

Enhanced Theory of Change (EToC) guidance and template

ENHANCED THEORY OF CHANGE GUIDANCE

The Enhanced Theory of Change (EToC) is used for evaluability and to assist HE providers with robustly evaluating interventions and activities. The EToC guidance provides a format for capturing information about activities and mechanisms by which we expect change to happen. It includes: context; mapping of links between activities and outcomes; and assumptions and change mechanisms.

The EToC template builds on the Core Theory of Change approach, offering a tool that aids evaluability. The enhancements are listed in the following table.

Enhancement	Rationale
More granular mapping of pathways	To reflect a more nuanced model of change rather than whole groups of activities being linked to groups of outcomes
Weighted pathways – varying the thickness/gradient/colour of the lines used to connect boxes	To identify key pathways in the ToC

<p>Clickable links to an underpinning document – depending on the software the evaluator chooses to use, we recommend embedding clickable links to connect the lines in the diagram to the text summary of the change mechanism/assumptions underpinning that link</p>	<p>To explicitly state the mechanism by which we expect the activities to lead to outcomes – this will support evaluation (both impact evaluation and process evaluation) and replicability/scaling of interventions</p>
<p>An underpinning document which provides more information on the intervention and evaluation questions</p>	<p>To support replicability/scaling and evaluation – the framework we are proposing to use draws on the TIDieR framework.¹</p>

Guidelines for who should be involved in developing a Theory of Change and where to start:

1. All relevant stakeholders should be involved in the initial workshop - practitioners, evaluators, senior leaders, participants (e.g., students). Who is relevant, is likely to be influenced by the purpose of the ToC development:
 - a. If the main aim is to **capture existing practice** in a framework that supports robust evaluation, then a fairly small group of people can be involved – the evaluators, and the practitioners who know the details of what is done, what the aims are, and what the theory is that links the aims and the activities.
 - b. If the aim is to **design an effective intervention** (instead of just capturing existing practice), then it’s important to add experts on the evidence and potential participants to the process. It may be useful to collaborate with researchers from your institution’s education department who can help to underpin the intervention with research in pedagogy, subject-based knowledge, or educational psychology for example. This may provide insights into how and why an intervention is projected to work.

¹ Hoffmann, T. C., Glasziou, P. P., Boutron, I., Milne, R., Perera, R., Moher, D., ... & Michie, S. (2014). Better reporting of interventions: template for intervention description and replication (TIDieR) checklist and guide. *Bmj*, 348.

- c. If the aim is to **get buy-in** to an intervention and its rationale, then you need to include as many of the people who you want to persuade as possible (or at least representatives from each group). For example, you may be using a ToC process partly to change how an intervention is delivered, to improve its chances of success. In these circumstances, it's often important to include front line delivery staff in the process, because they have to believe in the changes for the new version of the intervention to be effectively implemented. Sometimes senior leaders need to be included for the same reason.
2. A ToC workshop should be led by an experienced facilitator – an internal evaluator or an external consultant.
3. The initial workshop is likely to take at least half a day, sometimes longer. The output from this workshop is typically then revisited and refined by a smaller group of evaluators and practitioners.
4. Start by completing the section of the diagram that you're most familiar and comfortable with. This might be influenced by how established the intervention is at the point of designing the ToC. For example:
 - a. If the intervention has not yet been (fully) designed, then it can be helpful to start from the outcomes and work backwards – so you're designing activities to achieve the end goal, through hypothesised change mechanisms.
 - b. If the intervention has already been designed, and is already being used, then it's usually easier for practitioners and evaluators to start with activities (understanding 'what' practitioners deliver), move to outcomes (what are we trying to achieve for students), then look at mechanisms (how do the activities achieve this outcome for students).

Prompts to consider when developing an Enhanced Theory of Change

Please note, these prompts are just a guide and should not restrict your creativity and autonomy, please feel free to go beyond what we have suggested here.

1. Are you developing the ToC model to represent an organisation, a department, a multi-intervention programme or just one intervention/activity? For example, you might have an organisational level ToC, with multiple programmes included in the model. Equally you could have a programme level ToC that includes multiple different types of activity.
2. Are there multiple journeys to reflect within your ToC model? E.g., practitioner journey and participant journey. Some interventions are complex and will benefit from being broken down into multiple journeys and maybe even multiple diagrams.
3. Are there loops or interactions between activities, change mechanisms and outcomes in your ToC? E.g., student self-efficacy might link to multiple activities and longer-term impact. Think about how you can represent this using different thickness/coloured lines where a connection is well-evidenced or particularly important.
4. Note, TASO suggests that thickness of the lines implies the importance of the pathway – e.g., the thickest lines indicate the principal ways that the intervention will lead to change.
5. How is your ToC meant to be read? Is it read, left to right, top to bottom or is there a numbering system the reader should follow? The structure of your ToC should be defined by you as the evaluator, to best represent the journey of change.
6. Have you included a key to help your audience interpret the different links and connections in your ToC? The key in the example EToC below is just an example, you might want to include different types of connectors/links.
7. How are you differentiating between the day-to-day elements and functions of your programme (the what, where, who and when) and the actual theory of or for change (the why and how)? You may for instance have different groups of activities (e.g., a subject-based workshop followed by a mentoring session) that make up your day-to-day delivery that all come together with educational theory or some form of causal logic to create a wider TOC.

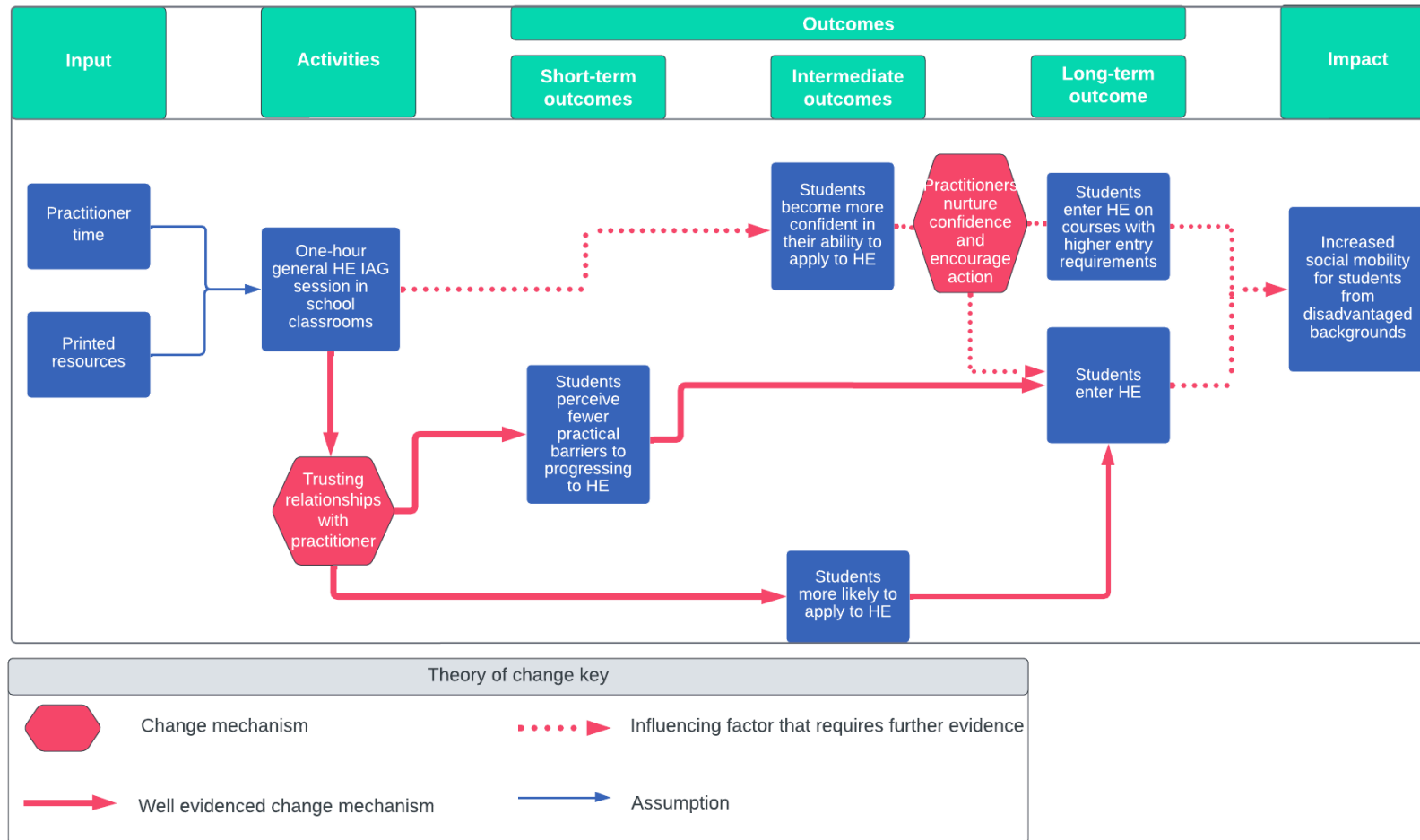
Key definitions

1. **Inputs:** The tangible and intangible resources that are required to carry out activities . For example, budget, staff, and a venue are all tangible inputs. While senior leader buy-in, knowledge and reputation are all intangible inputs.
2. **Activity:** The element(s) of the intervention or programme that are delivered by practitioners/delivery staff. For example, a one-hour information, advice, and guidance (IAG) session delivered in school classrooms, a two-hour study skills workshop delivered by teaching assistants in small groups, or a one-hour campus tour of a university delivered by a student ambassador.
3. **Outcome:**
 - a. Short term outcomes: The short-term, immediate, changes that an intervention is trying to create. For example, students have increased knowledge about how to navigate student finance (the short-term outcome) immediately after a one-hour student finance IAG workshop (the activity).
 - b. Intermediate outcome: The medium-term changes that the intervention is trying to create. Intermediate outcomes might be proxy measures for longer term outcomes (e.g., applications to HE) or outcomes of interest in and of themselves (e.g., students feel more confident, have a greater sense of belonging or make informed choices about the universities they apply to).
 - c. Long term outcome: The longer-term changes that the intervention is trying to create. For example, students from disadvantaged or underrepresented backgrounds enter HE.
4. **Impact:** The sustained change created by the intervention. For example, a more diversified student body due to underrepresented student groups entering HE or increased social mobility for students from disadvantaged backgrounds.

5. **Assumption:** The rationale and thinking that informs the ToC model. Assumptions are often implicit, the underlying beliefs about how a programme will work and what outcomes it will achieve. They can be based on prior evidence and experience, expert knowledge, or common sense. Assumptions play a critical role in shaping the design of a programme. Assumptions can be difficult to identify at first, one tactic you can employ is to ask yourself: What must be true for activities to lead to outcomes and impact? An example of an assumption is, for students to improve their grade in English (outcome) they must understand and digest the feedback they receive on their assignments and be able to apply this knowledge during their exam.
6. **Change mechanism:** The change mechanisms, sometimes referred to as ‘causal mechanisms’ or ‘causal pathways’, explain how the activity/programme is expected to lead to the anticipated outcomes and impacts. Change mechanisms are explicit and describe the underlying processes that drive change – providing a roadmap for how interventions are expected to bring about change. Change mechanisms can be conceptual or operational, and they can be classified into various types, such as behavioural, cognitive, social, organisational, and policy mechanisms. Change mechanisms have traditionally been included under the umbrella of assumptions but we have drawn them out to make them explicit in the EToC template. Change mechanisms can be evidence-based – e.g., evidence from other contexts suggests that tutoring delivered by trained staff is impactful, therefore our intervention will train all tutors to deliver subject specific tutoring. We can also have a delivery change mechanism – e.g., we think we need to deliver tutoring in one-hour time slots to classrooms of no more than 10 students for the students to be able to engage. Simultaneously, a change mechanism can capture the feelings, thoughts and experiences that occur for participants in order for the outcomes to become more likely. For example, participants **feel** like they have a trusting relationship with practitioners; or participants **think** the IAG is relevant to them and believe they can act as a result.

Example Enhanced Theory of Change (basic visual example)

This example has been built using an online tool called [LucidChart](#) (free account available). Feel free to use software that works for you.



ENHANCED THEORY OF CHANGE TEMPLATE

[Insert Enhanced Theory of Change diagram on this page. At TASO, we like using [LucidChart](#) (free account available) to build ToC diagrams but feel free to use the software that works best for you (PowerPoint or Miro etc.)]

Inputs	Activities	Outcomes			Impact
		Short	Intermediate	Long	

ENHANCED THEORY OF CHANGE UNDERPINNING NARRATIVE
VERSION Add version number/date here and any notes on updates/changes
NAME Provide the name or a phrase that describes the intervention.

WHY IS THE INTERVENTION BEING RUN?

Describe any rationale, theory, or goal of the elements essential to the intervention.

WHO IS THE INTERVENTION FOR?

Describe the participants or beneficiaries

WHAT IS THE INTERVENTION?

Materials: Describe any physical or informational materials used in the intervention, including those provided to participants or used in intervention delivery or in training of intervention providers. Provide information on where the materials can be accessed (e.g. online appendix, URL).

Procedures: Describe each of the procedures, activities, and/or processes used in the intervention, including any enabling or support activities.

WHAT IS THE INTERVENTION EXPECTED TO ACHIEVE?

Outcomes:

- Describe the short, intermediate and long-term outcomes.
- Indicate whether outcomes are behavioural or non-behavioural.

Impact – Describe the primary impact you expect the intervention to achieve.

WHO IS DELIVERING THE INTERVENTION?

Describe their expertise, background and any specific training given.

HOW IS THE INTERVENTION DELIVERED?

Describe the modes of delivery (e.g. face-to-face or by some other mechanism, such as internet or telephone) of the intervention and whether it is provided individually or in a group.

WHERE IS THE INTERVENTION DELIVERED?

Describe the type(s) of location(s) where the intervention occurs, including any necessary infrastructure or relevant features.

HOW MANY TIMES WILL THE INTERVENTION BE DELIVERED? OVER HOW LONG?

Describe the number of times the intervention was delivered and over what period of time including the number of sessions, their schedule, and their duration/intensity.

WILL THE INTERVENTION BE TAILORED?

If the intervention will be personalised or adapted, then describe what, why, when, and how.

HOW WILL IMPLEMENTATION BE OPTIMISED?

Describe any strategies to maximise effective implementation

WHO ARE THE KEY ACTORS / STAKEHOLDERS?

Describe any key actors' stakeholders who need to be involved in the design, set-up, or delivery of the activity/programme:

- Are there any dependencies – relationship with local schools or implementation partners.
- Collaboration partners – is this activity / programme part of a wider collaborative project or sector initiative?

CHANGE MECHANISMS

For each link/connection that is characterised as a change mechanism in the diagram, please outline the mechanism below:

Change mechanism 1

- *The young people participating in the programme build a trusting relationship with the Outreach Officer and Student Ambassador(s). This trusting relationship is important for sustaining the young persons' engagement and in the programme and change in outcomes.*
- *The evidence for this change mechanism comes from . . . E.g., existing evidence on trusting relationships or previous insight from running the programme.*

Change mechanism 2

Change mechanism 3

Change mechanism 4

Change mechanism 5

Change mechanism 6

References for all change mechanisms

Add references for all evidence cited

ASSUMPTIONS

For each link/connection that is characterised as an assumption in the diagram, please outline the assumption below:

Assumption 1

- We assume students will attend the session and engage with the material being presented. . . .

- This assumption is based on previous experience of delivering similar sessions in schools...

Assumption 2

Assumption 3

Assumption 4

Assumption 5

Assumption 6

References for the assumptions

Add references for all evidence cited

WHAT IS THE EVALUATION AIM?

Describe the aim of the evaluation – e.g., to understand the overall efficacy of the intervention, to unpack specific change mechanisms or causal pathways or to estimate efficiency/value for money etc.

WHAT ARE THE EVALUATION QUESTIONS?

Outline the key evaluation questions

WHAT METHODOLOGY ARE YOU USING?

Briefly outline the primary methodology that you will use to evaluate the intervention – e.g., a Contribution Analysis or a Randomised Controlled Trial etc.

RISKS AND LIMITATIONS

Outline the main risks and limitations to delivery and to the Theory of Change.
Are there any external factors or pressures that need to be considered?

RISK AND LIMITATION	MITIGATION