Hernandez, M., & Hodges, S. (2006). Applying a theory of change approach to interagency planning in child mental health. American *Journal of Community Psychology, 38* (3/4) [In press].

keyword: theory of change

For several years, a team of researchers at the University of South Florida (Hernandez and Hodges) have been conducting research on theories of change, and have been providing training and consultation on their use. These efforts, conducted as part of the Research and Training Center for Children's Mental Health, have been incorporated into the national evaluation for the children's mental health system of care grant program of the Center for Mental Health Services. This article provides an example of the use of a theory of change approach in one county in California.

A theory of change logic model is a tool for organizing and documenting ideas about what planners believe to be important to their implementation strategy. This *Data Trends* reviews the central components of a theory of change and provides an example of its use. With the assistance of the authors, Contra Costa County, California designed a 12-stage theory of change logic model to help integrate services for children and adolescents with emotional and behavioral problems who have been arrested.

Defined as "the articulation of the underlying beliefs and assumptions that guide the development and implementation of a strategy," a theory of change may include beliefs about what funding agencies, planners and implementers have about the needs of children with emotional and behavioral disorders and their families, and involves multi-agency strategies to meet those needs.

Table 1. Theory-based Logic Model Development Process	
Developmental Phase	Stages in Process
Phase I Pre-Planning	Stage 1: Form Workgroup Stage 2: Articulate Mission Stage 3: Identify Goals and Guiding Principles
Phase II Theory of Change Development	Stage 4: Develop the Population Context Stage 5: Map Resources and Assets Stage 6: Assess System Flow Stage 7: Identify Outcomes and Measurement Parameters Stage 8: Define Strategies Stage 9: Create and Fine-Tune Logic Model Stage 10: Elicit Feedback
Phase III Implementation	Stage 11: Use Logic Model to Inform Planning, Evaluation and Technical Assistance Efforts Stage 12: Use Logic Model to Track Progress and Revise Theory of Change

Table 1 shows the three phases of Contra Costa County's planning approach, consisting of 12 stages. "While Table 1 depicts a sequenced process, the stages do not always proceed in the order shown. The time it takes to go through the entire process is dependent on the commitment of participants and the time they have available." In some cases, planning groups may move quickly through certain stages or reconsider areas that they have already developed. The history of collaboration between agencies also may either slow down or speed up the development of the theory of change.

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Phase I

In the case of Contra Costa County, focus during Stage 1 was placed on youth with emotional and behavioral problems who had been arrested, and included the mental health and the education sectors (including special education); participants included high-level administrators, middle management, representatives from the education system, family representatives, county wide service coordinators, management staff, and evaluators from the collaborating agencies. At Stage 2, participating agencies articulated a shared mission. This process is important, and complex, as agencies must keep to their established missions while articulating one that will encompass all participating agencies. Stage 3 gave participants an opportunity to identify, share, and define their goals and expectations for a theory of change. Having identified such goals, the group then defined a set of values and principles that would guide the development of a community plan. Values and principles decided upon included: (a) collaborative work across organizations and at all levels of the organization; (b) design services to reflect the needs of children with emotional and behavioral problems and their families involved in the juvenile justice sector; (c) a commitment to information, evaluation, and accountability-based decision making; (d) a commitment to family and youth, responding flexibly to their needs and including them in planning and service delivery; and (e) the provision of the least restrictive care for youth.

Phase II

While the preplanning phase provides a necessary foundation to work with the theory of change model, the theory really begins to take shape at the second phase of its implementation. This stage involves the conceptualization and operationalization of the following core elements: (1) the characteristics, needs, and strengths of the population of concern; (2) the desired outcomes for that population, and (3) the strategies designed to accomplish those outcomes. A clear understanding of the cross-agency relationships between these core elements is crucial to developing a theory of change.

At Stage 4, planners developed a clear definition of the population of concern; this also is a crucial step in the process, for it ensures that the implementation plan will respond to the needs and strengths of the actual population rather than to categorical demands placed on each agency. This stage also helps planners relate the needs of the youth and families to desired outcomes.

Existing services and supports related to the group's mission and goals were shared and mapped during Stage 5. At this stage, the goal was to "understand the existing service array in order to re-organize it into a cohesive and efficient community wide plan that was aligned with the stated goals of the planning effort." The group discovered that existing multi-agency resources did not correspond with their goals; they now had an opportunity to consider potential strategies to align those goals with their existing resources.

Stage 6 provided an opportunity for each participating agency to consider what kind of information was needed to assess the movement of youth through their systems and through multi-agency networks. For example, for juvenile probation, information regarding how and when decisions are made to release or retain a youth after arrest was discussed. This information gathering (including input from the education and mental health sectors) resulted in a cross-agency understanding of the multiple ways in which a youth may be involved with the juvenile justice system, and allowed for a shared understanding of the challenges faced by the juvenile justice sector regarding the flow of youth through that system. Critical points in the service delivery process were then targeted for reform.

During Stage 7, participants identified outcomes and measures that would best meet the needs of youth and their families. Individual outcomes (reduction of initial arrests and recidivism, increased school success,

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attendance and job readiness and life skills) and system outcomes (use of resources, reduced length of stay in out-of-home placements, less restrictive placement options and appropriate, corresponding service delivery) were identified.

The action link that connects how the groups intend to achieve these outcomes with the population of concern was developed at Stage 8. Again, strategies decided upon had to link up with the group's shared mission and guiding principles. "Each strategy should also be considered in terms of the planning group's beliefs about its ability to influence identified outcomes and participants should consider what change is feasible in both the short and long term." Thus, it is important that planners consider the existing programs in the context of the planner's goals and expectations. Some programs may require change or elimination. It is crucial that the agencies involved know how existing services function and are supported; this information is often available at the direct service level.

Reflection upon the plan created occurs at Stage 9, where planners had the chance to ensure that their plan reflected the values, principles, and goals of the theory of change "and that all participants shared a similar understanding of the relationships among the components of the plan and resulting theory of change logic model."

Feedback is elicited at Stage 10, and is crucial if planners are to communicate the theory of change to a larger audience; it also is important to elicit feedback from community planners who were not involved in planning the theory of change logic model.

Phase III

Stages 11 and 12 fall under the third part of the logic model. At the 11th Stage planners used the theory of change model to guide their strategic planning and evaluation efforts. "It is crucial that strategic planning efforts [and evaluation methods] be grounded in the articulated theory of change." Contra Costa County planners agreed on the need for a method to track the movement of youth between countywide and regional services.

Stage 12 wraps up the theory of change with an opportunity to track the progress of each group's theory of change and to revise it as needed; this makes the theory of change an ongoing, iterative logic process that is non-linear. Contra Costa County planners made notebooks reflecting their theory of change, organizing components of the notebooks in such a way that additional information could be added as changes and adaptations were made.

In conclusion, the theory of change approach to planning services for children with emotional and behavioral problems and their families can bring consensus among multiple child-serving agencies for a shared overall service delivery strategy. For more information on the theory of change, see Hernandez, M., & Hodges, S. (2003). Building upon theory of change for systems of care. *Journal of Emotional and Behavioral Disorders* *11*(1), 19-26, available at: http://rtckids.fmhi.usf.edu/publications.cfm (keyword: theory of change).