



2019
global health
practitioner conference



coregroup

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FOR COMMUNITY
HEALTH



#GHPC19



MAY 6-9, 2019
BETHESDA, MARYLAND, USA

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ACKNOWLEDGEMENTS

Thank you to all participants and contributing organizations! CORE Group would like to thank our members, our partners, and the wider International Community Health Network of experts and practitioners for their participation, their willingness to engage in dialogue, and the ideas they have brought to share with their colleagues. We would also like to extend special thanks to the many individuals who made this event possible through their leadership in agenda formation, session design, and overall conference production.

Fernando Chang-Muy, University of Pennsylvania, Conference Organizer and Facilitator

Technical Review Committee:

Rudolf Abugnaba-Abanga, Presbyterian Health Service-Ghana
Suraj Bahttarai, London School of Health & Tropical Medicine
Charlotte Block, NCBA CLUSA
Mary Helen Carruth, Independent
Allison Annette Foster, WI-HER
Mai-Anh Hoang, Chemonics International
Rhonda Holloway, World Vision International
Embry Howell, Urban Institute
Cori Mazzeo, USAID's flagship Maternal and Child Survival Program, Save the Children
Tishina Okegbe, FHI 360
Erin Pfeiffer, Food for the Hungry
Caroline Quijada, Abt Associates
Stacie Stender, Jhpiego
Halkeno Tura, The University of Iowa
Chandra DeNap Whetstine, Independent
Lauri Winter, Independent

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Nadine Nuchovich, Save the Children
Taylor Gates, United Nations Foundation
Emily Weiss, Sibley Memorial Hospital
Ashley Kingston, Gallaudet University
Jacqueline Ting, Gallaudet University
Rebecca A Dutton, George Washington, University
Janeska Wood, Loma Linda University

Jason Putsche, Jason Putsche Photography, Conference Photographer

CORE Group Board of Directors and Staff

Cover Photo by Kiran Shrestha, RDTA, USAID Suaahara II Program | Winner of CORE Group's 2018 Annual Photo Contest

LETTER FROM THE EXECUTIVE DIRECTOR

Dear Friends and Colleagues,

We are excited to have the CORE Group Global Health Practitioner Conference in Bethesda, MD for three days of stimulating presentations and plenaries, innovation events, research perspectives, new information circuits, and discussions surrounding the theme “Partnerships & Innovations for Community Health.” The increased engagement with the private sector, foundations, bilaterals, and corporations for this conference has been exciting and we look forward to new partnerships for community health.

The agenda will feature four pre-conference events on Monday that will start off the conference with in-depth learning and collaboration. Throughout the next three days, we encourage all conference participants to take part in the many sessions organized by Working Groups and CORE Group members, the research presentations and New Information Circuits, the networking opportunities, and the poster sessions. Through our collaborative learning platform, we aim to move the community health agenda forward, apply lessons learned, while challenging norms, and base our future direction on evidence-based practices. We also hope you will join a Working Group session so that you can be a champion for Working Group activities and direction in the upcoming year.

Sasha Fisher, CEO of Spark MicroGrants, will deliver our keynote address. As co-founder and executive director of Spark, she leads the support to emerging governments and civil society to develop inclusive democratic processes across West, East Africa and beyond. Spark has developed a streamlined village planning process paired with a seed grant that equips families to drive local change, such as launching a farm to improve food security or a school for the children. We will be inspired by her community-led process and perspective on the future!

Dr. Mario Meriardi will jolt our thinking and spark dialogue in our Innovation Speaker segment. As Senior Director, at BD Global Health, he is tasked to help lead the maternal and newborn health strategy and establish BD’s technologies and market position in this important area of unmet health need. He will host this interactive session to discuss scaling of medical technology to provide quality care to women at the community level, have a demonstration of the Udon device and more!

The **CORE Group Membership and Business Meeting** during an interactive lunch on Wednesday, May 8th will feature important announcements from the Board of Directors regarding our newest members on the Board . We will announce our inaugural “**CORE Group Working Group Leadership Award 2019**” to be presented to an outstanding Working Group co-chair. We will also provide updates on the revised bylaws, our YPN mentorship program, and discuss our 2019 Nairobi, Kenya conference and expanding business and engagement opportunities for our members and CSOs at the country level.

The **2019 Dory Storms Award** will be presented to **Mary DeCoster**, Food for the Hungry, for her dedication throughout her career to improving the health of mothers and children in low-resource communities, both domestically and internationally, for the last 31 years. Her leadership, technical expertise, and mentoring of others throughout the years has made a difference to many. Congratulations Mary!

This conference represents months of planning, coordination, and collaboration. Many thanks to everyone who helped make this event possible, including our volunteer technical review committee members as well as Janine Schooley, Project Concern International, and Caroline Quijada, Abt Associates for plenary coordination. We also thank our session presenters; our contributing partners and sponsors; innumerable volunteers; our Working Group Chairs; CORE Group staff; our Board of Directors, and our fantastic conference organizer and Fernando Chang-Muy!

We look forward to working with you in 2019 and beyond, as CORE Group strives to support our members and to have real impact at the community, national and global levels.

In partnership,
Lisa M. Hilmi
CORE Group Executive Director

ABOUT CORE GROUP

Who We Are

CORE Group unites a coalition of more than 100 non-governmental organizations (NGOs), universities, foundations, corporations, and individual experts to end preventable maternal, newborn, and child deaths around the world. For the past 20 years, CORE Group has been driving collaborative action and learning to improve and expand community health practices for underserved populations, especially women and children. CORE Group fosters collaboration and learning, strengthens technical capacity, develops innovative tools and resources, and advocates for effective community-focused health approaches.

What We Do

Strengthening Programmatic Impact: CORE Group works together with global health stakeholders to examine the evidence and share best practices for community-based programming approaches. This helps our network, and other practitioners across the globe, to implement consistent, high impact interventions. Together, we develop and improve common monitoring and evaluation systems. Collaboration strengthens collective impact at scale, prevents duplication, and builds strong evidence-based practices.

Knowledge Management: CORE Group supports members and partners to capture and use lessons learned in program implementation. We present opportunities to build skills in knowledge management techniques. We serve as a platform to discuss and improve the interface between field-based implementation and donor and global directions.

Collaborative Response: CORE Group improves collaboration capacity through timely and unified responses to health crises, such as infectious disease outbreaks. We align NGOs and governments on key messages, strategies, and approaches. By mobilizing our membership and their strong in-country networks, we engage key stakeholders in dialogue and collaborative, evidence-based action. Our work fills gaps in community health and empowers civil society to ensure a smooth transition from emergency to sustainable development.

Engage With Us

Share stories. Discover resources. Engage with new partners. Strengthen the global knowledge base.

Become a part of our coalition of Community Health Practitioners. Let's explore the possibilities.

Membership

CORE Group's membership is made of more than 100 non-governmental organizations (NGOs), universities, foundations, corporations, and individual experts committed to advancing community health for underserved people in low- and middle-income countries.

Technical Working Groups and Interest Groups

Our Technical Working Groups and Interest Groups accelerate progress in the field of community health around specific technical and cross-cutting issues. Working Groups are self-organizing, self-governing, and adaptive groups that transcend organizational boundaries. Each group has a specific work plan and is driven by voluntary co-chairs.

What exactly do our groups do?

- Develop state-of-the-art tools, practices, and strategies with direct benefits for field programs;
- Exchange information on best practices, resources, and opportunities;
- Link with academics, advocates, and private resources and expertise;
- Foster members' professional development;
- Build organizational partnerships and capacity; and
- Articulate the community health perspective in global policy dialogue and alliances.

Technical Area	Co-Chairs	How To Subscribe
<i>Community-centered Health Systems Strengthening</i>	Eric Sarriot, Save the Children Lauri Winter, Independent	hss-subscribe@lists.coregroup.org
<i>Monitoring and Evaluation</i>	Allison Annette Foster, IntraHealth Mai-Anh Hoang, Chemonics Todd Nitkin, World Vision	me-subscribe@lists.coregroup.org
<i>Nutrition</i>	Jennifer Burns, Catholic Relief Services Kathryn Reider, World Vision Charlotte Block, NCBA CLUSA	nutrition-subscribe@lists.coregroup.org
<i>Reproductive, Maternal, Newborn, Child, and Adolescent Health</i>	Corinne Mazzeo, USAID's flagship Maternal and Child Survival Program/Save the Children <i>Sexual and Reproductive Health and Adolescents Task Force:</i> Mychelle Farmer, Advancing Synergy Acting Chair: Catherine Lane, Pathfinder	rmncah-subscribe@lists.coregroup.org
<i>Social and Behavior Change</i>	Joseph Petraglia, Syntegral Erin Pfeiffer, Food for the Hungry Sarah Sahlaney, ACDI/VOCA	sbc-subscribe@lists.coregroup.org
<i>Humanitarian-Development Task Force</i>	Jesse Hartness, Save the Children Wendy Dymont, Medair Susan Otchere, World Vision	hdtf-subscribe@lists.coregroup.org
<i>Disability Inclusive Technical Advisory Group</i>	Alessandra Aresu, Humanity & Inclusion Leia Isanhart, Catholic Relief Services	disability_inclusive@lists.coregroup.org
<i>Non-Communicable Diseases Interest Group</i>	Dr. Arti Varanasi, Advancing Synergy	ncd@lists.coregroup.org

Programs

We are partners on the following programs, providing expertise in community health and civil society engagement, knowledge management and learning, and communications.

CORE Group Polio Project: CORE Group works with The CORE Group Polio Project (CGPP) is a multi-country, multi-partner initiative providing financial backing and on-the-ground technical guidance and support to strengthen host country efforts to eradicate polio. The Global Health Security Agenda (GHSA) is integrating with CGPP activities to prevent, detect, and respond to current and future infectious disease outbreaks

USAID's flagship Maternal and Child Survival Program (MSCP): CORE Group is a partner on USAID's flagship Maternal and Child Survival Program (MSCP), a project that aims to end preventable child and maternal deaths in 25 high-priority countries. Within MSCP, CORE Group is an active member of the cross-cutting Community Health and Civil Society Engagement team, using our expertise in helping non-governmental organizations collaborate with government partners and other NGOs to improve health for communities and families.

Humanitarian-Development Nexus: CORE Group as partnered with Save the Children and Medair on a USAID/OFDA-funded initiative to address the operational evidence gaps around health and nutrition in the humanitarian-development nexus, research existing interventions, and turn this research into actionable guidelines.

ABOUT CORE GROUP

Join the Conversation

Share information and successes. Collaborate. Network. Stay up to date. All of this is possible through our many CORE Group platforms! The below are all great ways to share and receive important announcements from CORE Group, our members, and the broader global health community.

Website

www.coregroup.org

Social Media



@COREGroupDC



@COREGroupCS



@COREGroupDC



/company/core-group-dc

Newsletter

Sign up to receive quarterly newsletters containing the latest news, resources, articles, events, and more from CORE Group, our Membership, and the broader global health community.

bit.ly/CORENews

CORE Group Community

Join the conversation! In this Listserv, experts discuss new resources, and share key upcoming events and job opportunities.

cgcommunity-subscribe@lists.coregroup.org

Young Professionals Network

Are you a young global health professional? Join us to learn more and receive information on networking opportunities, events, and resources.

ypn-subscribe@lists.coregroup.org

CONFERENCE OBJECTIVES

The **Global Health Practitioner Conference** is CORE Group's flagship annual conference. Implementers, academics, donors, private sector, and other community health advocates convene in this multi-day knowledge sharing and skills building meeting for state-of-art updates on maternal and child health, dialogues on community health, Working Group planning, and networking.

GHPC19 will explore the dynamic and ever-evolving profile of partnerships existing between all stakeholders working to advance community health at various levels of policy and implementation. The conference will also highlight different innovations for community health work, from technology to methodologies and processes.

The conference aims to provide participants with tools to:

1. **Examine** the successful elements that contribute to meaningful partnerships for results at the community, national, regional and global levels;
2. **Share** innovative health models that can be scaled; determine how as a community we can address gaps in scaling up known evidence-based models; and
3. **Catalyze** plans for consortium building, technical capacity building and strategic focus for improved community health, in a cross-sectoral manner.

Making of the Logo

Community health has many facets, which become visible when we collaborate with partners the world over. The many intersections and data points shown on the globe logomark represent connections between diverse partners, working toward a greater understanding of community health. The figures in the foreground, in warm, active colors of red and orange, represent the communities and families that not only inspire this work, but in fact, make this work possible. This mark represents our commitment to innovating community health from all points of view.



This logo was created by Gwendolyn Stinger, independent graphic designer, and CORE Group staff.

KEYNOTE ADDRESS

Sasha Fisher

Co-Founder and Executive Director, Spark MicroGrants



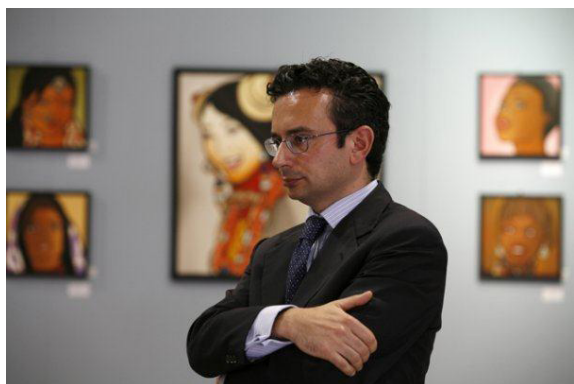
Sasha Fisher is the co-founder and executive director of Spark MicroGrants and part of the inaugural class of Obama Fellows. Spark supports emerging Governments and leading civil society to develop inclusive democratic processes across West, East Africa and beyond. Spark has developed a streamlined village planning process paired with a seed grant that equips families to drive local change, such

as through launching a farm to improve food security or a school for the children. Since 2010 Spark has enabled over 200 villages across six countries to launch local initiatives, increase female and youth participation in civic life, and advocate to local government. 94% of Spark partner villages continue to meet and take action together. Sasha holds a BA from the University of Vermont in Studio Art and a self-designed major in Human Security; a paradigm for development that recognizes the rising legitimacy of non-state actors in securing basic human needs.

INNOVATION SPEAKER

Dr. Mario Merialdi

Senior Director, Becton, Dickinson and Company



Dr. Mario Merialdi is Senior Director, at BD Global Health. He is tasked to help lead the maternal and newborn health strategy and establish BD's technologies and market position in this important area of unmet health need. He works closely with the BD's Medical Affairs function, BD's geographic regions and with the Greater Asia R&D organization to advance plans for clinical trials

and development of the BD Odon Device. Dr. Merialdi joined BD in 2014 from the World Health Organization (WHO), where he most recently held the position of Coordinator in the Department of Reproductive Health and Research. Dr. Merialdi achieved his medical degree at Parma University, Italy where he also completed a residency in Obstetrics and Gynecology. He subsequently obtained a Master of Public Health and PhD in International Health from the Bloomberg School of Public Health at Johns Hopkins University. In 2001, Dr. Merialdi joined WHO in the Department of Reproductive Health and Research, as a Medical Officer. In 2007, he was appointed Coordinator of the Improving Maternal and Perinatal Health Team, and was promoted in 2011 to Coordinator for Research, Evidence and Norms leading the department's research program and managing a team of 35 staff.

DORY STORMS AWARD WINNER

Mary DeCoster

Director of Social & Behavioral Change Programs, Food for the Hungry



Mary DeCoster has passionately dedicated her career to improving the health of mothers and children in low-resource communities, both domestically and internationally, for the last 31 years. She is a quiet but powerful advocate for recognizing and developing a community's inherent strengths and resources in respectful ways. As a certified lactation consultant, childbirth educator, and parent educator, Mary has worked with vulnerable populations in North Carolina and internationally on both maternal and child health and HIV programs.

Mary is an expert facilitator, trainer and skilled curriculum writer and has developed curricula for Care Groups with Curamericas Global and Food for the Hungry. She has also co-authored several Care Group publications. Mary chairs FSN Network's Care Group Forward Interest Group, which has been instrumental in promoting the Care Group model and in improving the quality of its implementation. She also oversees www.caregroupinfo.org, a clearinghouse of resources, technical documents and reports to encourage and support Care Group implementers. Her humble leadership of the FSN Network's Social and Behavioral Change (SBC) Task Force and Care Groups Forward encouraged increased collaboration and transparency within the community of practice.

As many in CORE Group's community know, Mary has also dedicated countless hours to mentoring and coaching others in SBC – both inside and outside of CORE Group – with the desire to save lives and improve the quality of life for the most vulnerable.

CONFERENCE SCHOLARSHIPS

This year's CORE Group Global Health Practitioner Scholarship Fund was made available through the generous contribution of CORE Group individual associate member and former chair of CORE Group's Board of Directors, Dr. Judy Lewis.

We are excited to welcome our **GHPC19 scholarship recipients**:

Anne Kerubo Bitengo Nyangweso

Community Support Supervisor, KIKOP Project, Curamericas Global Kenya

Akim Assani Ossen

Youth Services Manager, Pathfinder International Niger

AGENDA OVERVIEW

MONDAY, MAY 6, 2019	
8:30am – 9:00am	Registration and Breakfast
9:30am – 12:00pm <i>Ballroom</i>	USAID’s flagship Maternal and Child Survival Program’s (MCSP) Harnessing the Power of Communities to Advance Equity and Primary Health Care for All Featuring MOH and MCSP Country perspectives and evidence; USAID, UNICEF, Financing Alliance for Health
	PRE-CONFERENCE WORKSHOPS
9:00am – 1:00pm <i>Cabinet</i>	Practical Approaches to Disability Inclusion in Healthcare Alessandra Aresu, Humanity & Inclusion; Leia Isanhart, Catholic Relief Services; Zinayida Olshanska, Light for the World Netherlands; Abia Akram, National Forum of Women with Disabilities, Pakistan; Andrea Pregel, Sightsavers (Moderator)
9:00am – 5:00pm <i>Diplomat</i>	FULL DAY Norms-shifting interventions as part of community-based health projects: Considerations for their design and evaluation Susan Igras; Institute for Reproductive Health, Laurie Krieger, Manoff Group; Joseph Petraglia, Syntegral; Armelle Sacher, Action Against Hunger
1:00pm – 5:00pm <i>Judiciary</i>	Public-Private partnership and Chronic Kidney Disease of Unknown Causes (CKDu) World Vision, PAHO, INSP (Mexican National Institute of Public Health), Sugar Mill
4:30 pm – 5:30pm	WELCOME & ORIENTATION
<i>Ballroom</i>	Open to all, join CORE Group staff to learn about CORE Group’s work, history, and what to expect at the May 2019 Global Health Practitioner Conference.
6:00pm – 8:00pm <i>Cabinet</i>	CORE Group Board of Directors Meeting

TUESDAY, MAY 7, 2019	
8:30am – 9:00am	Registration and Breakfast
9:00am – 10:30am <i>Ballroom</i>	OPENING & KEYNOTE ADDRESS Welcome from CORE Group and Board of Directors Lisa M. Hilmi, CORE Group Executive Director CORE Group Board of Directors Chair KEYNOTE: Sasha Fisher, Spark MicroGrants
10:30am – 11:00am	Break <i>Expo Tables Open</i>
11:00am – 12:30pm	CONCURRENT SESSIONS
<i>Ballroom</i>	Better Together: Advocacy and partnerships to strengthen community health Crystal Lander, Living Goods; Mesfin Teklu Tessema, International Rescue Committee; Robert Newman, Aspen Management Partnership for Health (AMP Health); Lizah Masis, Financing Alliance for Health
<i>Cabinet</i>	Innovative, Community-based Strategies for Making Global Health and Development Programs more Inclusive of People with Disabilities Leonard Mbonani, Kuhenza for the Children; Amberle Brown, World Relief; Jessica Charles, Kupenda for the Children; Holly Nelson, Special Hope Network; Cynthia Bauer, Kupenda for the Children (Moderator)
<i>Judiciary</i>	Building partnerships to provide nurturing care for small and sick newborns and their families Judith Robb-McCord, Every Premie-SCALE, Project Concern International; Neena Khadka, USAID’s flagship Maternal & Child Survival Program, Save the Children; Renee Perez, USAID’s

	flagship Maternal & Child Survival Program, Save the Children; Cori Mazzeo, USAID's flagship Maternal & Child Survival Program, Save the Children (Moderator)
<i>Diplomat</i>	Social Accountability: Measurements and Momentum Allison Annette Foster, WI-HER; Eric Sarriot, Save the Children; Kristen Mallory, Children International; Ligia Paina, Johns Hopkins University School of Public Health; Beth Outterson, Independent
<i>Potomac</i>	Opportunities to Integrate and Optimize Community Health Workers in Health Systems: Global and Local Perspectives Leah McManus, HRH2030 Program, Chemonics; Isaiah Ndong, Chemonics; Brian Rettmann, HRH2030 Program, Chemonics; Halkeno Tura, Ethnic Minorities of Burma Resource and Advocacy Center (EMBARC); Rachel Deussom, HRH2030 Program, Chemonics (Moderator)
12:30pm – 2:00pm	Lunch <i>Expo Tables Open</i>
2:00pm – 3:30pm	NEW INFORMATION CIRCUITS
<i>Ballroom</i>	Attendees will be able to choose three tables to visit over the course of this plenary. These tables include new tools, innovations, projects, and topics shared interactively by various presenters.
3:30pm – 4:00pm	Break <i>Expo Tables Open</i>
4:00pm – 5:30pm	CATALYST SESSIONS
<i>Ballroom</i>	Innovative Financing Mechanisms and Effective Management of Risk for Partnerships in Global Health So O'Neil, Mathematica; Scott Higgins, Merck for Mothers; Priya Sharma, USAID Center for Innovation and Impact; Marcie Cook, Population Services International; Marissa Leffler, UBS Optimus Foundation; Shree Prabhakaran, Palladium; Christine Sow, Palladium (Moderator)
<i>Cabinet</i>	The role of gender and religion in social behavior communication in Muslim societies Samuel Usman, CORE Group Polio Project Nigeria; Ahmed Ahrale, CORE Group Polio Project Horn of Africa (Kenya and Somalia); Rina Dey, CORE Group Polio Project India; Lee Losey and Lydia Bologna, CORE Group Polio Project (Moderators)
<i>Judiciary</i>	Multisectoral Partnerships and Innovations for Early Childhood Development (ECD) Joy Noel Baumgartner, Duke University Evidence Lab; Maureen Black, RTI International; Mohammed Ali, Catholic Relief Services; Chessa Lutter, RTI International; Erin Milner, USAID; Cristina Bisson, RTI International (Moderator)
<i>Diplomat</i>	Do This, Not That: Surfacing Lessons for Social Accountability Design from Evaluations that show no health impacts Preston Whitt, Results for Development; Courtney Tolmie, Results for Development (Moderator)
<i>Potomac</i>	Artificial Intelligence and eLearning in Humanitarian Health Donald H. Bauman, Jr, Isabel Healthcare, Inc; Colleen Gallagher Thomas, Relief International; Lara Ho, International Rescue Committee; Mike OBrien, Relief International (Moderator)
5:30pm – 7:30pm	Social Networking Join the CORE Group Community and other conference attendees at a Bethesda restaurant. Location TBD.

WEDNESDAY, MAY 8, 2019

8:30am – 9:00am	Registration and Breakfast
9:00am – 10:00am <i>Ballroom</i>	INNOVATION SPEAKER Dr. Mario Meriardi , Senior Director, Becton, Dickinson and Company (BD)
10:00am – 10:30am	Break <i>Expo Tables Open</i>
10:30am – 12:00pm	PLENARY

AGENDA OVERVIEW

	Myroslava Tataryn, Wellspring Philanthropic Fund; Rob Tashima, ViCap Innovations; Janine Schooley, PCI (Moderator)
12:00pm – 1:30pm	Lunch <i>Expo Tables Open</i>
12:15pm – 1:15pm <i>Ballroom</i>	CORE Group Membership & Business Meeting
1:30pm – 3:00pm	WORKING GROUP PLANNING SESSIONS
<i>Ballroom I</i>	Community-Centered Health Systems Strengthening Working Group
<i>Ballroom II</i>	Monitoring & Evaluation Working Group
<i>Ballroom III</i>	Nutrition Working Group
<i>Cabinet</i>	Reproductive, Maternal, Newborn & Adolescent Health Working Group
<i>Judiciary</i>	Social & Behavior Change Working Group
<i>Diplomat</i>	Humanitarian-Development Task Force
<i>Potomac</i>	Non-Communicable Diseases Interest Group
3:00pm – 3:30pm	Break <i>Expo Tables Open</i>
3:30 pm – 5:00pm	CONCURRENT SESSIONS
<i>Ballroom</i>	Breaking barriers to improve health and nutrition: What it will take to strengthen health services to better address nutritional status Smita Kumar, USAID; Sascha Lamstein, USAID Advancing Nutrition, John Snow Inc.; Grace Funnell, Action Against Hunger; Patti Welch, USAID’s flagship Maternal & Child Survival Program, PATH; Justine Kavle, USAID’s flagship Maternal & Child Survival Program, PATH; Cori Mazzeo, USAID’s flagship Maternal & Child Survival Program, Save the Children (Moderator)
<i>Cabinet</i>	Moving nutrition innovation from inception to deployment to scale Susan Abdel-Rahman, Children's Mercy Hospital; Kristen Mallory, Children International; Pamela Sheeran, Smile Train
<i>Judiciary</i>	Using Innovations and Partnerships in Digital Technologies to Strengthen Humanitarian Response Walter Kerr, Zenysis Technologies; Kim Shelsby, Chemonics; Tamara Goldschmidt, BAO Systems; Mai-Anh Hoang, Chemonics (Moderator)
<i>Potomac</i>	Partnerships for positive change in the era of Universal Health Coverage Mychelle Farmer, Advancing Synergy & NCD Child; Jane Otai, Jhpiego
5:30pm – 7:00pm <i>Hyatt Regency Terrace</i>	POSTER SESSION & PROFESSIONAL NETWORKING Light hors d'oeuvres will be provided and a cash bar will be available.

THURSDAY, MAY 9, 2019

8:30am – 9:00am	Registration and Breakfast
9:00am - 9:30am	Presentation of Dory Storms Award 2019 Award Winner Mary DeCoster
9:30am - 11:00am <i>Ballroom</i>	NEW INFORMATION CIRCUIT Attendees will be able to choose three tables to visit over the course of this plenary. These tables include new tools, innovations, projects, and topics shared interactively by various presenters.
11:00am - 11:30 am	Break <i>Expo Tables Open</i>
11:30am - 1:00pm	CONCURRENT SESSIONS

<i>Ballroom I</i>	<p>Partnerships in Action: A Nutrition-Focused Family-Based Lifecourse Approach to Addressing NCDs</p> <p>Paul Freeman, University of Washington; Charlotte Block, NCBA CLUSA; Mychelle Farmer, Advancing Synergy & NCD Child; Eric Trachtenberg, Alliance for Food & Health; Arti Varanasi, Advancing Synergy (Moderator)</p>
<i>Ballroom II</i>	<p>Leveraging Expertise: A Multi-Stakeholder Partnership Approach to Strengthening Community Health Systems</p> <p>Nazo Kureshy, USAID; Smisha Agarwal, Frontline Health, Johns Hopkins University; Vandana Tripathi, Fistula Care Plus Project; EngenderHealth; Caroline Johnson, Frontline Health, Population Council; Juliet Harris, Aga Khan Foundation; Karen Kirk, Population Council; Ben Bellows, Frontline Health, Population Council (Moderator)</p>
<i>Ballroom III</i>	<p>The CMAM Surge Approach: Building Resilient and Responsive Health Systems</p> <p>Amanda Yourchuck, Concern Worldwide; Sarah Butler O’Flynn, Save the Children – US</p>
<i>Potomac</i>	<p>Catalyzing Investments in RMNCAH at Community Levels: Applying and Scaling-Up Innovative Policy- and Program-Level Approaches</p> <p>Kaja Jurczynska, Palladium; Feven Mekuria, CARE; Ryan Derni, CARE</p>
1:00pm - 2:00pm	Lunch <i>Expo Tables Open</i>
2:00pm - 4:00pm	<p>PLENARY & CLOSING</p> <p>The Power of the Private Sector at the Community Level: Partnerships and Innovation to Achieve Universal Access to Care</p> <p>Sam Gwer, Afya Research Africa; Malcolm Riley III, Innovation in Healthcare at Duke University; Whitney Adams, CARE; USAID Center for Innovation and Impact, Bureau for Global Health; Caroline Quijada, SHOPS Plus Project, Abt Associates (Moderator)</p>

PRE-CONFERENCE WORKSHOPS

9:30AM-12:00PM | BALLROOM

USAID's flagship Maternal and Child Survival Program's (MCSP) Harnessing the Power of Communities to Advance Equity and Primary Health Care for All

Featuring MOH and MCSP Country perspectives and evidence; USAID; UNICEF; Financing for Health

The Astana Declaration revives attention and commitment to primary health care (PHC) and yet, 40 years post-Alma Ata, community health platforms still are not fully integrated into formal health systems nor consistently prioritized for investment as part of national health strategies. Community approaches, including engagement of civil society and communities themselves, are essential to advancing equity, including gender equity, and achieving PHC for all.

Please join USAID's flagship Maternal and Child Survival Program (MCSP) in person and online to discuss the importance of strengthening and scaling community health interventions to save the lives of mothers and children. MCSP and partners will discuss and highlight global and country progress as well as the unfinished agenda for institutionalizing community health within national health systems.

The official program will commence at 9:30AM with registration and breakfast starting at 9:00AM. Lunch will be offered following the event.

9:00AM-1:00PM | CABINET

Practical Approaches to Disability Inclusion in Healthcare

PRESENTERS: Alessandra Aresu, Humanity & Inclusion; Leia Isanhart, Catholic Relief Services; Zinayida Olshanska, Light for the World Netherlands; Abia Akram, National Forum of Women with Disabilities, Pakistan | MODERATOR: Andrea Pregel, Sightsavers

This workshop highlights the importance of making health services and systems inclusive of people with disabilities, and provides practical recommendations and methodologies aimed at supporting workshop participants to mainstream disability inclusion within their activities. The session presents examples of successful partnerships for inclusive health established at different levels, analyzes the importance of participatory approaches and community mobilization, and explores how approaches designed with disability inclusion in mind can be adapted to reach and provide health services to other marginalized and vulnerable populations. The workshop includes individual presentations, a panel discussion, and practical interactive activities where participants will engage with the facilitators and other attendees to identify key challenges and suitable approaches to mainstreaming disability inclusion within their programs and operations. The session will also provide an opportunity for participants to explore potential collaborations and partnerships and identify entry points to replicate successful approaches at larger scale and across different regions and fields.

Session Objectives:

- Identify barriers to disability inclusion in healthcare and potential solutions
- Share disability inclusive health good practice and learnings from different regions and sectors
- Support workshop participants in embedding disability inclusion within their health programs

9:00AM-5:00PM | DIPLOMAT

Norms-shifting Interventions As Part of Community-based Health Projects: Considerations for Their Design and Evaluation

PRESENTERS: Susan Igras, Institute for Reproductive Health; Laurie Krieger, Manoff Group; Joseph Petraglia, Syntegral; Armelle Sacher, Action Against Hunger

Norms play a significant role in behavior change. What an individual believes others do and expect of him/her strongly influences action. Whether explicit or not, approaches to influencing change is predicated on a theory of what norms are and whether they can be 'manipulated' or shifted. We explore a range of theories and the benefits and challenges of normative change efforts. Participants will consider what their projects can do to address normative shifts, what they can accomplish within timeframes, and the types of partnerships needed. Panelists will review four major norms theories and approaches that guide norm-shifting intervention (NSI). Small groups will consider a set of commonly-cited factors that lead to shifts, exploring their relevance and reflecting on factors that may be missing, and discuss 2 case studies and how theory informed practice.

Finally, participants will describe a current or future project in which an NSI component is possible and ask: 1) Which principles/features seem critical, 2) Are new partnerships needed; 3) What evidence of effectiveness should be collected and how, and 4) What kind of inquiry and documentation would be needed to describe challenges and successes?

Session Objectives:

- Understand some of the theoretical perspectives on how norms influence behaviors and their implications for normative intervention
- Gain information on the design of norms-shifting interventions (NSI)
- Apply concepts and guidance to your own projects and programs

1:00PM-5:00PM | JUDICIARY

Public-Private Partnership and Chronic Kidney Disease of Unknown Causes (CKDu)

PRESENTERS: World Vision; PAHO; INSP (Mexican National Institute of Public Health); Sugar Mill

The US Department of Labor, through World Vision funds Campos de Esperanza (CdE), is a four-year project whose goal is to reduce child labor in migrant agricultural communities in Mexico, particularly in the sugarcane and coffee sectors. The project reduces child labor by (1) improving working conditions for agricultural workers and (2) creating linkages for migrant children and their families to participate in existing education, training and social protection programs in order to strengthen their livelihoods. The project is developing a knowledge exchange platform and convening international learning exchanges for stakeholders as part of its OSH component activities. The workshop will feature mechanisms and approaches taken during process implementation to build successful private-public partnerships to prevent and/or manage the non-communicable disease, as well as identify critical roles communities can play in protecting children and youth in the workplace.

Session Objectives:

- Awareness to Chronic Kidney Disease of unknown causes (CKDu) and its relationship to agricultural workers
- Explore the role public-partnership plays in preventing chronic disease
- Share current community based good practices and lessons learned in non-communicable diseases

4:30PM-5:30PM | BALLROOM

Welcome & Orientation

PRESENTERS: CORE Group Staff

Open to all, join CORE Group staff to learn about CORE Group's work, history, and what to expect at the May 2019 Global Health Practitioner Conference.

SESSION DESCRIPTIONS

Opening & Keynote Address | 9:00AM-10:30AM | BALLROOM

Welcome from CORE Group

Lisa M. Hilmi, CORE Group Executive Director

Keynote Address

Sasha Fisher, Spark MicroGrants

Concurrent Sessions | 11:00AM-12:30PM

BALLROOM

Better Together: Advocacy and Partnerships to Strengthen Community Health

PRESENTERS: Crystal Lander, Living Goods; Mesfin Teklu Tessema, International Rescue Committee; Robert Newman, Aspen Management Partnership for Health (AMP Health); Lizah Masis, Financing Alliance for Health

Community health programs are critical to achieving Universal Health Care and prioritizing hard-to-reach populations. Community health programs need to be integrated in national health systems, financially sustainable and rooted in quality. Advocacy is key to sharing best practices and influencing policy commitments to ensure community health programs are included in national health strategies to increase access and provide services aligned to the population.

Effective advocacy is vital in sharing and scaling up innovative health models. We will increase understanding on tactics to influence policy makers at all levels to include integrated community health programs in national health plans. This campaign, launched by six partners, is working to generate high-level political will and commitment for including and prioritizing quality community health programs that are financially sustainable and integrated in national health systems as part of national and global UHC strategies.

Session Objectives:

- Demonstrate the role of advocacy in sharing and scaling up innovative health models
- Increase understanding on how to influence policy-makers at the sub-national, national and global level to include integrated community health programs in national health plans
- Share best practices of building partnerships to improve community health

CABINET

Innovative, Community-based Strategies for Making Global Health and Development Programs More Inclusive of People with Disabilities

PRESENTERS: Leonard Mbonani, Kuhenza for the Children; Amberle Brown, World Relief; Jessica Charles, Kupenda for the Children; Holly Nelson, Special Hope Network | MODERATOR: Cynthia Bauer, Kupenda for the Children

Development organizations rarely implement strategies to ensure people impacted by disabilities benefit from their programs. People with disabilities have little access to healthcare, education, or legal protections. Lack of knowledge often leads to abuse, neglect and even murder of people with disabilities. We will highlight Kupenda's trainings to community leaders. This model, reviewed, documented and shared over the last 5 years is in use in Tanzania, Zambia and Sierra Leone. Evaluation from 118 participants showed they had given 436 advocacy talks reaching 55,100 community members with inclusion and care messages and counseled 654 people impacted by disability and referred 705 children with disabilities to special education or medical facilities. On average, each 1-day workshop equips 25 community leaders to sensitize community members about disability justice and benefit 625 children with disabilities. We will share this model and discuss ways global health leaders can strategically include people with disabilities in their work. Participants will be guided by and collaborate with disability advocates, receive copies of the training tools, and meet other development organizations that are piloting this model.

Session Objectives:

- Discuss the importance for health and development programs to strategically include people with disabilities in their work
- Explore how health and development programs can include families impacted by disability
- Examine how learning from community leader disability training programs could benefit people impacted by disability in the work of other organizations committed to improving marginalized people's access to health, education, and over all well-being

JUDICIARY

Building Partnerships to Provide Nurturing Care for Small and Sick Newborns and Their Families

PRESENTERS: Judith Robb-McCord, Every Premie-SCALE, Project Concern International; Neena Khadka, USAID's flagship Maternal & Child Survival Program, Save the Children; Renee Perez, USAID's flagship Maternal & Child Survival Program, Save the Children | MODERATOR: Cori Mazzeo, USAID's flagship Maternal & Child Survival Program, Save the Children

We will provide a roadmap to build partnerships across sectors and between programs/services, communities, and families to ensure that children can achieve their full potential. While all children benefit from early childhood development interventions, babies who are born too soon, too small, or who are sick arguably have the most to lose if they don't receive critical health, nutrition, and development-related interventions. Caregivers of these babies are at higher risk of stress and depression, and often do not receive the necessary services and support to address their psychosocial well-being. We will share the evidence for and current state of developmentally-supportive, family-centered care for small and sick newborns, as well as innovative tools and approaches that can enhance the quality of care and support provided to these babies and their families. Through interactive activities we will explore innovative packages for supporting the health and development of small and sick babies and the psychosocial well-being of caregivers.

Session Objectives:

- Examine the evidence for and current state of nurturing care for small, sick newborns
- Share innovative tools and approaches for improving the quality of developmentally-supportive, family-centered care for small and sick newborns, including support to their families
- Learn from parents and caregivers of small, sick babies about how programs can build partnerships between facilities, communities, and families to support and enhance care

DIPLOMAT

Social Accountability: Measurements and Momentum

PRESENTERS: Allison Annette Foster, WI-HER; Eric Sarriot, Save the Children; Kristen Mallory, Children International; Ligia Paina, Johns Hopkins University Bloomberg School of Public Health; Beth Outterson, Independent

Gaps in monitoring and evaluating social accountability mechanisms challenge governments and local stakeholders in understanding how to strengthen and improve those mechanisms. Existing measurements fail to shed light on what makes a social accountability intervention successful or sustainable. We will re-orient the discussion around factors and processes that facilitate or inhibit institutionalization and monitoring, evaluation, and learning questions. We will share findings on how to identify the facilitating and inhibiting factors that enable effective SA interventions to expand and be institutionalized. We will focus on 1) how a successful intervention works, 2) why one intervention produces results that are more accepted by the communities and sustained beyond a single project and helps build local capacity, 3) understand common factors shared by country examples where SA processes have been integrated, 4) define the metrics that can best guide on-going research and monitoring.

Session Objectives:

- Define and measure social accountability outcomes
- Recognize and assess the institutionalization of social accountability
- Explore factors that facilitate or inhibit the institutionalization of social accountability

SESSION DESCRIPTIONS

POTOMAC

Opportunities to Integrate and Optimize Community Health Workers in Health Systems: Global and Local Perspectives

PRESENTERS: Leah McManus, HRH2030 Program, Chemonics; Isaiah Ndong, Chemonics; Brian Rettman, HRH2030 Program, Chemonics; Halkeno Tura, Ethnic Minorities of Burma Resource and Advocacy Center (EMBARC) | MODERATOR: Rachel Deussom, HRH2030 Program, Chemonics

The WHO Guideline recommends professionalizing CHWs to improve health outcomes. Highlighting promising practices, global goods, and country results from the Human Resources for Health in 2030 (HRH2030) Program, we will conduct a “mock debate” with expert practitioner perspectives. Discussants will share a vision for how to build, plan, manage, support and optimize the role of CHWs to strengthen health systems and improve health outcomes. Topics will include: Integrating quality CHW data into broader health information management and HRH information systems; Results from a landscape analysis on enhanced CHW supervision: Best practices to hold CHWs accountable for quality services; Community engagement for better community-led MCH services in Mali by using a quality improvement approach; Implementing a differentiated care model with CHWs for HIV services in Botswana: Using data for task/model shifting, facility linkages and policy dialogue; Adapting CHW models to specific communities, such as for refugee populations in the US, while considering community definitions, and cultural competencies for CHW selection.

Session Objectives:

- Demonstrate the role of advocacy in sharing and scaling up innovative health models
- Increase understanding on how to influence policy-makers at the sub-national, national and global level to include integrated community health programs in national health plans
- Share best practices of building partnerships to improve community health

New Information Circuits | 2:00PM-3:30PM | BALLROOM

Attendees will be able to choose three tables to visit over the course of this plenary. These tables include new tools, innovations, projects, and topics shared interactively by various presenters.

View full table descriptions here: <http://bit.ly/GHPCNICIS>

TABLE 1: Tools for Easing the Workload of Community Health Volunteers in Case Management

Katrina Mitchell, Picture Impact

TABLE 2: Capacity Development for Lasting Partnerships – How Can Implementing Partners More Sustainably Meet Country’s Needs?

Lyubov Teplitskaya, Health Policy Plus Project (HP+), Palladium

TABLE 3: Optimization of Care and Resources Through Technology: A Partnership-Based Lifecycle Approach

Dr. Arti Varanasi, Advancing Synergy

TABLE 4: New Global Indicators to Monitor Family Planning Task Sharing Programs

Tishina Okegbe, FHI 360

TABLE 5: Measuring Outcomes Among Street Children, Children Working in Mines, and Children of Female Sex Workers – How Should Global OVC Programs Measure the Impact of Interventions on Wellbeing Outcomes Among Children Who Are the Hardest to Reach and the Most Vulnerable?

Jackie Hellen and Lisa Parker, Palladium

TABLE 6: The Marginalized Community in the Driver’s Seat: A Mixed-Method Evaluation of Pregnancy Complications Managed at Casa Materna Rural Birth Centers

Elijah Olivas, The University of Iowa

TABLE 7: Prevention > Treatment: Very Young Adolescent Sexual and Reproductive Health and Gender Program Design Guide

Jennifer Gayles, Save the Children

TABLE 8: Family MUAC – Supporting Entire Communities to Screen for Acute Malnutrition

Sarah King, Action Against Hunger

TABLE 9: Specialized Care in Humanitarian Health, Mental Health, Prosthetics and Physical Rehabilitation

Amy Kunert, Relief International

TABLE 10: Health Kiosk at Faith Worship Centers: Innovation to Maximize Access to HIV Services at Faith Worship Centers in Zimbabwe

Gloria Ekpo, World Vision US

TABLE 11: Engaging New Allies in the Health Equity Movement: A Look at Promising Strategies and Future Directions

Renata Schiavo, Health Equity Initiative, Columbia University Mailman School of Public Health

TABLE 12: Community-Led Total Nutrition: A Community-led Approach to Addressing Malnutrition

Vicky Veevers, Catholic Relief Services

TABLE 13: Delivering Acute Malnutrition Treatment through Low-literate iCCM Community Health Workers: Experiences and Lessons Learned from a User-centered Design Approach to Develop a Global, Simplified Toolkit

Bethany Marron, International Rescue Committee

TABLE 14: Decreasing Child Stunting by Reducing Maternal Depression

Erin Pfeiffer, Food for the Hungry

TABLE 15: A First Time Parents Package: Integrating Postpartum Family Planning with Maternal and Child Health in West Africa

Akim Assani Ossen, Pathfinder International

TABLE 16: The First 42 Days: A Mobile Health App for Creating Partnerships Between Facility and Community Health Providers to Improve Postnatal Care in Rural India

Ravinder Kaur, USAID's flagship Maternal and Child Survival Program India

TABLE 17: Supporting Smart Investments in Digital Health – Introducing the Digital Health Investment Review Tool

Lisa Kowalski, USAID's flagship Maternal and Child Survival Program

TABLE 18: Digital Health and the Tools You May Not Be Using But Should!

Steve Ollis, John Snow Inc.

SESSION DESCRIPTIONS

Catalyst Sessions | 4:00PM-5:30PM

BALLROOM

Innovative Financing Mechanisms and Effective Management of Risk for Partnerships in Global Health

PRESENTERS: So O'Neil, Mathematica; Scott Higgins, Merck for Mothers; Priya Sharma, USAID Center for Innovation and Impact; Marcie Cook, Population Services International; Marissa Leffler, UBS Optimus Foundation; Shree Prabhakaran, Palladium | MODERATOR: Christine Sow, Palladium

Development impact bonds (DIBs) leverage private investor capital to address some of the world's greatest challenges while entirely focusing on the achievement of verifiable and measurable outcomes. In Rajasthan, Palladium is implementing one of the first DIBs focusing on maternal and newborn survival by improving the quality of labor and delivery care in up to 440 private sector health facilities. The DIB is also among the first launched using genuine private capital raised from private investors, raising the bar in terms of a real-world application of an approach that had previously only been executed in laboratory conditions with soft capital. This DIB serves as a proof of concept for risk-based public private partnerships and lays the ground work for the uptake of private sector quality regulation by the Government of Rajasthan, an avenue to sustainability currently under discussion and negotiation. In this session, we will present Palladium's learnings and invite presentations from other innovative health partnerships. We will use a mini-workshop approach to allow participants hands-on experience addressing real-life challenges of financing models such as the DIB.

Session Objectives:

- Discuss how innovative financing mechanisms can provide partnership platforms that are better suited for mixed sector participants (government, private sector, non-government) than traditional donor-driven financing models
- Examine how the effective management of risk is critical to the success of innovative financing models
- Explore how real time data can be used to improve the management of risk-based financing schemes for development

CABINET

The Role of Gender and Religion in Social Behavior Communication in Muslim Societies

PRESENTERS: Samuel Usman, CORE Group Polio Project Nigeria; Ahmed Arale, CORE Group Polio Project Horn of Africa (Kenya and Somalia); Rina Dey, CORE Group Polio Project India | MODERATORS: Lee Losey and Lydia Bologna, CORE Group Polio Project

Religion is often a powerful influence in Muslim societies in India, the Horn of Africa and Northern Nigeria. How can we harness cultural norms to design more effective programs in Muslim societies? We will cover how to achieve female-to-female interpersonal communication in societies that limit male/female interactions when potential female social mobilizers are not allowed to work outside the home. We will explore methods of identifying and engaging key community decision makers to achieve greater impact. Do elder women such as grandmothers and mother in laws guide decisions on health-seeking behavior? Do fathers play a significant role, religious leaders, elders, or community leaders? Understanding these dynamics has the potential to drive stronger program design. How do you change opponents into proponents? We will discuss several examples to educate and motivate fathers to support mothers, the use of religious leaders and female-male teams of vaccinators to improve vaccine coverage.

Session Objectives:

- Learn how to harness existing cultural and religious norms through behavior change strategies to achieve maximum impact and accelerate progress
- Understand how in Muslim societies, gender and religion shape decision-making; at the household level
- Examine approaches that have been successfully employed in underserved and marginalized communities where resistance to change is driven by deeply entrenched attitudes and practices

JUDICIARY

Multisectoral Partnerships and Innovations for Early Childhood Development (ECD)

PRESENTERS: Joy Noel Baumgartner, Duke University Evidence Lab; Maureen Black, RTI International; Mohammed Ali, Catholic Relief Services; Chessa Lutter, RTI International; Erin Milner, USAID |

MODERATOR: Cristina Bisson, RTI International

We will explore the elements of ECD outlined by the Nurturing Care Framework and three key elements for successful programming: multi-sectoral partnerships, measuring children's development, and synergies with child nutrition. Topics include: partnerships for evaluating integrated ECD programming in Ghana, Kenya, Cameroon related to maternal mental health and child health; the trajectory of measurement for children's development, including children with disabilities and application of the innovative D-score: a global measure of early childhood development and thinking behind the Lancet framework. We will highlight Ghana's challenges in implementing integrated ECD interventions in complex environment (household food security, health, education) and share innovative strategies being tested to improve MNCH and ECD in rural northern Ghana. We will focus on how ECD is influenced not only by what young children are fed but also by how they are fed: complementary foods that are rich in nutrients important for brain development and responsive feeding. We will share the insiders view of ongoing and future collaborative achievements across nutrition, health, education, for ECD and children with disabilities and what this means for implementation.

Session Objectives:

- Discuss and demonstrate the challenges and opportunities for evaluating 'real-world' implementation of integrated ECD programming
- Understand how meaningful multi-sectoral partnerships support the early development of the child, including children with disabilities
- Describe 2-3 innovations/models for ECD and how to apply these models to your work for neonatal and child health

DIPLOMAT

Do This, Not That: Surfacing Lessons for Social Accountability Design from Evaluations that Show No Health Impacts

PRESENTERS: Preston Whitt, Results for Development | MODERATOR: Courtney Tolmie, Results for Development

This session will start from a place that many sessions do not – results that show social accountability and citizen participation do not have an impact on health outcomes. In an interactive format we will understand what global health practitioners, donors, and researchers can learn from an approach that failed to improve community health. First, we will examine unsuccessful elements of the Transparency for Development (T4D) program's specific partnerships for community health, while revealing qualitative findings that suggest partnership approaches that may work better. Second, we will discuss how deliberate work to co-design a health-focused social accountability program that is both strategic and scalable ultimately led to a design that did not show impact; by unpacking the evidence that highlighted where scale and impact may have counteracted each other with workshop participants, we will surface design ideas that would make these two goals (scale and impact) not work in opposition. Finally, the session will explore how diverse partners (including practitioners, donors, and researchers) can better co-create to support each partner's goals.

Session Objectives:

- Share, validate, and reveal new hypotheses for how social accountability should and should not be designed to improve health outcomes
- Develop ideas for how best to integrate both evidence- and experience-based social accountability design lessons into practice
- Co-create guidelines for better partnerships – between practitioners, donors, and researchers – to move the field forward in understanding how to improve social accountability for health

SESSION DESCRIPTIONS

POTOMAC

Artificial Intelligence and eLearning in Humanitarian Health

PRESENTERS: Donald H. Bauman, Jr, Isabel Healthcare, Inc.; Colleen Gallagher Thomas, Relief International; Lara Ho; International Rescue Committee | MODERATOR: Mike OBrien, Relief International

Artificial Intelligence and eLearning, is there a future for them in Humanitarian Health? On-line and cloud-based systems may no longer be novel approaches in health development programs, but there are unique challenges to using them in humanitarian programs. To discuss, Relief International will present the Isabel DDX, a cloud based, AI, digital diagnosis platform created and managed by Isabel Healthcare. Used in major US health systems, the Isabel DDX is being piloted in humanitarian programs by RI in Cox's Bazaar, Bangladesh. IRC will present on their e-learning platform courses directed to responders inside of Syria who may not have access to training because of insecurity and movement restrictions. The interactive online platform can be used on any kind of device, with content developed by the IRC technical teams initially for use by IRC staff and partners inside Syria but planned to be made available to the wider humanitarian community. There are 75 different courses that include videos and pre/post-tests to assess performance. We have had over 1,000 users total with more than 5,000 courses completed.

Session Objectives:

- Understand the challenges to implementing on-line health technology in humanitarian health programs
- Consider how to leverage existing, on-line tech for their own humanitarian health programs

Innovation Speaker | 9:00AM-10:00AM | BALLROOM

Innovation Speaker

Dr. Mario Meriardi, Decton, Dickinson and Company (BD)

Plenary Session | 10:30AM-12:00PM | BALLROOM

Playing in the Sandbox for Maximum Impact: Defining Collaboration Across Corporations, Governments, Private Sector, and Implementers

PRESENTERS: Tara Hogan Charles, The Procter and Gamble Company; Scott Higgins, Merck for Mothers; Myroslava Tataryn, Wellspring Philanthropic Fund; Rob Tashima, VilCap Innovations | MODERATOR: Janine Schooley, Project Concern International

As government and global priorities evolve, there are new and additional pressures as well as opportunities for overcoming challenges and maximizing the leverage and synergistic benefits that can come from true collaboration between among civil society, governments, corporate and other private sector actors. With ever increasing pressures on budgets, bandwidth and the drive for impact, more meaningful engagement with the private sector is essential, and practical means of achieving it is an increasingly high priority for CORE Group, its members and all others who are striving for more sustainable, community-led impact. This exciting plenary brings together diverse perspectives to stimulate ideas for overcoming challenges, learn from what has worked and what has not worked, and strategize about what can be done to improve how we "play in the sandbox" for maximum impact.

CORE Group Membership & Business Meeting 12:15PM-1:15PM | BALLROOM

Working Group Planning Sessions | 1:30PM-3:00PM

BALLROOM I

Community-Centered Health Systems Strengthening Working Group

BALLROOM II

Monitoring & Evaluation Working Group

BALLROOM III

Nutrition Working Group

CABINET

Reproductive, Maternal, Newborn & Adolescent Health Working Group

JUDICIARY

Social & Behavioral Change Working Group

DIPLOMAT

Humanitarian-Development Task Force

POTOMAC

Non-Communicable Diseases Interest Group

View Speaker Bios: <http://bit.ly/GHPCSpeakerBios>

SESSION DESCRIPTIONS

Concurrent Sessions | 3:30PM-5:00PM

BALLROOM

Breaking Barriers to Improve Health and Nutrition: What It Will Take to Strengthen Health Services to Better Address Nutritional Status

PRESENTERS: Smita Kumar, USAID; Sascha Lamstein, USAID Advancing Nutrition, John Snow Inc.; Grace Funnell, Action Against Hunger; Patti Welch, USAID's flagship Maternal & Child Survival Program, PATH; Justine Kavle, USAID's flagship Maternal & Child Survival Program, PATH | MODERATOR: Cori Mazzeo, USAID's flagship Maternal & Child Survival Program, Save the Children

Health and nutrition are interrelated, especially during the critical early years of life. Inadequate nutrition, sub-optimal care, and poor feeding practices put newborns, infants, and young children at higher risk of disease and mortality, and disease puts children at greater risk of becoming malnourished. Despite this, primary health care providers often fail to recognize undernutrition in children while treating illnesses and community health workers are inadequately prepared or empowered to address childhood illnesses.

Among the population of children under five years of age, small and sick newborns are often neglected in program design and implementation, even while they require more specialized attention beyond what is typically provided. Improving the care and feeding of this vulnerable population within the context of health programming is essential to ensure that they survive and thrive.

Participants will learn about the evidence and global guidance for strengthening nutrition services as an integral part of routine health services for newborns, infants, and young children. They will discuss successful approaches to doing so at each level of the health system.

Session Objectives:

- Identify ways that nutrition has not been treated as an integral part of routine health services
- Describe the benefits of strengthening nutrition services delivered through routine health services for infants and young children
- Discuss actions needed at each level of the health system in order to strengthen nutrition services

CABINET

Moving Nutrition Innovation from Inception to Deployment to Scale

PRESENTERS: Susan Abdel-Rahman, Children's Mercy Hospital; Kristen Mallory, Children International; Pamela Sheeran, Smile Train

Given the well documented adverse effects of childhood malnutrition, scaling innovation that effectively prevents, identifies and/or treats those at risk for acute undernutrition, is critical. Children's Mercy Hospital in Kansas City developed a tool to determine age- and gender-specific MUAC z-scores through an arm band device that can detect over and underweight for children 2 months-18 years old. After validation in a hospital setting they partnered with Children International to test this tool in Guatemala and India by training mothers and volunteers to more effectively address malnutrition in their communities. Smile train recently scaled innovative training materials to prevent and treat malnutrition among their cleft populations. This session will tell a story from three unique lens about challenges, solutions and how important steps and considerations along that path are crucial to scaling innovation that works. Experiences from the group will be combined to create a framework to support future innovation and partnerships to more effectively and consistently reach more children around the world at scale.

Session Objectives:

- Discuss new ways to effectively screen and treat children for malnutrition
- Identify how innovation moves from initial inception to deployment and then to scale
- Analyze and describe what facilitates and inhibits scaling innovation based on collective experience (including data, partnerships, resources, and other considerations for NGOs and governments when considering scaling innovation)

JUDICIARY

Using Innovations and Partnerships in Digital Technologies to Strengthen Humanitarian Response

PRESENTERS: Walter Kerr, Zenysis Technologies; Kim Shelsby, Chemonics; Tamara Goldschmidt, BAO Systems | MODERATOR: Mai-Anh Hoang, Chemonics

Through global, regional, and hyper local public-private partnerships many organizations and companies are making significant progress in improving real-time information, predicative analytics, supply chain networks, and the delivery of product and services. Market leaders like Amazon and Walmart have revolutionized supply chain and demonstrated what is possible in the countries we work in. Other eCommerce leaders like Uber and AirBnB have developed new, innovative, asset-light business models that can create promising new opportunities in the countries we work in. And, analytical platforms such as that from Zenysis Technologies and BAO Systems integrate fragmented data, providing on-demand analytics that can uncover insights at unprecedented speed. In this session, we will discuss how we can adapt high tech and high-resource technologies to the challenges and circumstances we face every day to meet the needs of the people we serve. We will discuss how tools and solutions that were designed for resource-rich markets can now be used and accessed in in low-resource environments where we face challenges such as poor infrastructure, connectivity, and weak governance.

Session Objectives:

- Discuss how humanitarian actors, along with the private and public sectors, can better collaborate and exchange information, knowledge, and data to support more effective logistical assistance to people in need of assistance
- Examine how digital innovations can be leveraged to support health supply chains, especially tracking of medical supplies across various regions and through different partners
- Explore opportunities to connect large ERP systems to national and local mobile-based technologies and mobile networks for a more effective humanitarian response

POTOMAC

Partnerships for Positive Change in the Era of Universal Health Coverage

PRESENTERS: Mychelle Farmer, NCD Child; Jane Otai, Jhpiego

This interactive session, organized in partnership with young health advocates, provides unique insight into youth perspectives on confidential health services and a rights-based approach to health in the era of universal health coverage (UHC). At least half of the world's population lacks coverage for comprehensive health services, including the majority of adolescents and youth living in low- and middle-income countries. Universal health coverage (UHC) offers the opportunity to limit personal or family costs for health care services, but adolescent health services, including confidential services, may be threatened by national guidelines for UHC. Participants will benefit by learning first-hand about youth experiences accessing confidential clinical care for mental health, reproductive health, and related services. Participants will review national policies, with a critical assessment of UHC as it either supports or challenges adolescent and youth confidential health services. Youth partnerships with civil society organizations at national and global levels will be described, to determine ways to preserve a rights-based approach to health in the era of UHC.

Session Objectives:

- Examine inclusive partnerships targeted to address comprehensive health solutions for all age groups within UHC, to achieve national health impact.
- Identify at least two ways partnerships with young advocates and youth-led CSOs can help to alleviate cultural barriers affecting adolescent/youth confidential health services.
- Critically review policies and practices that create barriers to adolescent health care, and highlight these barriers in the context of health rights, as designed by UHC.

SESSION DESCRIPTIONS

Poster Session | 5:30PM-7:00PM | HYATT REGENCY TERRACE

There will also be space for professional networking. Light hors d'oeuvres will be provided and a cash bar will be available.

View full poster descriptions here: <http://bit.ly/GHPCposters>

The Power of Partnership: Collaborating to Develop and Deploy a Digital System for Egypt's Community Health Workers

Amy Mangieri, Save the Children US

Meeting the SDGs' Leave-No-One-Behind Agenda with Better Nutrition for Children with Disabilities: A Uganda Case Study

Stephanie Auxier, SPOON Foundation

Partnerships with Traditional Institutions: The Key to Polio Eradication

Oro-ghene Adia, Catholic Relief Services Nigeria

Delivering Immunization Services Through Innovative Partnership and Community Health Approaches

Samuel Usman, CORE Group Polio Project Nigeria

Sustainability of Evidence-Based Intervention: The Care Group Approach

Halkeno Tura, The University of Iowa

From 3 Districts to 103: Lessons Learned and Considerations for Scaling Up Innovative QI Approaches

Tewodros Alemayehu Abebe, John Snow Inc.

An Innovative Text Message Based Program to Improved Pregnancy Outcomes in Kenya

Bob Gold and Shelley Schenfeld, GoMo Health

Building Coalitions for Advocacy and Action to Promote and Protect Breastfeeding through HKI's Assessment and Research on Child Feeding (ARCH) Project

Jennifer Nielsen, Helen Keller International

Working with the Communities to Support Feeding the Children at ECD with Locally Available Food

Molly Kumwenda, Catholic Relief Services

Community Involvement for Early Identification and Warning of Epidemic Prone Disease Under Surveillance through the Community Watch and Alert Committee Strategy in Senegal

Randriamanantenasoa Felicien Paul, Catholic Relief Services

Getting to 2020: The Introduction of DMPA-SC via Community Health Workers in Benin

Tishina Okegbe, FHI 360

BFS+: Process Evaluation of an Integrative Health Approach for Lactating Women and Their Babies in Humanitarian Emergencies in Nguenyiel Refugee Camp in Gambella, Ethiopia

Armelle Sacher, Action Against Hunger

The Birth of a CHEW Program: Stakeholder Perspectives on Initiating Uganda's New National Strategy

Camille Collins Lovell, Pathfinder International

Beyond the Outbreak: Strategies for Post-Ebola Recovery

Jeffrey Sanderson, John Snow Inc.

Live More Abundantly: An ADRA Approach for Addressing Chronic Diseases in LMIC

Sharon Tobing, ADRA International

Exploring Willingness to Pay and Determinants of Using a Household Water Treatment Product of Haiti

Bram Riems, Action Against Hunger

Saving Maternal Lives in the Rural Highlands of Guatemala: A Mixed-Method Evaluation of Pregnancy Complications Managed by Casa Materna Rural Birth Centers

Jacqueline Williams, Curamericas Global

SESSION DESCRIPTIONS

Dory Storms Award | 9:00AM-9:30AM | BALLROOM

2019 Award Winner

Mary DeCoster, Food for the Hungry

New Information Circuits | 9:30AM-11:00AM | BALLROOM

Attendees will be able to choose three tables to visit over the course of this plenary. These tables include new tools, innovations, projects, and topics shared interactively by various presenters.

View full table descriptions here: <http://bit.ly/GHPCNICIS>

TABLE 1: Using Programmatic M&E Systems for Research

Margaret Lillie, Evidence Lab at the Duke Global Health Institute

TABLE 2: Partnerships Without Borders: An Innovative Model for Nomadic Healthcare

Nana Apenem Dagadu, Save the Children US

TABLE 3: EGPAF's Affiliation Model – Civil Society Capacity Building and Partnership

Leah Petit, EGPAF

TABLE 4: Community Health Toolkit: Building Open-Source Technology Together

Alix Emden, Medic Mobile

TABLE 5: Introducing Community Health Impact Coalition

Madeleine Ballard, Community Health Impact Coalition

TABLE 6: Taking Charge: Scaling 'Sex, Test and Treat' in Cameroon

Ghislaine Fouda, CARE International Cameroon

TABLE 7: The Model Household Approach: A Toolkit for Integrated Health Promotion

Camille Collins Lovell, Pathfinder International

TABLE 8: New Mobile Apps Strengthen CHWs Capacity to Counsel and Share Stigmatized Reproductive Health Information

Sarah Shannon, Hesperian Health Guides

TABLE 9: Focus on Couples

Janine Schooley, Project Concern International

TABLE 10: Reducing Enteropathy, Diarrhea, Undernutrition and Contamination in the Environment in the DRC (REDUCE Trial)

Nicole Coglianese, Food for the Hungry

TABLE 11: Partnerships for Pre-Eclampsia: Engaging Stakeholders Using an Innovative Model to Strengthen Supply and Demand

Caroline Johnson, Population Council

TABLE 12: Advocating for Integrated Approaches to Equity and Inclusion

Kristie Urich, World Vision International

TABLE 13: Malnutrition Prevalence & Prevention for Children Born with Cleft

Pamela Sheeran, Smile Train

TABLE 14: Adapting a “Low Dose, High Frequency” Capacity Building Approach to Improve Competence, Confidence, and Performance Among Egypt’s Community Health Workers

Issam El-Adawi, Save the Children/Egypt

TABLE 15: Blueprints for Better Family Planning: Creating Digital Design Global Goods to Support Frontline Health Workers

Kristen Devlin and Steve Ollis, Advancing Partners & Communities, John Snow Inc.

TABLE 16: Comprehensive Care for Pregnant and Lactating Women and Their Infants and Young Children: Reducing Missed Opportunities

Peggy Koniz-Booher, Jacqueline Wille, and Folake Olayinka, MIYCN-FP-Immunization Community of Practice

Concurrent Sessions | 11:30AM-1:00PM

BALLROOM I

Partnerships in Action: A Nutrition-Focused Family-Based Lifecourse Approach to Addressing NCDs

PRESENTERS: Paul Freeman, University of Washington; Charlotte Block, NCBA CLUSA; Mychelle Farmer, Advancing Synergy & NCD Child; Eric Trachtenberg, Alliance for Food & Health | MODERATOR: Arti Varanasi, Advancing Synergy

Throughout the world, vulnerable populations in developing countries face persistent child malnutrition with co-existing non-communicable disease (NCD) causing increasing morbidity and mortality in adults, within the same communities and sometimes households. A multi-level approach from the household to community to government is needed to prevent and treat malnutrition in children, provide adolescents and young adults with the knowledge and skills to practice positive nutrition practices, and for adults to be enabled to support good nutrition for themselves and their families. Double Duty Actions, developed by the World Health Organization, address the underlying and common determinants for both under and over nutrition – excessive weight being one of the leading causes of many NCDs. Additional actions such as tobacco and alcohol control are also proven ways to decrease common NCDs. The session will highlight evidence from effective programs that seek to address NCDs and raise for discussion the feasibility of combining such programs to make best use of available resources and foster integration across sectors.

Session Objectives:

- Gain an appreciation of a multi-sectoral family-based lifecourse approach to addressing NCDs
- Understand the WHO Double Duty Actions and how both sides of malnutrition can be tackled through common interventions
- Examine how nutrition-focused partnerships across sectors can alleviate the growing burden of NCDs

BALLROOM II

Leveraging Expertise: A Multi-Stakeholder Partnership Approach to Strengthening Community Health Systems

PRESENTERS: Nazo Kureshy, USAID; Smisha Agarwal, Frontline Health, Johns Hopkins University; Vandana Tripathi, Fistula Care Plus Project, EngenderHealth; Caroline Johnson, Frontline Health, Population Council; Juliet Harris, Aga Khan Foundation; Karen Kirk, Population Council | MODERATOR: Ben Bellows, Frontline Health, Population Council

Using the Frontline Health and Fistula Care Plus projects, we will discuss “what works and what doesn’t” at global, national and sub-national levels in aligning stakeholder priorities using four different lenses: 1.) Multi-agency and multi-donor collaborative efforts to develop the Community Health Workers Performance Measurement Framework; 2.) Engaging community volunteers, primary health care providers, transportation workers, and mobile health to reduce barriers to

View Speaker Bios: <http://bit.ly/GHPCSpeakerBios>

SESSION DESCRIPTIONS

accessing fistula care in Nigeria and Uganda; 3.) A multi-stakeholder perspective to develop advocacy strategy to support country-level policy with experiences from Liberia and Uganda; and 4.) The role of civil society groups in partnering with public sector agency to support the use of data in advancing community health in Mali.

We will address: 1. What key processes enable partner alignment at global, national and sub-national levels for effective strategic priority setting, advocacy / policy development, and implementation of community health systems? 2. How can innovations involving the use of digital tools and civil society groups support, strengthen and reinforce community health systems? 3. How can multi-stakeholder partnerships use the “Community Health Systems Performance Measurement Framework” to monitor and assess the effectiveness of community health systems?

Session Objectives:

- Describe processes to identify potential synergies among diverse partner priorities
- Identify at least one existing innovation and learning that supports, strengthens and reinforces community health systems
- Identify at least one domain area of the Community Health Workers Performance Measurement Framework that resonates with their work and future partnerships.

BALLROOM III

The CMAM Surge Approach: Building Resilient and Responsive Health Systems

PRESENTERS: Amanda Yourchuck, Concern Worldwide; Sarah Butler O’Flynn, Save the Children

CMAM Surge is a health systems strengthening (HSS) approach preparing health facilities to respond to demands in acute malnutrition treatment services, occurring due to seasonal or unforeseen shocks. Traditional emergency responses can cause unintended damage to health systems by creating parallel, NGO and cluster-driven responses. CMAM Surge strives to improve emergency preparedness and response through longer-term approaches, (normally in the realm of development). Since its initial pilot in Kenya in 2012, the CMAM Surge approach has successfully scaled-up and been introduced in a variety of countries and contexts. We will learn from preliminary findings from an ongoing review and cost-effectiveness analysis in Niger and Ethiopia. Greater community engagement and involvement in CMAM Surge activities to prompt community-level preparedness and prevention activities, strengthens community-facility linkages. This is a promising intervention in humanitarian-development nexus countries: those experiencing protracted crises, as its ultimate goal is to improve emergency response by creating a shock-responsive health system, while recognizing that to do so will require a longer-term development approach to strengthening the health system. The approach can bridge the gap between emergency and development programming by fostering partnerships across sectors, NGOs, and government.

Session Objectives:

- Understand the basic principles of the CMAM Surge approach and the latest learning from field implementation
- How CMAM Surge can be used to forge stronger partnerships between humanitarian and development actors seeking to improve health and nutrition service delivery
- HSS and humanitarian-development approaches emerging from CMAM Surge implementation experience and learning

POTOMAC

Catalyzing Investments in RMNCAH at the Community Level: Lessons from the FP-SDGs Model and the TESFA Program

PRESENTERS: Kaja Jurczynska, Palladium; Feven Mekuria, CARE; Ryan Dorni, CARE

Learn how an advocacy tool and scale up of a married girls program intervention are creating an enabling environment for family planning in communities. We will focus on a model to improve sexual and reproductive health and rights (SRHR) and economic empowerment for married adolescent girls. A case study we describe the model and results from an RCT ex-post evaluation (4 years after program has ended). We will share efforts to design and implement a scalable and more impactful model, amplifying the successful components of based on the learnings so far. We will address: 1) innovative approaches to reach marginalized groups with high unmet needs for contraception/SRH services, 2) Partnering and engaging with community “social gatekeepers” to create social support systems for adolescent girls 3) Catalyzing and scaling the impacts of a successful model within the program area and beyond.

Session Objectives:

- Share the TESFA model, results and journey towards scaling up what works
- The process to (re) design for scale and more impact
- Solicit feedback, inputs and scaling up experiences from participants

Plenary Session & Closing | 2:00PM-4:00PM | BALLROOM

The Power of the Private Sector at the Community Level: Partnerships and Innovation to Achieve Universal Access to Care

PRESENTERS: Sam Gwer, Afya Research Africa; Malcolm Riley III, Innovation in Healthcare at Duke University; Whitney Adams, CARE; USAID Center for Innovation and Impact, Bureau for Global Health

MODERATOR: Caroline Quijada, SHOPS Plus Project, Abt Associates

The private health sector goes beyond corporations and includes service delivery providers that are innovating with business models to bring high-quality low-cost care to communities globally. This session will highlight those innovations, how these businesses partner with government, as well as challenges faced and the critical role they play at the community level.

NOTES



CORE GROUP BINGO

Get to know your fellow conference attendees better through CORE Group Bingo!

RULES:

1. Find people who can answer “yes” to the items listed below, and ask them to sign their name in the box.
2. You must find a different person (or persons, where applicable) for each box.
3. You may not write in a person’s name. Each person needs to sign his/her own name.

HOW TO WIN:

The first 10 people to complete five boxes in a row (in any direction) will win a prize.

The first person to complete all 25 boxes will win a grand prize!

Bring your program booklet to the registration desk to claim your prize!

Attended 5+ CORE Group Conferences	CORE Group Polio Project staff	Works in a project/ program that partners with the private sector	Current or former member of CORE Group Board of Directors	Subscribed to 3+ CORE Group listservs
Used a CORE Group Designing for Behavior Change resource for a project	Attended a CORE Group webinar	Dory Storms Award Winner	Worked on at least 5 continents	Presented at a CORE Group Conference
Visited the CORE Group website in the last week	Has done both research and implementation work in global health	Used a CORE Group Essential Nutrition Actions resource for a project	Can name the Minister of Health in my country	Current or former Working Group Co-Chair
Worked for 3+ CORE Group Member Organizations	Attended a CORE Group Young Professionals Network event	Presented on a CORE Group webinar	Find a representative from 3 different organizations your organization has partnered/partners with in a health project/ program	Involved with CORE Group for 10+ years
Helped to create a CORE Group resource or tool	Is a first-time Global Health Practitioner Conference attendee	Sent an email through a CORE Group listserv	Current CORE Group staff member	Used a CORE Group CCM resource for a project

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