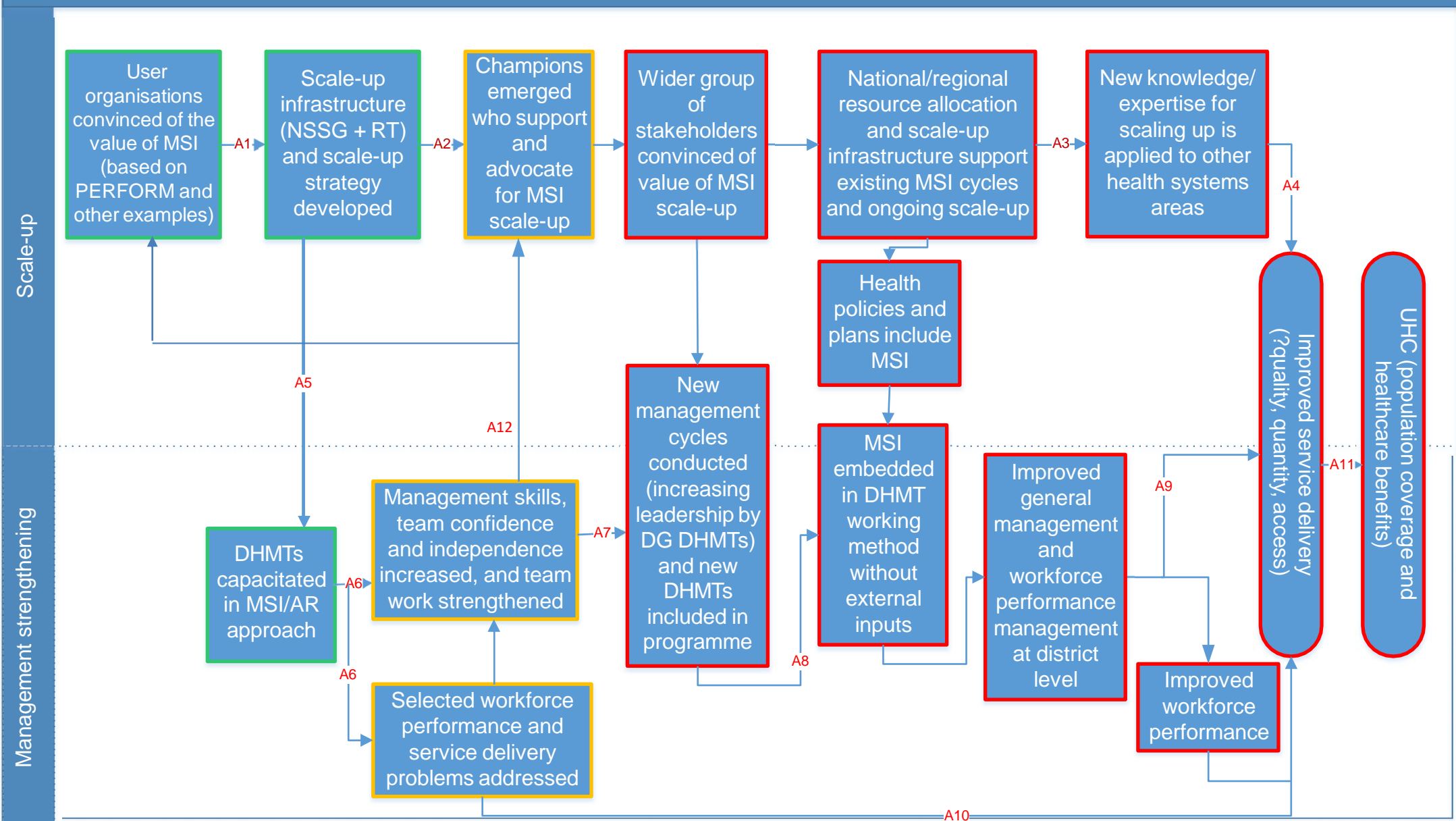


Theory of change for PERFORM2Scale at country level (Version 3)



Key and notes

Sphere of control

Sphere of influence

Sphere of interest

See separate list of assumptions for A1, A2, etc

Approved by PMC on 8 June 17. Updated April 2019 and March 2020

Assumptions of the Theory of Change (1)

- (1a) Key stakeholders are convinced by the available evidence about the MSI and are initially willing to collaborate with the scale-up process
- (1b) Key stakeholders are convinced by the available evidence about the MSI and remain willing to collaborate with the scale-up process
- (2a) Attention of NSSG members not diverted by other priorities
- (2b) Attention of RT members not diverted by other priorities
- (3a) New knowledge on scale-up lessons is sufficiently well documented
- (3b) New knowledge on scale-up lessons is sufficiently well disseminated
- (4) Sufficient opportunities to apply scale-up knowledge available
- (5) DHMTs willing to participate in the intervention even though no implementation funds are provided
- (6a) Effective facilitation skills of CRT during MSI cycle
- (6b) Effective facilitation skills of RT during MSI cycle
- (6c) Work plan developed by DHMTs is feasible (related to time-frame, decision-authority, resources)
- (6d) Work plan developed by DHMTs addresses real problems

Assumptions of the Theory of Change (2)

(7a) DHMTs remain convinced of the value of the MSI

(7b) Sufficient support available from RT to support expansion of District Groups

(8a) DHMT members of District Group develop sufficient facilitation skills from working with new District Groups

(8b) Low turnover of RT members

(9a) DHMT remains key organisational structure at sub-national level

(9b) DHMT works as a team

Assumptions: put a X or V in the box corresponding with your assessment

(9c) Low turnover of DHMT members

(9d) DHMT decision-space does not decrease

(10) DHMTs involvement in this project, with the consequent opportunity costs, does not undermine (through possible diversion in project activities) health service delivery

(11) Service delivery plans remain in line with health care needs

(12a) New knowledge on MSI lessons is sufficiently well documented

(12b) New knowledge on MSI lessons is sufficiently well disseminated to relevant stakeholders