

Theory of Change

Remote rural communities in Southern Province lack access to basic healthcare, with only one doctor to every 16,000 people, and the majority of these located in urban areas. Within communities there is little information available on how people can improve their own health and limited access to resources that promote health.



Assumptions

- There is a willingness to change & adopt new behaviours
- Training will continue to motivate
- CHW programme will continue to grow
- Long lasting local partnerships - including commitment from Ministry of Health to continue new interventions
- Accurate data and learnings are shared
- Suitable resources developed & adhered to
- Financial & human resources continue to grow

Overall Impact

Strong & effective rural health system in Zambia's Southern Province

MEDIUM TERM OUTCOMES

- IMPROVED & EQUITABLE ACCESS TO HEALTHCARE IN REMOTE COMMUNITIES
- INCREASED CAPACITY OF RURAL HEALTH SYSTEMS
- IMPROVED HEALTH BEHAVIOURS
- KNOWLEDGE SHARING CULTURE ESTABLISHED

Short term Outcomes

- Improved health literacy
- Improved access to amenities that promote health
- Open source sharing of impact data
- Increased staff capacity
- Access to health services delivered to a Zambian standard
- Improved access to power, medical equipment & resources at RHCs

Activities



High quality mobile clinics in remote communities



Training & support of CHWs to work within the health system



Improved resources & capacity for Rural Health Centres



Needs assessed public health interventions



Rigorous MEL & open source sharing of data through an evidence library

