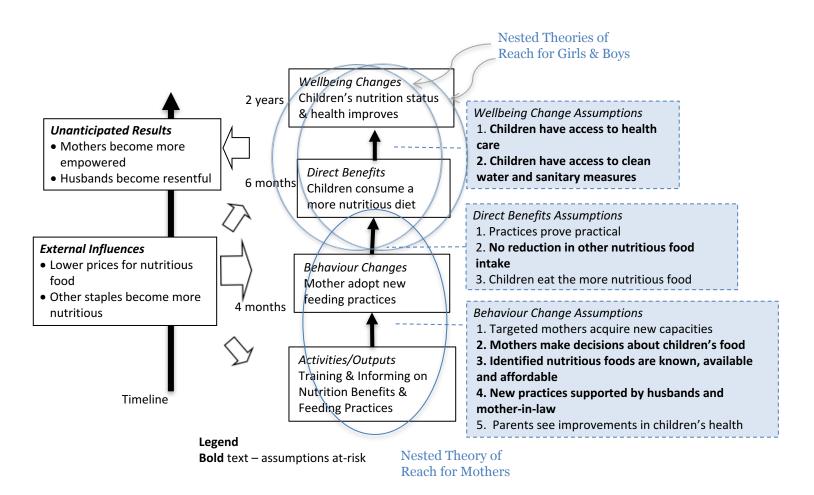
#### **Evaluation Questions**

• Does the training work in changing mothers' behaviour?

Legend

- Do all children get the same food?
- Under what conditions does the intervention work?

Figure 3: A Simplified Nutrition Intervention Theory of Change



Wellbeing Changes Children's nutrition status 2 vears Wellbeing Change Assumptions & health improves 1. Children have access to health care **Unanticipated Results** 2. Children have access to clean water • Mothers become more and sanitary measures empowered **Direct Benefits** • Husbands become resentful 6 months Children consume a more nutritious diet **Direct Benefits Assumptions** 1. Practices prove practical **External Influences** 2. No reduction in other nutritious food intake 3. Children eat the more nutritious food • Lower prices for nutritious **Behaviour Changes** 4. Parents see improvements in children's health food Mother adopt new • Other staples become more feeding practices 4 months **Behaviour Change Assumptions** nutritious 1. Targeted mothers acquire new capacities 2. Mothers make decisions about children's food Activities/Outputs 3. Identified nutritious foods are known, available Training & Informing on and affordable **Nutrition Benefits &** 4. New practices supported by husbands and ToC for Timeline **Feeding Practices** mother-in-law **Engagement** Legend

Figure 3: A Simplified Nutrition Intervention Theory of Change

#### Notes

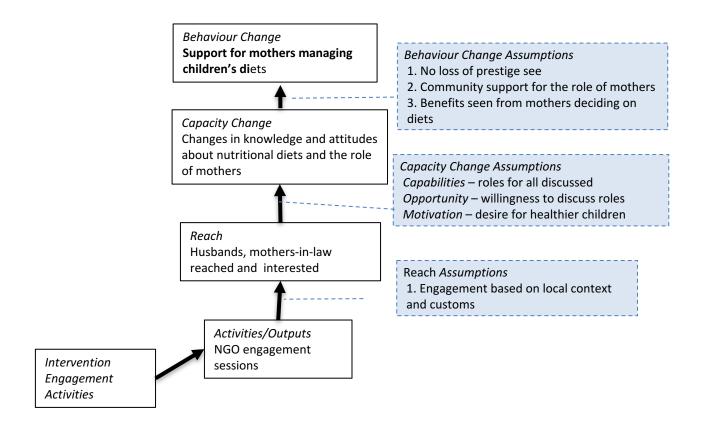
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#### **Evaluation Questions**

- Does the training work in changing mothers' behaviour?
- Do all children get the same food?
- Under what conditions does the intervention work?

Figure 4: Nested NGO Theory of Change for Engagement



### Relation to Realist Evaluation

- Realist evaluation focusses on CMO configurations: context + mechanisms produces outcomes
- CMO configurations are causal links in a ToC. That is, they are the causal link assumptions + the 'cause'
- Mid-level theories are good ToCs

## Generalizing

- Good ToCs support generalizing to other places
- Generalizing requires that the set of ToC assumptions can be transferred to another location

## What is a Robust ToC?

- A robust ToC is:
  - Structurally sound
  - Plausible
- Robustness is needed to strengthen
  - Assessing intervention design
  - Concluding on the contribution being made

## Robust ToC Criteria

#### For a **structurally sound** ToC:

- Is the ToC understandable?
- Are the ToC results and assumptions well defined?
- Is the timing sequence plausible?
- Is the ToC logically coherent?
- Are the causal link assumptions necessary or likely necessary?
- Are the assumptions independent of each other?

## Robust ToC Criteria

For a structurally sound ToC that is **plausible**:

- Is the ToC generally agreed?
- Are the results and assumptions measureable?
- Are the causal link assumptions likely to be realized?
   Are at-risk assumptions identified?
- Are the sets of assumptions for each causal link along with the prior causal factor plausibly sufficient to bring about the effect?
- Is the level of effort commensurate with the expected results?
- To what extent are the assumptions sustainable?

#### Criteria for a Robust ToC

#### **Overall Criteria**

*Understandable* Is the logic and structure of the ToC clear?

Agreed To what extent is the ToC agreed or contestable?

Level of effort Are the activities and outputs of the intervention

commensurate with the expected results?

#### **Criteria for Each Result**

*Well-defined* Is the results statement unambiguous?

*Plausible timing* Is the time frame for the result reasonable?

Logical coherence Does the result follow logically from the previous

result? Is the sequence plausible or at least possible?

Measureable Is there a need to measure the result? How can the

results be measured? What is the likely strength or

status of evidence for the result being realized?

M&E Implications What are the implications for monitoring and

evaluation?

#### Criteria for a Robust ToC (con't)

#### **Criteria for Each Assumption**

Well-defined Is the assumption unambiguous?

Logical coherence Is the assumption a pre-condition or event for the effect

sought?

Justified What is the justification for the assumption as being

necessary or likely necessary?

*Realized* Is it plausible that the assumption will be realized? Are there

at-risk assumptions that should be addressed?

Sustainable Is the assumption sustainable?

Measureable Is there a need to measure the assumption? How can the

assumption be measured? What is the likely strength or status of evidence for the assumption being realized?

*M&E Implications* What are the implications for monitoring and evaluation?

#### Criteria for each causal link

*Independence* Are the assumptions for the link independent from each

other?

A sufficient set Are the set of causal link assumptions along with the prior

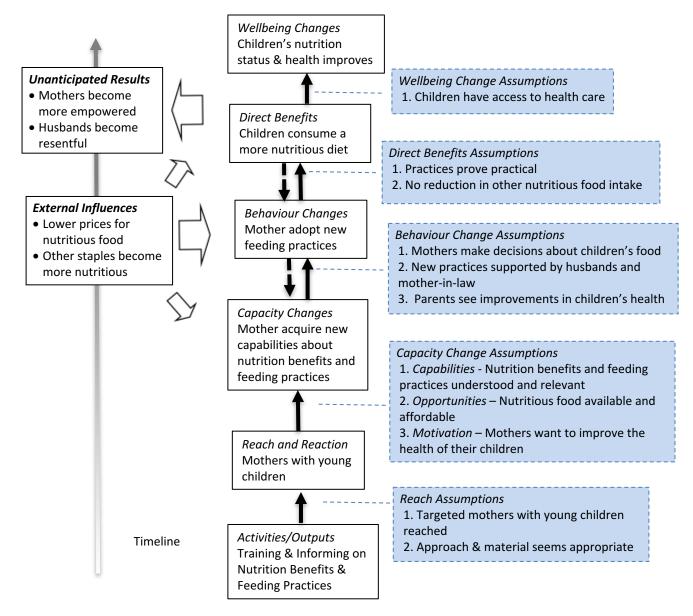
causal factor sufficient to bring about the effect? Is the link

plausible?

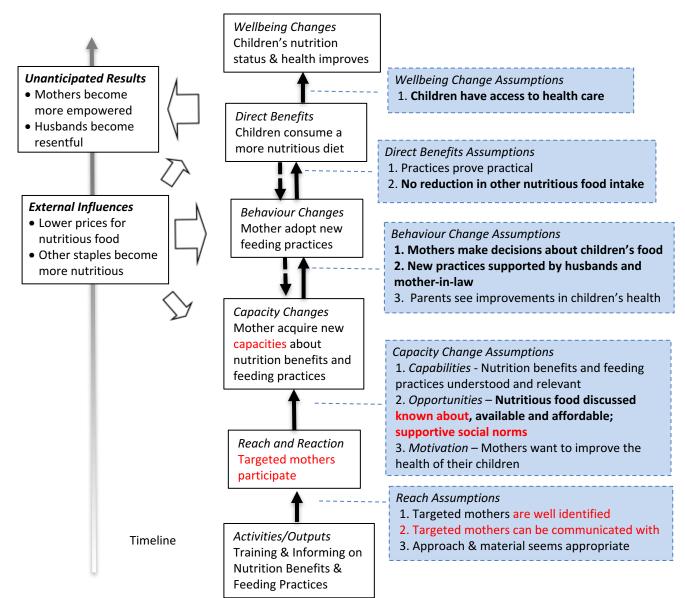
Strength/Status of What is the strength or current status of evidence for the

evidence causal link being realized?

#### A Nutrition Intervention Theory of Change (Original)



#### A Robust Nutrition Intervention Theory of Change



#### Legend

Red text – changes made in the original ToC to increase robustness

**Bold** text – assumptions at-risk

Table 1 Analysis of Nutrition Intervention Causal Link Assumptions

Causal Link Assumptions	Degree of Control	Supporting actions needed beyond core activities
Reach Assumptions		
<ol> <li>Targeted mothers with young children are well identified</li> <li>Targeted mothers can be communicated with</li> </ol>	Medium	Intervention needs to know its target population and how to communicate with them.
	Medium	Action: Likely requires outreach efforts.
3. Approach & material seems appropriate	High	Requires good planning and knowing the specific context.
Capacity Change Assumptions		
1. Nutrition benefits understood and relevant	High	Requires good planning and knowing the specific context
2. The nutritious food discussed in the sessions is known about, available and affordable;	Medium	A prerequisite for the intervention. If not likely available or affordable, need a different type of intervention such as subsidies.
		Action: Market research on locally available and affordable nutritious foods
supportive social norms		Also important to provide opportunity is that it is seen as acceptable for mothers to take decisions on what food their children eat. If this is not the case, then <b>action</b> is needed. [See below]
3. Mothers want to improve the health of their children		Can be assumed
	n/a	
Behavioural Change Assumptions 1. Mothers make decisions about children's food	Unknown	Would require knowledge of the specific context.
2. New practices supported by husbands and mother-in-law	Low	Possibly a key issue if social norms need changing.  Action: Need for engagement with husbands/mothers in law on need for better nutritional diets for children.
3. Parents see improvement's in children's heath	Medium	One would assume there has been solid research about the effects of increased nutritious diet

Direct Benefits Assumptions 1. Practices prove practical	Medium	Action: Could require monitoring to see if practices do prove practical in the specific context
2. No reduction in other nutritious food intake	High?	Should be part of the training: don't stop consuming other nutritious food. But, risk that husbands and mothers-in-law in households will insist on substituting.
		Action: Need to engage with husbands/ mothers-in-law.
3. Children eat the more nutritious food	??	Depending on what local nutritious food is available, might be an problem. <i>Action</i> : need to monitor reaction of children to new diets.
Wellbeing Change Assumptions 1. Children have access to health care, clan water and sanitary measures	??	Would probably just be assumed. If health services are a major problem, then might question the rationale for the intervention. Similarly for clean water and sanitation.

## Concluding Remarks

- Good ToCs are extremely useful n evaluation and in intervention design
- Provide a solid basis for theorydriven evaluations
- Including, I would argue, for realist evaluations

## References

Mayne, J. (2017). "Theory of Change Analysis: Building Robust Theories of Change." *Canadian Journal of Program Evaluation* 31(2).

Mayne, J. (2016). An Example of ToC Analysis. Available at <a href="https://www.researchgate.net/publication/305957815">https://www.researchgate.net/publication/305957815</a> An Example of ToC Analysis.

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