COMMON MISTAKES DEVELOPMENT ORGANISATIONS MAKE WHEN DEVELOPING AN ADVOCACY THEORY OF CHANGE

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WHAT MAKES ADVOCACY PROGRAMMING DIFFERENT FROM SERVICE DELIVERY?

Political and Socio-economic (contexts) define the anticipated results

The length of time needed to achieve policy and social change - exceeds the length of time for which any project will be funded.

Monitoring and Evaluating advocacy requires new or modified techniques from those we use to evaluate interventions or service delivery
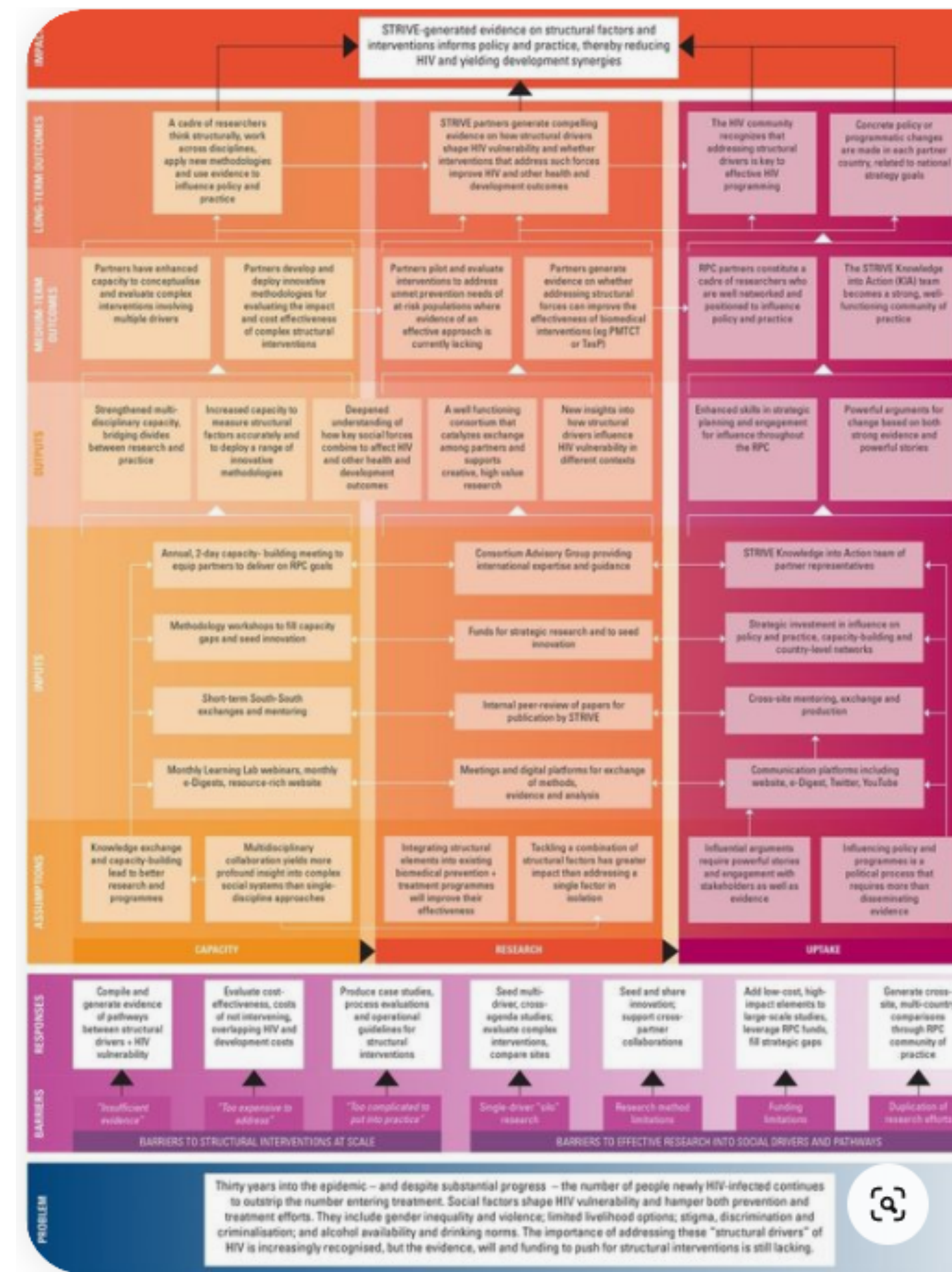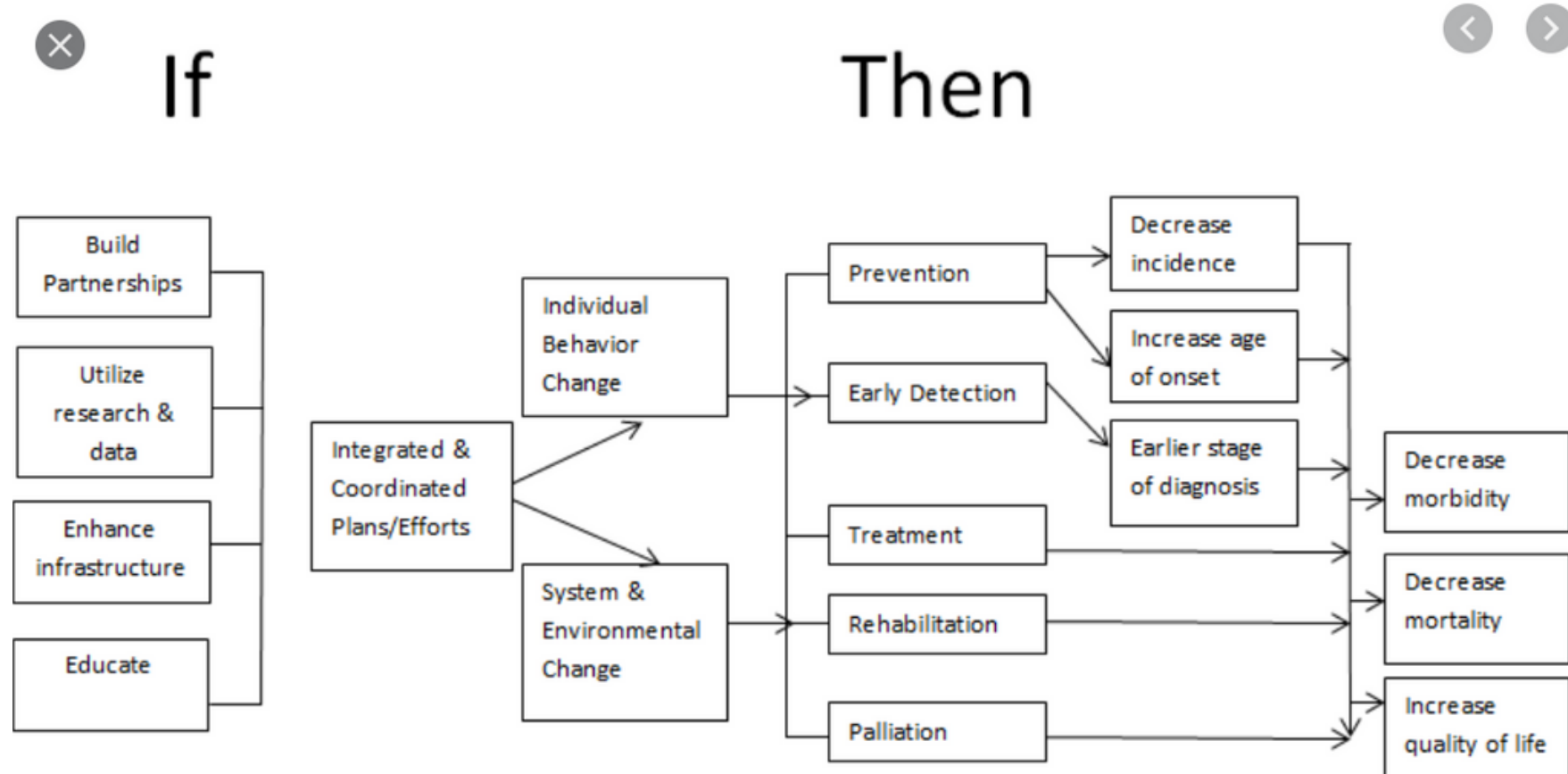
TOC DEFINITIONS

Theory of change is about articulating these many **underlying assumptions about how change will happen** in a programme ~ (Patricia Rogers, in 'Review of the use of 'Theory of Change' in international development', Isabel Vogel, 2012).

Theory of change is an **ongoing process of reflection** to explore change and how it happens - and what that means for the part we play in a **particular context**, sector and/or group of people. ~ (Cathy James, Comic Relief Theory of Change Review, 2011)

A rigorous yet **participatory process** whereby groups and project stakeholders identify the conditions they believe have to unfold for their long-term goals to be met. These conditions are modelled as outcomes, arranged graphically in a causal framework. ~ (Theory of Change Online (TOCO))

Theory of Change is an **ongoing participatory process** articulating **outcomes** and **underlying assumptions** about how change will happen in a **particular context** ~ (Evidence Frontiers)

If

- Build Partnerships
- Utilize research & data
- Enhance infrastructure
- Educate

→ Integrated & Coordinated Plans/Efforts

- Individual Behavior Change
- System & Environmental Change

Then

- Prevention
- Early Detection
- Treatment
- Rehabilitation
- Palliation

- Decrease incidence
- Increase age of onset
- Earlier stage of diagnosis

- Decrease morbidity
- Decrease mortality
- Increase quality of life

STRIVE-generated evidence on structural factors and interventions informs policy and practice, thereby reducing HIV and yielding development synergies

PROBLEM: Thirty years into the epidemic – and despite substantial progress – the number of people newly HIV-infected continues to outstrip the number entering treatment. Social factors shape HIV vulnerability and hamper both prevention and treatment efforts. They include gender inequality and violence; limited livelihood options; stigma, discrimination and criminalisation; and alcohol availability and drinking norms. The importance of addressing these "structural drivers" of HIV is increasingly recognised, but the evidence, will and funding to push for structural interventions is still lacking.

Lack or limited **use of evidence** to inform your thinking processes

Most ToCs are developed during the design stage of the proposal based on the evidence generated in the past. Our contexts changes very fast and each change determines or shapes how our ToCs should look like. Not many donors fund "ideas" . Most want a complete programme. A few funding organisations provide the space to design your programme/project during inception phase.

Mistake1
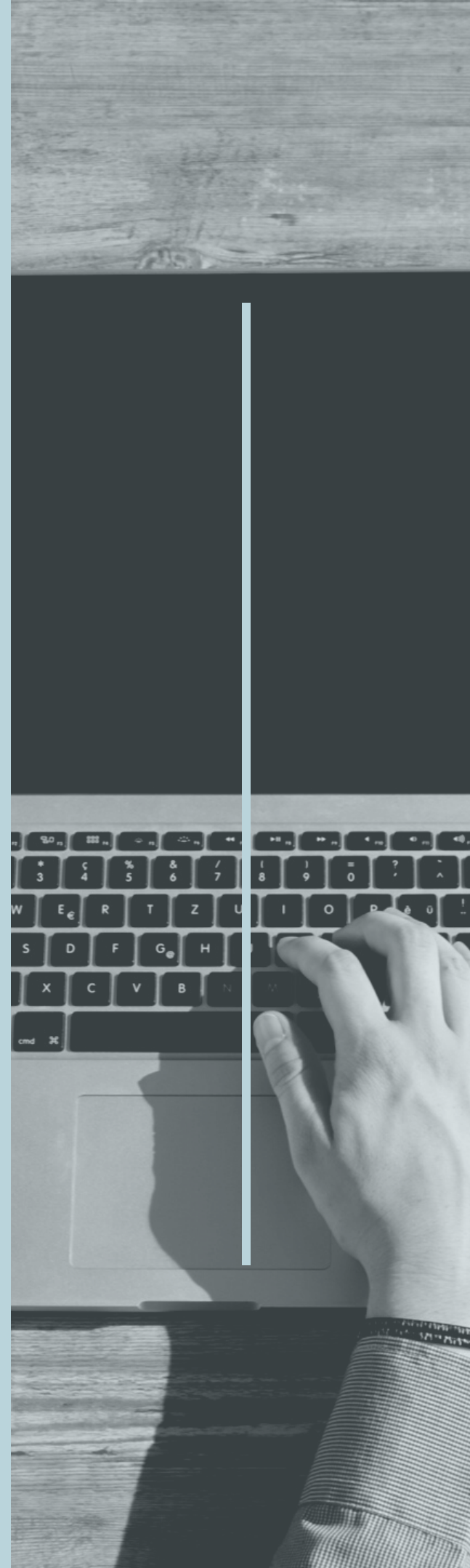
Processes that are **not participatory**

Not being locally led- Being locally led means that development of the theory of change takes place in a genuine participatory and inclusive manner. The idea is to ground causal assumptions in local realities, giving priority to the **community to seek out solutions to contextually identified problems.** Being locally led is more likely to result in ownership of a programme, meaning that learning is more likely to take place

Mistake2

Inclusion of **outputs** in your Theory of Change

Outputs varies from context to context especially implementing a multi-country programme. When assessing the programme impact at the global level, this might be misleading. Focus should be on **high level strategies, outcomes as pre-conditions, Advocacy Ask and the Long-term goal**

Mistake3

# Poor articulation of your **assumptions** or no articulation of assumptions at all

A ToC without a set of assumption is not a ToC. Mostly this is done towards the end in the parking lot without much attention. When articulating assumptions, we need to be very clear on the type of assumptions we should articulate in our ToCs. May include; assumptions of causality (between one outcome to the next); World view assumptions - evidence-based based on how social change is percieved to take place in a particular contect; Operational context (e.g. political stability etc)

Mistake4

If ....

Then ....

X

Outcome

Y
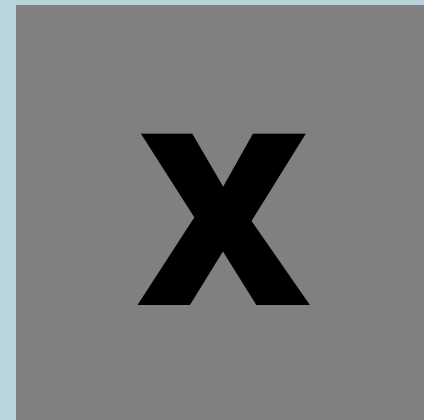
Outcome

An Assumption

Theories of change used by organisations to imply that change revolves around them and their programme, rather than around a range of **interrelated contextual factors**, of which their programme plays a part

Mistake5

Not prioritising **learning**. Too much focus on demonstrating **accountability**-act as a barrier to reflection and adaptive learning

Mostly triggered by funding organisation. Encourages fixing CSOs in boxes that are not applicable in their contexts. While talking of power shifting, this should be at the centre stage. Global North vs Global South interactions, including South-South interactions

Mistake6

Working in ways **different from what Theory of Change states**.

Often ToCs designed at the beginning and not used to monitor progress to draw learning through reflective and adaptive processes - and make changes during the lifetime of the programme/project. This approach encourages CSOs to focus on issues unrelated to what they had planned for initially.

Mistake7

Heating the ocean: Overplanning Vs limited resources (money and time)

Applies mostly to grassroots/local and National CSOs, to some extent Regional and Global CSOs. For country level advcoacy, **3-4 Advocacy** issues should be enough and not more than this.
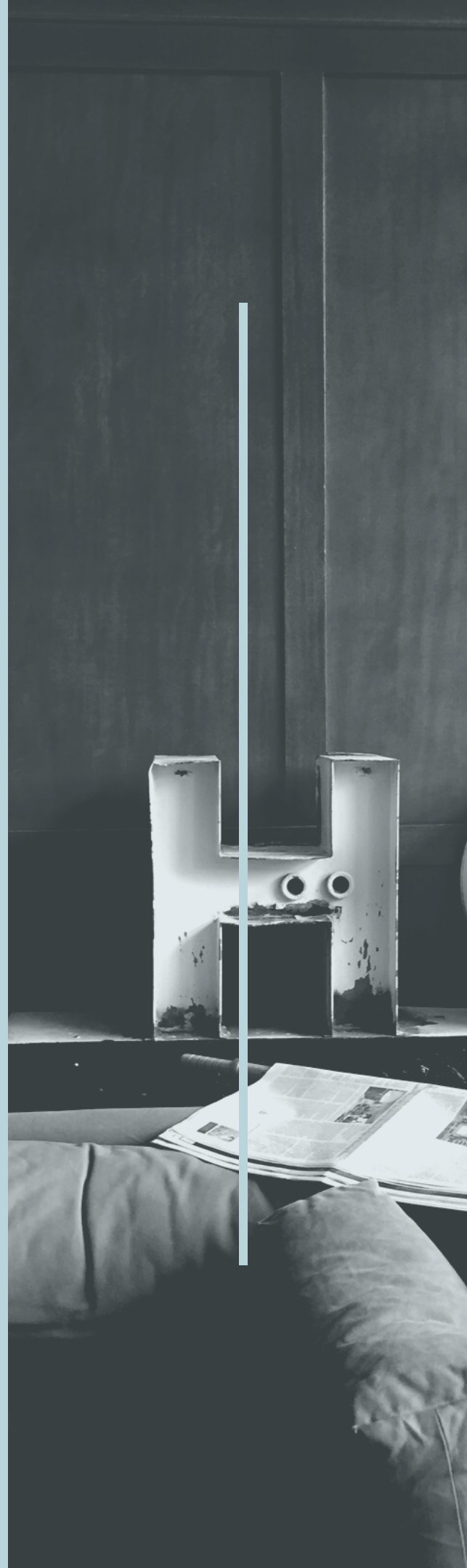
Mistake8

Lack of specificity when articulating your advocacy asks and outcomes (pre-conditions)

While ambigous and generic outcomes or pre-conditions may apply to global or overaching ToCs, this should not apply to country level nested ToCs. Country level ToCs should be very specific specific when articulating the desired change you asking for.

Mistake9

Impossed monitoring methods
for monitoring and measuring
your ToC, based on conventional
programming/ Service Delivery

The use of a logframe with a set of quantitative indicators.
This only applies to M&E Leads managing global programmes.
At the country level, the pre-conditions set in the ToCs, if
specific and well articulated, should provide a basis for your
progerss makers or indicators. For example, it makes sense to
report on the number of policies influenced at global level,
than to a country project with a specific mandate

Mistake10

Advocacy Ask	Anticipated Outcomes	Stories of Change
Policy on SRHR includes Adolescents and Young People in Uganda	Ministry of Health are supportive of the evidence generated on A&Y inclusion	Document here your journey or stories of change - triggers, enablers, blocks
	?	Document here your journey or stories of change - triggers, enablers, blocks

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