

CELEBRATING 20 YEARS

 **coregroup**
GLOBAL HEALTH PRACTITIONER
CONFERENCE FALL 2017

**COLLABORATING FOR
HEALTHY COMMUNITIES:
RESULTS, REALITIES, OPPORTUNITIES**
SEPTEMBER 25 - 29, 2017 | BALTIMORE, MD

CONFERENCE REPORT: KEY OUTCOMES & NEXT STEPS





As a first-time experience to attend and present at the CORE Group conference, it was really great to learn from other participants and have free and open discussions about pertinent health issues, including making new networks. The mixed conference approaches made the conference so lively and the whole organization was so great.

– Molly Kumwenda, Catholic Relief Services Malawi

One of my main takeaways from the conference is that my voice and experiences count and that there are many opportunities and partnerships out there that I can work with.

– Gifty Crabbe, MPH Candidate, University of Iowa College of Public Health



FALL 2017 GLOBAL HEALTH PRACTITIONER CONFERENCE: KEY OUTCOMES & NEXT STEPS

Throughout 2017, CORE Group is celebrating 20 years of strengthening global community health through collaboration. Together with our many members and partners over the last two decades, we have worked toward a vision of communities where everyone can attain health and well-being. We have fostered collaboration and learning, strengthened technical capacity, developed innovative tools and resources, and scaled up effective community-focused health approaches.

Our bi-annual Global Health Practitioner Conferences have remained a key feature of our programming over the years. In September 2017, in honor of our anniversary, we convened a special Fall Conference to recognize our collective accomplishments from the last 20 years and look ahead to the future:

Fall 2017 Global Health Practitioner Conference

Collaborating for Health Communities: Results, Realities, and Opportunities

September 25 – 29, 2017 | Baltimore, MD, USA

The conference brought together **261 participants** from over **20 countries** representing **74 organizations** and **8 universities**. An **additional 40 remote participants** from around the world joined in the live broadcasts of the keynote and plenaries.

CORE Group Executive Director Lisa Hilmi opened the conference and highlighted the objectives for the week: 1) **Examine the results** of collaborative action for community health, 2) **Challenge the realities** of operations research, program approaches and changing environments, and 3) **Explore new opportunities**, partnerships and emerging voices. She emphasized 20 years of collaborating for success, and invited all global participants to join in addressing the pressing emerging health needs for communities. CORE Group Board Chair Erin Stieber also welcomed attendees on behalf of the Board.

DORY STORMS AWARD PRESENTATION & KEYNOTE ADDRESS



Judy Canahuati poses with CORE Group Board of Directors Chair Erin Stieber, CORE Group Executive Director Lisa Hilmi, and her family.



Miriam Were delivers the keynote address.

Since 2001, CORE Group has presented the annual Dory Storms Child Survival Recognition Award to a person who demonstrates courage, leadership, and commitment to ending child death. 2017 awardee **Judy Canahuati** graciously accepted this honor at the start of the conference in recognition of her 30 years of work supporting optimal child nutrition and development and her tireless dedication to promoting mother-to-mother support and breastfeeding.

Community health pioneer **Dr. Miriam Were**, Chancellor at Moi University in Kenya, presented a dynamic keynote address on the value of high-quality community health programming and the impact it has had on improving lives around the world. She challenged CORE Group to continue the good work of the past 20 years and further expand collaborative efforts around the world. She emphasized there is great excitement from civil society organizations (CSOs) in joining CORE Group and recommended expanding the International Community Health Network.

RESULTS

The first plenary kicked off a reflection on programming results and lessons learned from 20 years of collaborative action for community health.

PLENARY | Results: 20 Years of Collaboration and Innovation

Tom Davis, Independent; Melanie Morrow, USAID's Maternal and Child Survival Program, ICF; David Newberry, Independent; Kate Jones Debay, Loma Linda School of Public Health; Janine Schooley, PCI (moderator)

Participants highlighted the many high-quality tools and approaches that have been jointly developed, tested and diffused by the CORE Group community. Starting with an exploration of Positive Deviance/Hearth and the Care Groups approach, presenters discussed the impact and scale possible when organizations work together to critically assess the evidence base, compare the impact of various implementation strategies, and produce concise, harmonized programming guidance. Partners shared results and reflections from USAID's Child Survival and Health Grants Program, with a comprehensive legacy document coming soon promoting accomplishments and impact at the community level. Several participants also shared their own success stories with CORE Group-developed initiatives.



TOOLS HIGHLIGHTED DURING THE PLENARY:

- Designing for Behavior Change
- Barrier Analysis Guide
- Helping Babies Breathe Implementation Guide
- Nutrition Program Design Assistant
- Positive Deviance/Hearth
- Essential Nutrition Actions - Essential Hygiene Actions
- Health and Development Integration Toolkit
- Make Me a Change Agent
- KPC Survey Training
- LQAS Protocol for Parallel Sampling
- Training in Qualitative Research Methods
- Partnership Defined Quality M&E Toolkit

All tools are available at www.coregroup.org!

David Newberry and Melanie Morrow call attention to key community health initiatives championed by CORE Group over the years during the Results plenary.

The **New Information Circuit** provided an opportunity for participants to continue to learn about new approaches, tools, and innovations in a fast-paced, interactive format.

Table hosts were selected through a competitive process to ensure they represented a wide range of topic areas with a strong evidence base for effectiveness and scale. Participants cycled through a series of three table discussions with the opportunity for small group questions and interaction.



Jahangir Hossain from CARE Bangladesh presents on filling the human resource gap during the New Information Circuit.

“The first thing that struck me was the number of organizations that were here from the practical experience or individuals who were from the field, and the ambience and the numbers of people who were willing to share data they were actually working on in the field, very practical information.”

– Mamie Sackey Harris, Adjunct Assistant Professor, UNC Gillings School of Global Public Health





TOP: Ellyn Ogden speaks during the Realities plenary session. All speakers (left to right): Samuel Usman, Ahmed Arale, Ellyn Ogden, Leo Ryan, Lee Losey, Filimona Bisrat, Anthony Kisganga, and Roma Solomon. BOTTOM: Attendees give a standing ovation acknowledging CGPP's success.

REALITIES

The second component of the conference theme focused on the current realities of operations research, program approaches, and changing environments.

PLENARY | Realities: Coordinated Impact at the Country and Global Level

Ahmed Arale, CORE Group Polio Project (CGPP) Kenya/Somalia; Filimona Bisrat, CGPP Ethiopia; Frank Conlon, CGPP HQ; Anthony Kisganga, CGPP South Sudan; Lee Losey, CGPP; Ellyn Ogden, USAID; Roma Solomon, CGPP India; Samuel Usman, CGPP Nigeria; Leo Ryan, ICF International (Moderator)

CORE Group Polio Project (CGPP) secretariat directors, project partners and USAID discussed their lessons learned with an emphasis on how they could be adapted across a variety of maternal and child health projects. During this impactful plenary, they discussed the implications of the collaborative programming model used by CGPP, strategies developed to reach increasingly mobile and hard-to-reach populations and approaches for working in insecure environments.

-- REALITIES PLENARY KEY MESSAGES --

- Working in collaboration and not in competition is the basis of the CGPP Secretariat Model through building upon the expertise of local NGOs and support from the country governments. The Model could be applied to other health interventions ranging from measles elimination and maternal death reduction and can be linked to Universal Health Coverage
- The Secretariat Model is highly impactful and cost effective: 15,000 community health workers support vaccination, mobilization and other efforts at a cost of 17 cents per recipient. USAID provides about \$15 million a year for CGPP efforts.
- NGOs have proven that they can meet and exceed expectations for delivering services to marginalized communities.
- The strategies, best practices and approaches from CGPP are now mainstreamed in global polio eradication efforts: microplanning, child registries, community mobilization, behavior change communication, etc.
- Efforts to reach every child in neglected, hard to reach and insecure communities must not be interrupted.
- Communities must organize and strategize with their government to determine how to transition its work in polio eradication to other health interventions.
- NGOs and Civil Society should actively identify opportunities to build upon well-developed skills and capacities of community health workers.
- The knowledge and energy of thousands of community health workers, religious leaders and others needs to be harnessed to continue solving community problems.

CORE Group utilized a “90-Second Science” format to combine the rapid communication of key findings from research with an opportunity for the audience to explore the implications of the research for improving community-based programming. Topics covered included: impact of women’s empowerment; improving maternal and newborn health service provision; nutrition science; and the evidence base on improved measurement instruments.

Concurrent sessions brought together researchers and practitioners to explore issues including: the future of integrated Community Case Management, innovations in community-based diagnosis and treatment of acute malnutrition, and the child health agenda in the context of the Sustainable Development Goals.



I'm delighted to see this wonderful forum of PVOs and NGOs. This is a unique opportunity for NGOs to exchange experiences and learn from each other and from someone from outside like myself. In the example of Rwanda, the Ministry of Health's financial and technical partners are our allies and it is important that everyone work in the same direction for the same goal.

– Ferdinand Bikorimana, Rwanda Ministry of Health

PLENARY | Health Financing for Community Health Systems

Keith Dokho, World Vision; Brad Herbert, Brad Herbert Associates; Phyllis Heydt, UN Special Envoy for Health ; Scott Jackson, Global Impact; Isabelle Lindenmayer, Rabin Martin; Harshad Sanghvi, Jhpiego; Taufiqur Rahman, AmeriCares (Moderator); Fernando Chang-Muy, University of Pennsylvania (Moderator)

The day culminated with a plenary exploring Health Financing for Community Health Systems, in which panelists presented their experiences with multi-lateral financing organizations, private philanthropy, and different models of NGOs’ strategic partnerships with private sector donors. Additional discussions covered impact investments, corporate prioritization processes, signature initiatives, and potential financing needs for community health systems in Sub Saharan Africa.



Panelists speak during the Health Financing plenary session. Speakers include (left to right): Isabelle Lindenmayer, Phyllis Heydt, Keith Dokho, Harshad Sanghvi, Scott Jackson, Brad Herbert, and Taufiqur Rahman.

-- HEALTH FINANCING PLENARY KEY MESSAGES --

- There are innovative financing and philanthropy models for community health that CORE Group members can explore and become involved in.
- Private partnerships can be effective if they are bilateral relationships with clear expectations.
- Build financing models of implementation based on past evidence of success and innovative approaches.
- Sustainability plans for financing and partnership should be addressed early on in the process.
- Beneficiary engagement strategies should occur in design and implementation of public-private partnership projects.



OPPORTUNITIES

Building on the many results and realities, participants then explored opportunities for new partnerships and emerging voices for building healthy communities worldwide.

Throughout the conference, concurrent and plenary sessions explored strategies for increasing the involvement of youth, expanding access and opportunities for people with intellectual and physical disabilities, and improving social accountability. Many presenters cited the rallying call to action, “Nothing about me without me,” reminding program planners to include these important voices in all levels of program design and implementation as well as advocacy at the government level to systematically target those traditionally left behind.

-- YOUTH KEY MESSAGES --

- Integrate young people into the design of the project, e.g. through a brainstorming session.
- Use social media to connect with young people.
- See young people as problem solvers and assets.
- Mentorship programs need to be two-way programs, with mentors and mentees learning from each other.
- In program design, we have to work WITH not FOR young people.
- Collaborate actively, and provide jobs for youth and compensate them for their involvement.



The emerging importance of addressing non-communicable diseases (NCD) was explored during sessions on: tackling NCD within global health practice; community engagement and outreach for chronic diseases; and collaborating with the private sector to advance NCD services. CORE Group will reinvigorate the NCD Interest Group and coordinate with the NCD Roundtable and other forums.

PLENARY | Opportunities: Communities and Health in Sustainable Development

Gogontlejang Phaladi, Partnership for Maternal and Newborn Health (PMNCH); Daniel Schensul, United Nations Population Fund; Judy Lewis, University of Connecticut School of Medicine (Moderator)

Gogontlejang Phaladi and Daniel Schensul capped off the conference with insightful and thought-provoking presentations to keep the conversations moving forward. Ms. Phaladi spoke about youth voices and urged participants to work with young people as partners for development and not solely as beneficiaries. Her dynamic presentation reminded us that the voice of youth is strong and innovative, and can add meaningful contributions to solving global community challenges.

Mr. Schensul spoke of the widening gap of inequality in this new era of sustainable development, highlighted the SDG pledge to leave no one behind, and called attention to the commitment to “endeavor to reach the furthest behind first.” He challenged the audience to think about the implications for results, resources, and the need for disaggregation of data in order to meet this commitment. Related to universal health coverage, he challenged the CORE Group community to consider the gaps in packages of covered services, people left out, quality issues including stigma and discrimination, and social determinants of health related to integration.

“I think it’s great to have a trusted, non-biased source of information where people are encouraged to collaborate, with the ultimate purpose of working together. I think because our field can be competitive and because it’s donor-driven, that CORE can be the facilitator to really encourage us to forget about that and work together.”

– Melissa Antal, The Manoff Group





Gogontlehang Phaladi and Daniel Schensul speak during the Opportunities plenary, with session moderator Judy Lewis in the background.

-- OPPORTUNITIES PLENARY KEY MESSAGES --

- There needs to be a concerted effort to examine the SDGs with a pro-poor lens, and an allocation of funding to achieve success.
- We need a commitment to increase diversity and reach marginalized groups, and these objectives can be built into CORE Group Working Group workplans for action.
- Health systems should be human centered, from community to facility to policy.
- CORE Group must have a strategy for reaching youth (including youth living in slums and rural areas), expand the mentoring program, involving youth in all areas of programming, create a Board of Directors seat for youth, and provide funding for youth activities.
- Better data is needed from the hardest to reach communities and youth; CORE Group should engage in discussions to create a platform to collect this data.

WORKING GROUP POST-CONFERENCE ACTION POINTS

CORE Group's Working Groups push the field of community health forward by focusing on specific technical and cross-cutting issues for collaborative impact. Each Working Group met during the conference, and they developed the following action points:



The **Community-centered Health Systems Strengthening Working Group** will move discussions on community health financing and investments forward, and they will develop joint panel submissions for upcoming conferences to bring the NGO community-centered perspective to the global health systems strengthening dialogue.

The **Monitoring and Evaluation Working Group** reconfirmed their five-year objective to develop and disseminate M&E guidance and capacity-building materials for community and front-line health workers.



The **Reproductive, Maternal, Newborn and Adolescent Health (RMNAH) Working Group** will further explore RMNAH issues in humanitarian crises during the coming year.

The **Social and Behavior Change (SBC) Working Group** will continue their successful SBC Journal efforts, coordinate joint submissions for the SBC Summit in Bali, and explore the possibility for further joint training opportunities related to using social norms. They were also interested in further exploration of the humanitarian-to-development continuum and the intersection of SBC across this continuum.



The **Nutrition Working Group** will focus on interest areas such as acute malnutrition, the triple burden of malnutrition, and nutrition-sensitive program integration.

NEXT STEPS

CORE Group conferences are important networking and learning opportunities. They spur action for community health needs and gaps, and motivate global health stakeholders to collaborate for collective action. We will be moving forward with the following initiatives and actions post-conference:

Technical Advisory Group (TAG) Meetings >>>

Based on the key priority topics that emerged from the Conference, over the next year CORE Group will be convening TAG Meetings in the following areas: Disability, NCDs, Child Health, Youth engagement and voice (with youth present), Social Accountability, Financing, Early Childhood Development, and more. These TAG Meetings will focus on specific areas to spur action, harmonize tools and resources, and conduct advocacy for increased resources in public health.

Mentorship Program >>>

As part of our ongoing commitment to support youth development, CORE Group's Young Professionals Network is launching a Pilot Mentorship Program for 2017-2018. This year-long Mentorship Program aims to support the career development of young professionals in global community health and international development by drawing on the extensive and far-reaching knowledge and experience of CORE Group Members. By doing so, we hope to deepen the collaboration, engagement, and learning among our diverse community.

International Membership Expansion >>>

CORE Group will begin the process of international membership, beginning with a scoping exercise and consultation with other international civil society networks. Possible areas we will be exploring are:

- Expanding membership opportunities for international NGOs and NGO networks;
- Hosting a membership conference in a low or middle-income country;
- Deepening our commitment to virtual learning and knowledge management to expand our voice and influence and strengthen CORE Group's International Community Health Network; and
- Participating more directly with global health agencies to amplify their agendas.

CORE Group Website Enhancements >>>

CORE Group's website is a well-known hub for global community health resources, with over 50,000 visitors per year. At the conference we officially launched the first phase of a website redesign, and as we continue to update and refine the website to better meet the needs of our Members and International Community Health Network, will be asking for extensive feedback through surveys and user experience interviews over the coming months.

Future Conferences >>>

CORE Group will continue to convene the International Community Health Network around pertinent issues through our conferences. **The next Global Health Practitioner Conference will be held June 4 - 7, 2018 in Bethesda, MD, USA.** Mark your calendars, and stay tuned for information on joining the planning committee and submitting session ideas! CORE Group also aims to hold a regional conference in fall 2018 in East Africa or India for improved learning at the country level.

I think CORE Group is really wonderful. I wish it was around from the time I was struggling with community health in the 1970s...With CORE Group, because you are bringing together many practitioners, you learn from one another. Each practitioner does not have to reinvent the wheel.

– Dr. Miriam Were, Moi University, Kenya



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