

# Theory of change for improving uptake of referral for ear and hearing services

Create package

Build: formative research

Assess

Inputs

Intervention

Behaviour settings: outreach camp, family discussion at home

Implementation

Environment  
(physical, social,  
biological)

*Surprise*

- Engaging, surprising,  
appealing activities:
- Expert mother and  
community health  
worker counsel  
caregivers (social:  
support)
  - Photograph/  
illustrated booklet  
(physical: new  
produce)
  - Text message  
reminders  
(physical: nudge)

1  
2

Outputs

Body  
Brain

*Revaluation*

Attending  
appointments is good  
for child and will  
improve their life  
(nurture)  
Other families have  
attended and they are  
happy (affiliation)  
Queens is not a place to  
be feared (curiosity)  
A healthier child could  
improve status (status)  
If go to clinic they will  
be rewarded with good  
health (reward)

7

Behaviour: Uptake of referral

Outcomes

Behaviour

Caregiver and child  
attend Queen  
Elizabeth Central  
Hospital for ear and  
hearing services

3  
6

Ceiling of  
accountability

Impact “state of the  
world”

Improved ear  
and hearing  
health,  
increased  
participation  
in school,  
improved  
quality of life

4  
5

Deliver intervention

Evaluate (feasibility acceptability study)

Scale up

### Assumptions

- 1 Adequate time allocated for counselling in camps available
- 2 Parents have mobile phone access
- 3 Caregivers are aware of transport services/services are available and have the funds to attend
- 4 ENT/audiologists have knowledge, skills and equipment to treat children attending the referral
- 5 Treatment and rehabilitation is effective
- 6 Parents have a good experience seeking care, and the doctors at Queens provide adequate counselling
- 7 Intervention successfully elicit desired responses