

Theory of Change Guidebook

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Calgary Homeless
FOUNDATION

Theory of Change Guidebook
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Overview

In alignment with our purpose – guiding the fight against homelessness – and in collaboration with our partners, Calgary Homeless Foundation (CHF) operates a coordinated, recovery-oriented system of care. In this context, recovery means improvement in the quality of life for participants in the system of care, understood across four impact domains of home, health, finance, and connection.

With 20 partner organizations and over 50 programs providing supports to more than 2000 people experiencing multiple, often co-morbid and tri-morbid challenges, the system of care operates in significant complexity. CHF is committed to supporting our partners in continually enhancing our collective response to homelessness, in part by building a culture of learning and evaluation. In this work, we are guided by the principles of open learning for innovation, measurement for accountability, and sense-making for strategic action.

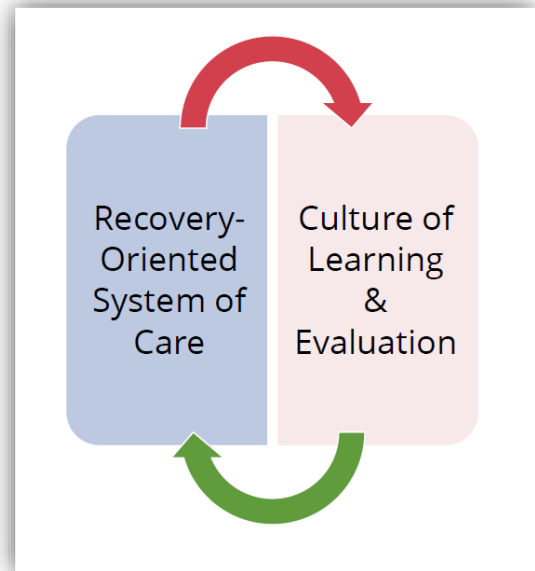


Fig 1 – Related strategic directions

Beginning in the fiscal year 2022-23, CHF is piloting a Theory of Change tool as part of our ongoing, learning-focused evaluation work. All programs in the system of care will be supported to create a Theory of Change document, to guide reflective practice and continuous improvement based on the above pillars, over the course of the year.

This document serves as a detailed guide to the Theory of Change document.

Purpose

At its most basic level, the purpose of a Theory of Change is to articulate a program’s belief about why and how the program works.

Anyone who designs and implements a program already has a underlying “theory” – none of us are acting at random. The process of documentation allows us to make *explicit* what is often left *implicit*, to surface our assumptions and test them against reality. This process should be highly participatory and help to build *shared understanding* of why and how the program works. The drafting of a Theory of Change is not intended to be a lonely exercise of a single writer - we encourage you to facilitate conversation among your leadership, management, staff and participants. Don’t worry if that seems out of reach – it isn’t so much a pre-requisite as a new way of doing things which we will build together over time.

In partnership with seven early-adopter agencies over the course of 2021, we designed and refined a particular structure to our ToC tool. It is a first-of-its-kind technique, which will allow us to:

- Capture each program’s unique context and design
- Map the unique continuum-of-change experienced by participants in each program
- Understand the causal links between context/design and outcomes
- Combine and aggregate program-level outcomes to system-level impact

Most importantly, each program’s Theory of Change will serve as a guiding document for ongoing evaluative and reflective practice between the program and CHF, in the format of monthly and quarterly conversations with your System Planner. The goal, as stated in our strategic plan, is to “elevate the funding relationship between CHF and the funded agency beyond task management, efficiency and performance,” and to put ourselves in position to do genuine collective learning.

Structure

The innovative component of this technique is its capacity to bridge between the program-specific and the system-level. To accomplish this, we adopted a very specific structure to the document.

Based on elements borrowed from Realist Evaluation, Outcome Mapping, and Outcome Harvesting, our Theory of Change consists of three sections:

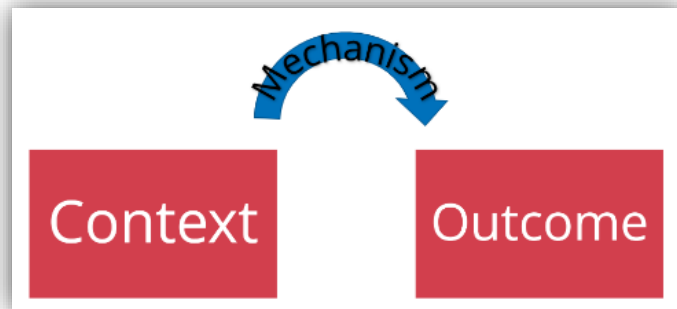


Fig 2 – Context-Mechanism-Outcome structure

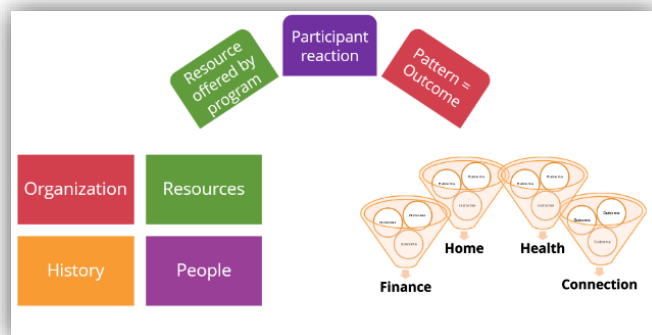


Fig 3 – Context-Mechanism-Outcome detail

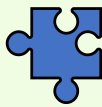
1. CONTEXT
2. CAUSAL MECHANISMS
3. OUTCOMES

The remainder of this guide provides detail about each section.

Section 1 – Context

Every program is situated within a unique context. This section of the Theory of Change is the least formulaic, as it is designed to surface a genuine understanding of each program. Your program is different from every other program in some specific way – this is the opportunity to clarify how.

The section consists of several open-text narrative descriptions and lists, supporting program description from multiple lenses: *organizational context*, *historical context*, *relational context*, and *program design*. As you complete the sub-sections, you will begin at the broadest level, then systematically create ever more detailed descriptions.



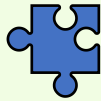
Tip: With open-text narrative questions, it can be hard to know just how much to write. We provide wordcount suggestions and guiding questions to get you started.

1a. Organizational Context

A significant part of the uniqueness of each program is related to its home agency. The Organizational Context sub-section asks you to consider this link explicitly, and it consists of a single narrative entry.

Consider the following guiding questions:

- *What is the link between your agency's purpose/mission and this program? To what extent is the agency focused on homelessness, or on other factors relevant to recovery from homelessness?*
- *How integrated is the program in its agency? Are there resources or capacities that are unique to the organization?*



Tip: Avoid the temptation to copy-and-paste your Vision and Mission statements. Try to provide a narrative consideration of the above questions, aiming for approximately 200 words.

1b. Historical Context

Every program evolves over time. Responses to the changing needs of the population we serve, changes in organizational priorities, economic factors, new promising practices, or staff turnover all contribute to adaptation. This section documents a high-level overview of the program's beginning and past, to facilitate a better conversation about its present and future.

Program Roots

A brief description of how the program was first designed and implemented. Aiming for approximately 50 words, consider the following questions:

- *When did the program first come to be?*
- *What was its initial purpose at that time?*
- *What were some important first features (e.g. program size, operating model, focus population, etc.)*

Recent Changes

This section is focused specifically on changes to *program design*, using a 2-year time period as its timeline. For example, a change in staffing might not make its way into this question, but a change in staffing-model would.

Over time, this section will serve as a running log of program adaptations and contribute to sense-making conversation and analysis.



Tip: Structure your response as a brief list of adaptations, e.g.:

- 2021 – increased program capacity from 17 to 19
- 2020 – changed staffing model to include onsite PT nurse
- 2020 – changed eligibility requirements

Possibilities and Constraints

In addition to changes we make, there are changes we would like to make but cannot. The tension between the ideal state and real-world constraints is an important one to have collective understanding about. This section asks you to document any relevant constraints to your program design. Consider the guiding questions:

- What changes to program design would you make in an ideal world?
- What are internal or external factors that act as barriers to these changes?

Examples of internal constraints might be organizational capacity or direction. External constraints might be financial, systemic, or environmental.



1c. Relational Context

This section is concerned with the different people and groups that encounter the program in different ways. It introduces some new, technical language, which is defined both in this section and in the glossary.

Social Actors

Social Actors are people who experience change by engaging with the program. They are its intended beneficiaries.

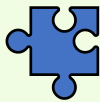
In different contexts, you might use similar words like “residents”, “clients”, or “participants.” We chose the language of social *actor* to signify people’s *active* engagement as a characteristic of positive change. People are not passive recipients of benefits. They engage (or don’t) with resources and supports they encounter, as a part of their own journey.

Complete this section by creating a list of categories of social actors. Consider the simple guiding question:

- *Whom does your program intend to engage?*

If your program provides the same types of resources to all of its participants, you might only have one group of social actors, i.e. “Program Participants”.

If your program provides specialized supports or opportunities to different groups of its participants, you may have multiple groups. For example, a family program might specify adults and children as separate groups; while an integrated medical model might delineate based on current diagnosis or other need.

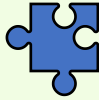


Tip: Start somewhere! Later sections of this Theory of Change will provide an opportunity to cross-reference and add or subtract from this list as appropriate.

Change Agents

Change Agents are people who deliver the program.

This category can include staff, volunteers, other participants (e.g. peer support models), and external partners. The section provides an opportunity to describe your staffing model: please add a separate line for each role.



Tip: Check for consistency with your Schedule B – each role labelled as “direct” in the program budget should also be listed here.

Boundary Partners

Boundary Partners are stakeholders who influence or observe the program, but do not directly participate in it.

In this section, you will consider other individuals or organizations who may be relevant to your program planning and implementation. Examples for each of four sub-sections include:

- Agency Staff: organizational leadership, staff of other programs, support staff.
- Governance / Learning Partners: Board, funders, system-level partners
- Landlords: for housing programs, your major landlord relationships
- External Partners: distinct from external partners who appear in “change agents”, these do not provide services as part of your program. Examples may include neighbours, Community Associations, local businesses, etc.

1d. Program Design

This section includes details about what the program does. It begins with an open-text description and concludes with a specific list of “who does what.”

Service Model

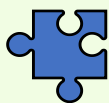
Each program provides supports and opportunities to its participants, based on some combination of program design elements and principles of practice. Describe your program, considering the following guiding questions:

- What program models underpin your design? What continuum of services is it with?
- What population-specific considerations, if any, does the program support (e.g. age, gender, culture, trauma)?
- What informs your staffing model (e.g. caseload ratios, specialized supports, holistic supports, etc.)?
- What is the expected duration of participation? How are the different stages of engagement (intake / move-in, ongoing supports, positive exit) planned for and supported?

Activities / Inputs

Each program provides supports and opportunities to its participants. This section is a list of resources available to your program participants. Resources could be in the form of activities that Social Actors might participate in (e.g. “case management”, “cultural support groups,” “med management”), or in the form of program requirements (e.g. “unit safety checks”), or in the form of physical spaces (e.g. “shared dining area,” “art space”, “backyard garden”).

Each list item in this section should consist of a brief title, a short specific definition, and the Change Agent responsible.



Tip: Make sure that every Change Agent listed in the previous section is represented here, and vice versa.

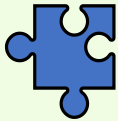
Some examples might read as follows:

Food Security

The food security program in building X consists of connecting participants with external providers (e.g. Meals on Wheels, cultural food banks, etc.). The program is administered by all case managers.

Sharing Circles

Every Friday night, all residents are invited to participate in a sharing circle supported by volunteer Knowledge Keepers.



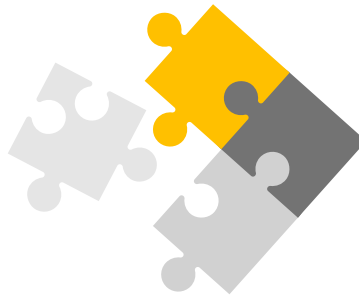
Tip: Don't include anticipated outcomes in these descriptions, though you will be tempted to!

For example, “*connecting participants with food providers*” is an activity, while “*to help them have access to nutritious, affordable meals*” is an outcome. Outcomes will be described in a robust way in the next section.

This concludes “Section 1: Context”.

It is the longest of the three sections – congratulations!

In completing it, you will have defined all the components that need to be tied together in the subsequent sections.

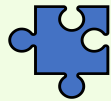


Section 2 – Causal Mechanisms

Function

The Causal Mechanism section is the “theory” part of your Theory of Change.

In this section, you will describe the changes you expect program participants to experience, when they engage with program resources as social actors.



Tip: This section is the most technical, but it will allow you to surface a lot of hidden knowledge.

Structure

The section consists of a list of “change statements” – as many as you need, but at least one for each of the Activities/Inputs you listed in the previous section.

A change statement is a hypothesis about what happens when a Social Actor consistently reacts to a resource provided by the program.

Each change statement connects multiple components in a very specific, predictable structure. The structure helps to clarify our thinking and makes our hypotheses testable in the future. The structure for each change statement mimics the following template sentence:

When Social Actors react to a resource, their situation changes.

The following examples are from completed Theories of Change:

Example 1: *“When residents participate in cultural activities, they increase their knowledge of, and participation in, cultural healing strategies.”*

Example 2: *“When residents engage with the financial literacy program, they grow the sources and amount of their income, and improve their financial management capacity.”*

Coherence

To build an effective change statement, you need to understand the role of each part of the template sentence.

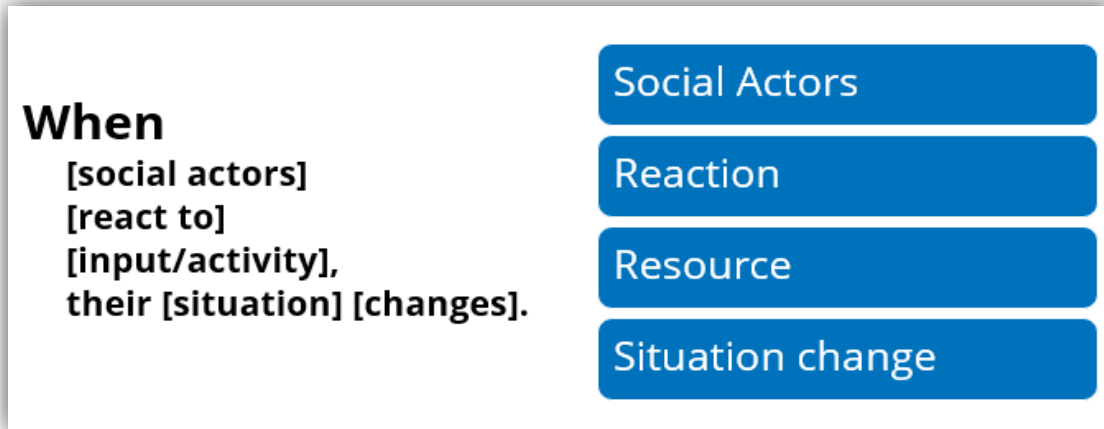


Fig 3 – Change Statement detail

1. Social Actors

The group identified here flows through directly from the previous section. Each group of Social Actors you previously identified should have at least one change statement in this section.

2. Reaction

Following the template sentence structure will help you ensure you write in the active voice. Similarly, the verb you use in this place should be an active verb.

Some examples of active verbs include: “participate,” “engage,” “connect,” “reach out,” “use,” “access,” etc.

3. Resource

The resource specified in the change statement should be the title of one of the “Activities / Inputs” you defined in the previous section. There is no need to complicate this sentence with an explanation of what the resource is or who provides it – you created this clarity in the previous section.



Tip: Each Activity or Input described in the previous section should appear in at least one change statement.

4. Situation Change (“Outcome Descriptor”)

This is the part of the sentence which completes your hypothesis. This is the part of the sentence which links your work and your participants’ reaction to that work with its outcome. The guiding question is: *When a participant meaningfully and repeatedly engages with this resource, what changes for them?*

There are many types of changes you might refer to. You might think about changes to internal states like knowledge or attitude, changes in behaviour, or changes in relationship.

Whatever type of change you hypothesize, aim at specificity. The broader a statement, the harder it is to test. Compare the following (fictional) examples:

Example 3: *“When parents engage in Peer Support groups, they gain insight and strategies, leading to more positive interactions with their children.”*

Example 4: *“When parents come to Peer Support circles, they become better parents.”*

In Example 3, we can follow the causal mechanisms – from awareness change and skill building to behaviour change. This allows us to ask multiple questions and test and refine our hypothesis. In Example 4, it is more difficult to ask meaningful questions and learn from experience.



Tip: A single change statement may include more than one outcome descriptor (Example 2), or a chain of events (Example 3).

Since this part of the sentence describes the anticipated change, we call it the “outcome descriptor.”

This concludes “Section 2: Causal Mechanisms”.

You have now completed all the program-specific elements of your Theory of Change! Congratulations.

All that remains is to link your anticipated outcomes to the impact domains.



Section 3 – Outcomes

The Outcome section of the Theory of Change is designed to understand impact alignment at a program level, and to enable aggregation of impact across multiple programs. In order to accomplish this, the expected outcomes of each program (which you have now described in detail) are mapped onto the shared principles of impact – the four impact domains.

In Section 3 of the Theory of Change template, you will list each of your outcome descriptors once, and indicate which domain it is aligned with *most directly*.

We recognize that all four impact domains are tightly interrelated. Changes in health lead to changes in housing. Changes in community connection implicate changes in financial wellbeing. Because of this, it may be tempting to associate every outcome with every domain. Resist the temptation! As a rule of thumb, most descriptors should align with one domain, although some will legitimately map onto multiple.

Selecting Outcome Descriptors

In the previous section, you worked hard to write change statements that are as specific as possible. There are three different types of statements you may have written.

“Single Outcome” Statements

Some change statements will have exactly one outcome descriptor (Example 1). In this case, include the outcome descriptor in your Outcome Map directly:

<u>Change Statement</u>	<u>Outcome Descriptor to Include</u>
<i>When residents participate in cultural activities, they increase their knowledge of, and participation in, cultural healing strategies.</i>	Increased knowledge and participation in cultural activities

“Parallel Outcome” Statements

Some change statements will have multiple parallel outcome descriptors (Example 2).

<u>Change Statement</u>	<u>Outcome Descriptors to Include</u>
<i>When residents engage with the financial literacy program, they grow the sources and amount of their income, and improve their financial management capacity.</i>	<ol style="list-style-type: none"> 1. Increased sources and amount of income 2. Improved financial management skills

“Chain of Outcomes” Statements

Some change statements will have multiple outcomes in a chain of change (Example 3).

<u>Change Statement</u>	<u>Outcome Descriptors to Include</u>
<p><i>When parents engage in Peer Support groups, they gain insight and strategies, leading to more positive interactions with their children.</i></p>	<p>Increased parent-child positive interactions</p>



Tip: Writing Change Statements and Outcome Descriptors is not an exact science. Be specific and concrete, but also allow yourself some creativity. Multiple sets of eyes will help to mitigate any accidental biases.



Mapping Outcomes to Domains

In the final section of your Theory of Change, you will enter each outcome descriptor and use a set of checkboxes to link it to the relevant domains.

After your Theory of Change is completed and submitted, we will create a visualization of your Outcome-to-Domain map to make it easier to interpret. Examples of both the “input style” and the visualization are below.

Increased knowledge and participation in cultural healing.	Home <input type="checkbox"/>	Health <input checked="" type="checkbox"/>
	Finance <input type="checkbox"/>	Connection <input checked="" type="checkbox"/>
Increased sources and amount of income	Home <input type="checkbox"/>	Health <input type="checkbox"/>
	Finance <input checked="" type="checkbox"/>	Connection <input type="checkbox"/>
Improved financial management skills	Home <input type="checkbox"/>	Health <input type="checkbox"/>
	Finance <input checked="" type="checkbox"/>	Connection <input type="checkbox"/>
Increased parent-child positive interactions	Home <input type="checkbox"/>	Health <input checked="" type="checkbox"/>
	Finance <input type="checkbox"/>	Connection <input checked="" type="checkbox"/>
Click here to enter outcome descriptor; click '+' to add more rows.	Home <input type="checkbox"/>	Health <input type="checkbox"/>
	Finance <input type="checkbox"/>	Connection <input type="checkbox"/>

Fig 4 – Outcome-to-Domain Map, table style

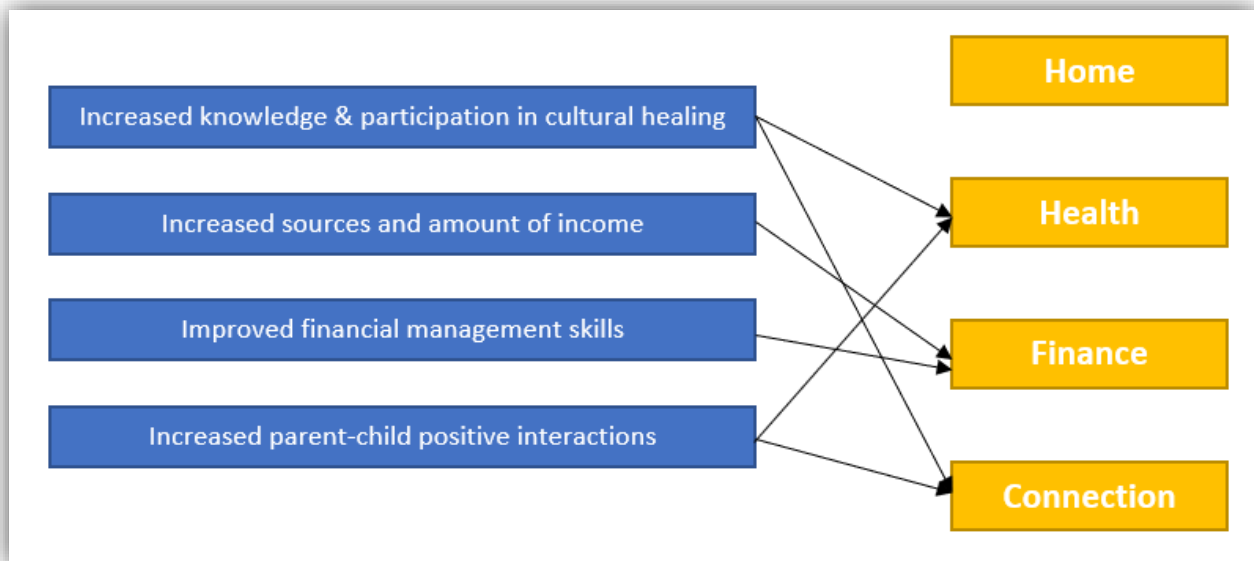


Fig 5 – Outcome-to-Domain Map, visual style

Glossary

General Terms

Recovery

In the context of the recovery-oriented homeless-serving system of care, recovery refers to quality of life improvements understood as occurring in the four impact domains of Home, Health, Finance, and Connection.

Impact Domain: Home

Outcomes aligned with the “Home” domain include the broad categories of housing stability and housing quality, as well as any related changes.

Impact Domain: Health

Outcomes aligned with the “Health” domain include changes related to physical health, mental health, addictions, access to care, and related changes.

Impact Domain: Finance

Outcomes aligned with the “Finance” domain include poverty reduction, financial stability, financial literacy, and related changes.

Impact Domain: Connection

Outcomes aligned with the “Connection” domain refer to positive community connections and include formal supports, natural supports, community participation, and related changes.

Evaluation Pillar: Open Learning

Learning and evaluation activities aligned with “Open Learning” include self-directed learning practices, such as Reflective Practice and Communities of Learning. Open Learning activities add to our capacity to surface unanticipated outcomes, and utilize these in the service of innovation.

Evaluation Pillar: Monitoring

Monitoring activities include data generation, collection, and interpretation practices; utilizing a variety of instruments and methods. HMIS data, financial data, and qualitative data comprise the information set. Monitoring activities add to our capacity to reality-test our assumptions in the service of accountability.

Evaluation Pillar: Sense-making

Sense-making activities include interpretation practices, such as aggregation, contribution analysis, salience analysis, and system mapping. Sense-making activities add to our capacity to understand current state of the system and underlying trends, in the service of strategic action.

Theory of Change Components

Social Actor

Social Actors are one of three types of stakeholders in our Theory of Change model. They are the intended beneficiaries of the program. They are called “social actors” to reinforce the idea that they are *active* participants in any change they experience.

Social Actors are first listed in the “Relational Context” section, and then referenced in “Causal Mechanisms”. Each type of social actor listed in Context should engage in at least one Causal Mechanism, and vice versa – otherwise the document is incomplete.

Change Agent

Change Agents are one of three types of stakeholders in our Theory of Change model. They are the people who deliver the program. They make activities or other resources available for Social Actors to react to.

Change Agents are first listed in “Relational Context,” and then referenced in “Program Design.” Every activity or input referenced in Program Design should be linked to at least one change agent from Context.

Boundary Partner

Boundary Partners are one of three types of stakeholders in our Theory of Change model. They are people or groups who encounter or shape the program, but do not participate directly in it. There are four suggested sub-groups of boundary partners. Boundary

Partners are listed in “Relational Context”, but because they are not directly in the program, they are not referenced further in the document. Instead, the list supports future interpretation activities.

Context

Context is the first section of the Theory of Change. It consists of four sub-sections, which collectively describe all that is salient and unique about the program. The first two sub-sections (Organizational and Historical context) support future interpretation and use-planning; while the second two (Relational Context and Program Design) are referenced directly in the following sections of the document.

Causal Mechanisms

Causal Mechanisms is the second section of the Theory of Change. This section consists of multiple Change Statements. It describes how program participants experience change.

Every social actor in Relational Context and every resource in Program Design must appear in at least one change statement, otherwise the Theory of Change is incomplete.

Outcomes

Outcomes are the third section of the Theory of Change. This section consists of linkages between the outcomes created by the program and the four recovery-oriented impact domains. Through the linkages created in this section, we are enabled to aggregate and collate outcomes across multiple programs and understand impact at a system-level.

Depending on format, sometimes this section will take the shape of a table and other times of a visual map.

Change Statement

Change Statements are sentences that follow a template structure. Each change statement links a resource with a social actor through a reaction. This reaction of the social actor to the resource leads to a change for that social actor.

Outcome Descriptor

Outcome Descriptors are the final portion of Change Statements. They describe the experienced change. Each Outcome Descriptor is then used as a stand-in for its entire change process and linked to an Impact Domain.

