

Living Goods supports digitally enabled community health workers to save lives at scale



We envision a world where every family can easily access the healthcare they need to survive & thrive

WHO we are: Launched in 2007, Living Goods supports digitally equipped community health workers (CHWs) to deliver care on call, making it easy for families to get the healthcare they need. Today, we support more than [12,000 CHWs to provide health services to under-resourced communities](#). We work hand-in-hand with the governments of Kenya, Uganda, and Burkina Faso to operate our approach and to support the strengthening of their own CHW networks. We believe that [local ownership and government partnership are essential to sustaining lasting impact at scale](#).

Preliminary results from a 2021 randomized controlled trial of Living Goods-supported CHWs in Uganda found a 28-30% reduction in under-5 child mortality from midline to endline—outstanding results in our sector and powerful evidence that well-supported CHWs can save lives. We possess top ratings from Charity Navigator, Candid/GuideStar, and Impact Matters. In addition to our longstanding relationships with national and local governments, we work with implementing partners such as BRAC; advocacy collectives like the Community Health Impact Coalition; and funding partners including CIFF, Johnson & Johnson, and FCDO.

Living Goods is headquartered in Nairobi with a strong Africa-based leadership team, a global Board of Directors, and local advisory boards. We have large-scale operations in Kenya and Uganda as well as a growing team in Burkina Faso, and a few support staff in the U.S. and globally. Among our 360 staff, 97% are African nationals based on the continent and 55% are women. Please see our website for more information on our [partnerships](#), [awards & testimonials](#), and [key research](#).

Our 2022 Results:



WHY we exist: Despite decades of investment in healthcare, advancements in medicine, and the development of innovative technologies, at least [half](#) the global population lacks access to basic healthcare and [5 million children](#) die each year from easily preventable and treatable diseases. The world's [highest rate](#) of child mortality currently exists in Sub-Saharan Africa.





CHWs are a proven low-cost and high-impact solution to these challenges. They are trusted, knowledgeable frontline health workers who come from and live in the communities where they work. CHWs are [proven](#) to save lives, increase access to care, contain health crises like COVID-19, and keep healthcare affordable—all while delivering a positive economic return and reducing unemployment. [However, CHWs often lack the support they need to truly move the needle on health outcomes.](#)

WHAT we do: Living Goods knows what it takes to drive CHW performance at scale. [For 15 years, we have supported CHWs to go door-to-door in their communities delivering an integrated package of reproductive, maternal, newborn, and child health interventions.](#) We provide each CHW with a smartphone and diagnostic health app, medicines and health tools, real-time supervision, and compensation for their work. We also work alongside governments to build the policy environment needed to empower CHWs long-term. Services provided by Living Goods-supported CHWs include:



iCCM: When a child falls ill, CHWs are guided by integrated community case management (iCCM) workflows on their smartphone app to provide automated diagnosis and standardized treatment, and to flag acute cases for referral to a qualified health facility.



Pre/postnatal Care: CHWs provide early pregnancy diagnoses and education on maternal health and nutrition. They refer high-risk pregnancies, monitor the expected delivery date, and work to ensure that all pregnant women give birth in a health facility.



Immunization: CHWs capture the immunization status of every child in their community, and work closely with health facilities to target defaulters. They use messaging and behavior change to counter barriers to and drive greater demand for vaccinations.



Family Planning: At clients' requests, CHWs provide comprehensive family planning education and counseling, as well as contraceptives when permitted by law—including condoms, birth control pills, and the 3-month injectable Sayana Press—and referrals for long-term methods.



COVID-19: CHWs have maintained essential health services in their communities during the pandemic, despite the increasingly challenging operating environment. While visits to health facilities declined from 2019 to 2020, CHW treatments increased in our areas of operation.



Health Education: A key part of CHWs' work is providing health education, including on the prevention and treatment of common diseases like malaria; hand washing and other safe water, sanitation, and hygiene practices; and proper nutrition.

Overall Goal



Increase access to high-quality, digitally enabled community healthcare

9.7M

Significantly improve health outcomes for 9.7 million people in 3 countries



Save lives and create durable national impact in core countries



www.livinggoods.org



[livinggoods.org](https://www.facebook.com/livinggoods.org)

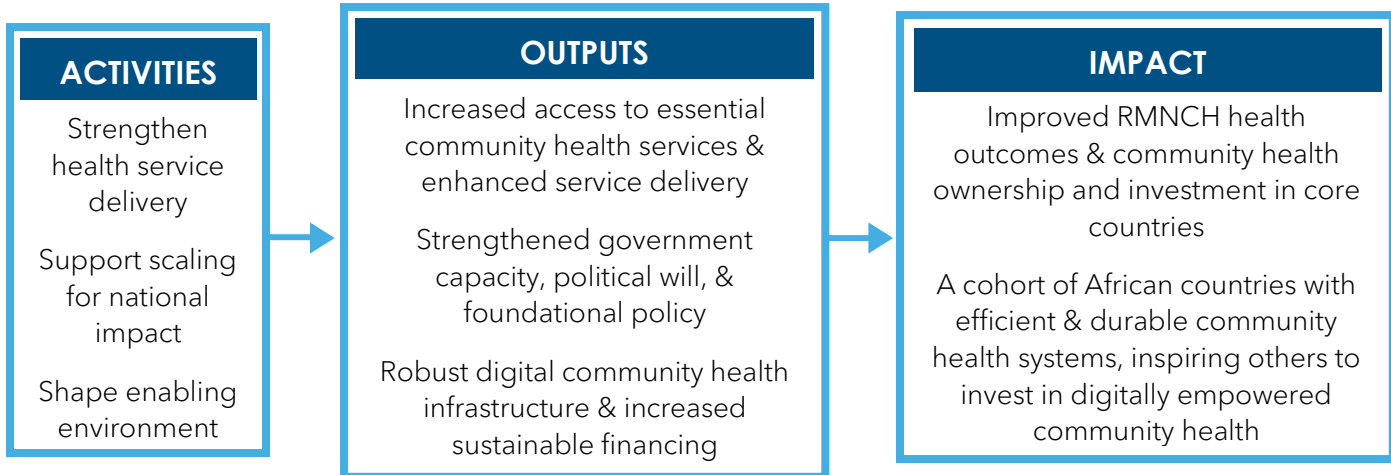


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Theory of Change:



HOW we do it:

Living Goods has developed a formula for delivering high-impact community health programs. It focuses on the four most important programmatic areas that will cost-effectively drive performance management of CHW networks: [CHWs must be digitally empowered, equipped, supervised, and compensated \(DESC\)](#). The DESC framework is directly aligned with [WHO community health guidelines](#) and Community Health Impact Coalition principles, and is a strong driver of Living Goods’ theory of change based on our key priorities of reducing child and maternal mortality.



We deliver our DESC approach in three ways: 1) Strengthening health service delivery by operating [learning sites](#), where we “do” DESC-enabled community health ourselves; 2) Supporting scaling for national impact by providing [implementation support](#), where we coach governments on how to effectively deliver and finance their DESC-enabled community health programs; and 3) Shaping the [enabling environment](#) where we seek to embed DESC in policy and budgets so CHWs have the support they need.



- ▶ **Learning Sites:** Living Goods directly funds and implements community health programs through “learning sites,” which exist within government structures. The aim in these sites is not to create parallel systems, but to showcase the best of what’s possible through community health when using DESC elements. Learning sites provide opportunities to test, rapidly improve, and adapt the DESC approach in specific contexts. As such, they help provide evidence for shaping policies, guidelines, and investments in community health. We aim to operate learning sites across all our countries of operation [with 4k CHWs serving 2.5M people by 2026](#).
- ▶ **Implementation Support:** Living Goods provides on-the-ground “implementation support” to governments and implementing partners to enable them to effectively manage and ultimately own their community health programs. Living Goods transfers best practices from the learning sites to local programs where government co-finances and leads on implementation of the DESC approach. This includes putting operational best practices in place across all DESC elements by supporting government teams to optimize performance and cost-effectively improve the care that families receive. Living Goods seeks co-investment from governments and other partners to cover most of the costs of DESC elements, which we estimate will be \$43 million over five years. In these implementation support sites, LG will [support 14k CHWs serving 7.2M people by 2026](#).
- ▶ **Enabling Environments:** Living Goods works with national governments to create conducive policy environments and optimal conditions for CHWs to operate, influence implementation practices to guide scale-up and performance of CHWs, and mobilize government funding for nationwide implementation. This will ensure that in the long-term, governments are able to implement and fund DESC-enabled CHW programs. [We also support the digitization of national community health systems](#) and link them to national data systems to improve real-time data collection, decision-making, and performance management.

Shift Over Time in Levels of Investment across Different Modes of Support (cost to Living Goods only)



Your partnership

Living Goods has a proven methodology for saving lives at scale, but [we can't do this on our own](#). We want to collaborate with thought leaders and partners to truly move the needle on the biggest health barriers facing the world today. If you'd like to join us on our journey of discovery as we deliver high-quality community health at scale, please reach out to us at info@livinggoods.org.

