

Field Epidemiology

In Action

Theory of Change

Rachel Mather, Epidemiologist



This session will

- Define Theory of Change
- Examine how Theory of Change contributes to impact evaluation
- Show examples of Theory of Change for FETPs
- Have opportunities to reflect on
 - Your experiences
 - Experiences of Theory of Change in the Pacific

What is Theory of Change?



Theory of Change is an outcomes based approach which describes how a program brings about specific outcomes through a logical sense of intermediate outcomes.

When to use Theory of Change



Program design



Strategic direction
or revision



MEL frameworks

- An approach to develop programs, inform implementation strategies, and provide scaffolding for MEL
- Seeks to understand how and why a program brings about change

Theory of Change

how and **why** a FETP will contribute to change

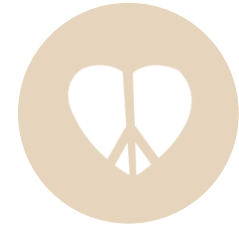
Theory of Change for Impact



Engages key stakeholders
helps to capture complexity



Maps a vision and process to provide evaluation scaffolding



Change is measured in terms of the program priorities

How are Theory of Change developed?



Workshops



Interviews



Questionnaires



Program documents



Observations of programs

Elements of Theory of Change



Outcomes

How do we know that we have succeeded?



Backwards mapping

What do we need to do to reach the top?



Assumptions

Barriers and enablers to reaching the summit which need to be considered during planning.



Interventions

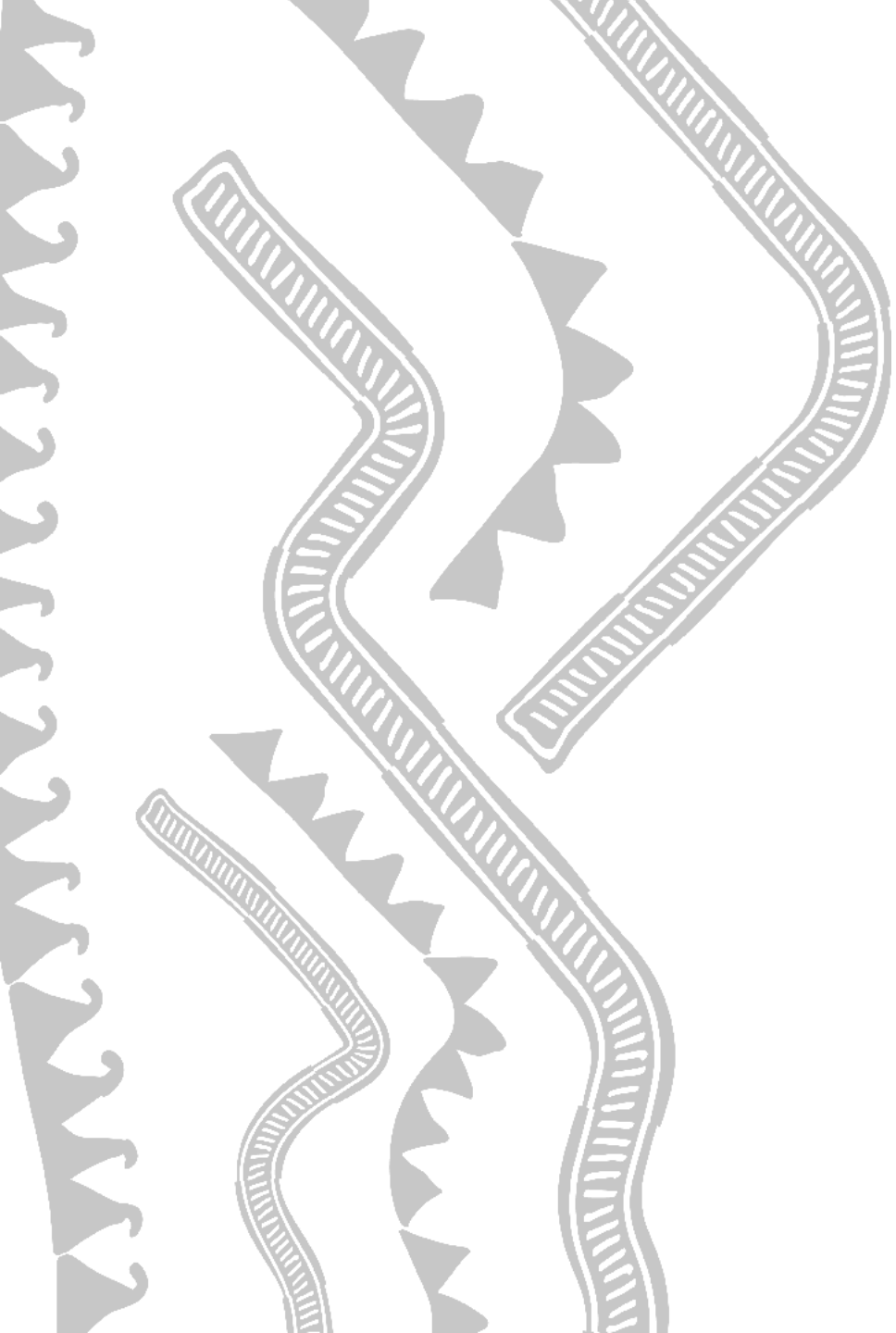
What needs to be done from one day to the next?



Indicators of success

How is change measured?





Theory of Change

An ongoing process of reflection to explore change and how it happens – and what that means for the part we play.



Theory of Change

IN ACTION

Examples from FEiA

partnerships





PRECONDITIONS



Talent available and willing to engage in program



Active local leadership structure directs and delivers program



Stakeholders support and fund program



STRATEGIES

- 1 Dynamic, innovative and appropriately targeted training responsive to country direction and local learning styles
- 2 Applied field based internship embedded in health system
- 3 Training housed in National Department of Health to retain direct involvement in real time surveillance
- 4 Intervention projects directly engage with National Health Priorities
- 5 Enabling in-country public health experts as lead trainers, mentors and faculty
- 6 Mentorship engagement is a key component to the training programme



OUTPUTS

- ✓ Graduates have improved field epidemiology competencies
- ✓ Graduates apply field epidemiology principles in their workplaces (e.g. improving surveillance, outbreak response)
- ✓ Graduate field epidemiologists across the tiered health system of PNG



VISION

Improved health outcomes for Papua New Guineans



IMPACT



HUMAN RESOURCES

- Field Epidemiologists**
- are confident in their competence
 - engage in evidence-based decision making
 - Are influential agents of change



SURVEILLANCE

- Surveillance systems facilitate early detection and response to health events
- Surveillance system generates information to inform policy and programmes



STRONG HEALTH SYSTEMS

- Health systems respond to public and clinical health needs



OUTCOMES



HUMAN RESOURCES

- Improved skills and knowledge of epidemiology and health systems
- Expanded human resource base of fellows and faculty
- Active alumni network sustains ongoing field epidemiology mentorship, advice and support



SURVEILLANCE

- Robust, visible and prominent surveillance system
- Efficient and functioning surveillance system



STRONG HEALTH SYSTEMS

- Health systems are built on evidence-based decisions, policies, programmes and practices
- Health systems are integrated across district, provincial and national levels

- ✓ Decision makers engage with recommendations of intervention projects
- ✓ Contributions to health evidence around key priority areas
- ✓ PNG public health experts are the core faculty of Field Epidemiology Training Programmes
- ✓ Fellows are appropriately and effectively linked with public health mentors
- ✓ Formalised network of Field Epidemiology Alumni in PNG engaging graduates, mentors and fellows



ASSUMPTIONS

- ✓ By aligning projects to identified needs, scaled uptake more likely
- ✓ Functional logistics, collaboration and communication
- ✓ Evidence is taken to inform policy and programmes
- ✓ Graduates are able and interested in becoming future faculty
- ✓ Enabling environment for health workers to work in
- ✓ Graduates retain and continue to apply learning
- ✓ Graduates remain in the PNG health systems

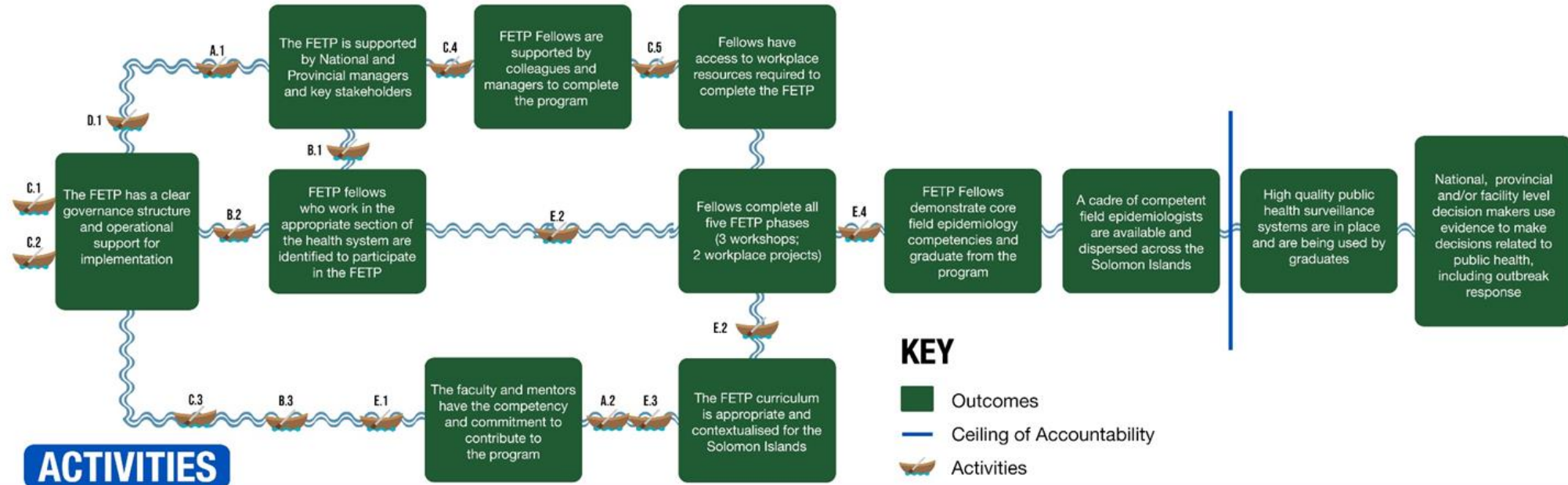


aFETPNG

...to Accelerate the Development of Evidence-based Policy and Practice in Papua New Guinea

SOLOMON ISLANDS FIELD EPIDEMIOLOGY TRAINING PROGRAM

THEORY OF CHANGE



A. ETHICS

1. Engage with stakeholders to streamline ethical requirements for the FETP
2. Include theoretical and practical ethics guidance in the FETP curriculum



B. RECRUITMENT AND SELECTION

1. Develop a recruitment strategy which aligns to existing policies for workforce development
2. Develop selection criteria and minimum entry criteria for fellows
3. Develop selection criteria and Terms of Reference for mentors/faculty



C. MANAGEMENT

1. Decide on the purpose, scope and terms of reference for a steering committee
2. Establish a steering committee
3. Check curriculum is appropriate for the Solomon Islands
4. Strategic engagement with key stakeholders (including FETP fellows' workplaces)
5. Workplaces develop operational strategies to support fellows



D. SUSTAINABILITY

1. Embed the budget and funding for the program in the Ministry of Health and Medical Services



E. DELIVERY & ASSESSMENT OF FIELD EPIDEMIOLOGY TRAINING

1. Train-the-trainer capacity development for faculty and mentors
2. Deliver training to each FETP cohort
3. Develop assessment criteria for core competencies
4. Assess FETP fellows for core competencies

ASSUMPTIONS



The FETP fellows are aware of the scope and competencies needed to graduate from the program



The FETP is able to deliver the program despite the remoteness of some of the fellows and poor connectivity



The projects of the FETPs fellows are aligned with the scope of their work and are possible within their current role and available resources and data



FETP are able to navigate work and personal commitments during the program



Positions exist in the public health system for FETP graduates



Faculty and FETP fellows are respected within the field of public health and this leads to increased career opportunities



Involvement in Solomon Islands FETP supports access to a broader public health network where different ways of training and different ideas can be shared



The National Ministry of Health and Medical Services owns and leads an FETP for the Solomon Islands



The National Ministry of Health and Medical Services is committed to developing accreditation and a career pathway for FETP graduates

BREAK OUT



QUESTION 1: What is your experience of Theory of Change? If you haven't been involved in a Theory of Change before, have you been involved in similar approaches?
(either as a participant or a facilitator?)



QUESTION 2: What are your perspectives on the feasibility and utility of Theory of Change to provide a program & evaluation framework for FETPs?

How our partners in the Pacific feel about Theory of Change.

[Theory of Change Video](#)

