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CAN DESIGN THINKING BE USED TO IMPROVE HEALTHCARE IN LUSAKA PROVINCE, ZAMBIA?

Abstract

This case study explores the effectiveness of using a design thinking approach for the development of appropriate, transformative medical product solutions for Zambia. Findings are presented from an initial 10-day field trip to Zambia by an interdisciplinary team that undertook preliminary ethnographic research. As a consequence of taking a design thinking approach and focusing on factors relating to the desirability, viability and feasibility of possible solutions it has been possible to identify new development opportunities, including some surrounding rural trauma and childbirth.

Keywords: ethnography, design thinking, Zambia, healthcare
The survey is to provide information on levels and trends in fertility, childhood mortality, use of family planning methods, and maternal and child health indicators including HIV/AIDS that can be used by programme managers and policymakers to evaluate and improve existing programmes. Fertility is lowest in Lusaka province where women have an average of 3.7 children. Fertility is highest in Northern province where women have an average of 6.6 children. Fertility also varies with education and economic status. Department of Community Medicine Lusaka, Zambia. e-mail: drndonyo@yahoo.com. August 2005. The Zambian health system was designed to operate in a pyramidal fashion. There was to be doctors at all hospitals. These techniques have been used to assess the subjective and attitudinal factors, which have been associated with or underlie quantitative measures of quality to provide better explanation for aspects of quantitative measures. The focus group discussions (FGDs) have been a common technique for eliciting these measures of health service quantity. The following factors have been used to assess quality: a) price and income factors; b) staff attitudes; c) availability of drugs; d) payment procedures (cash and in kind). Traditional healers far outnumber modern health care providers in Zambia where the Traditional Health Practitioners Association has over 40,000 members compared to a paltry 1,000 conventional medical doctors that are practicing nationwide [11]. There were 1,390 medical doctors practicing in Zambia; the doctor to population ratio was 1 to 17,589 instead of the World Health Organization recommended ratio of 1 to 5,000 [12]. Zambia is among the Sub-Saharan African countries with the most acute shortages of trained personnel in the health sector [14]. X. americana is also used to manage STIs including gonorrhoea in Western Province, Zambia [18].