<table>
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<th>90 SECOND SCIENCE PRESENTATIONS</th>
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<td><strong>Treat the System, Not the Disease: How Reinforcing Existing Systems Improved COVID-19 response</strong></td>
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<td>Emily Janoch, CARE</td>
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In Zambia, Bangladesh, Tanzania, and Ecuador, integrating responses across a range of actors—from last mile health workers to private sector factory owners to ministries of health—improved the timeliness, quality, and delivery of not just COVID-19 responses, but also regular health services. Meeting patients where they are, understanding the challenges a health system faces, and investing in local leadership opportunities and gender equality were some of the key factors reinforcing COVID-19 responses as part of a broader health response. In places where we had stronger investments in frontline workers before COVID-19, we saw more effective responses keeping health systems moving.

| **Measuring Community Engagement in Polio Vaccination Campaigns: A case study of CORE Group Polio Project (CGPP), India** |
| Manojkumar Choudhary, CORE Group Polio Project |

The presentation will briefly present the Community Engagement Index's computation methods in India's polio vaccination campaigns. Also, it will discuss the challenges in defining and measuring community engagement.

| **The Effect of COVID-19 on Adolescent Nutrition in Kenya: Key Findings and Program Implications**  |
| UNICEF Kenya |
| Justine Kavle, Kavle Consulting, LLC |

This implementation science study examined the effects of COVID-19 on nutrition practices and coping behaviors among adolescents in Nairobi and Uasin Gishu Counties, Kenya, in partnership with UNICEF Kenya, Ministry of Health, Kenya and Kavle Consulting, LLC. Key findings and program implications of these data for building "forward" from the COVID-19 pandemic will be discussed in this session.

| **'But where is my future?' What to do About Growing Teen Anxieties Linked to Local and Global Climate Change**  |
| Susan Igras, Georgetown University |

The climate crisis is leading to a mental health burden disproportionately felt by adolescents and young people. The global health community is starting to sound alarms (see the Lancet 2021 editorial A climate of anxiety) while the physical and psycho-social landscape is transforming before our eyes. WHO and UNICEF recently joined forces to address more systematically teen mental health, yet in 2021 The State of the World's Children Report, On My Mind: Promoting, Protecting and Caring for Children's Mental Health, neglected the climate crisis. Adolescent-focused community programs and educators have little guidance to help teenagers navigate their fears of environmental doom. The presentation shares findings of a 2022 scoping review (Lacey Gibbons/Susan Igras) showing a theoretical mapping of teen responses to the climate crisis and evidence of promising program approaches to foster youth dialog that helps unpack anxiety and build resilience in the face of uncertainty and climate threats. The research findings should catalyze discussions on testing community-based strategies to build teen resilience and garner adult support.
Low-cost Community-based Interventions to Improve Mental Health in Low-income Rural Settings. Problem Management Plus (PM+) Implemented via Nurturing Care Groups in Rural Uganda by Food for the Hungry (FH) and World Vision (WV); and Interpersonal Psychotherapy for Groups (IPT-G) in Rural Ethiopia Implemented by WV and Partners CARE and ORDA, together with its Learning Partner International Food Policy Research Institute (IFPRI).

Mariamu Amadi and Phil Moses, Food For the Hungry

By the end of this session participants will have:

- Identified key questions regarding methods and results from two community-based mental health interventions
- Examined the strengths and limitations of each intervention.

The Problem Management Plus pilot in Uganda showed the intervention to be acceptable, feasible, and safe for beneficiaries, Care Group Volunteers, and Community Health Workers. The psychological well-being of beneficiaries improved per PHQ-9 and WHODAS scores (Without a control group, we cannot attribute this improvement to the intervention, however, the results are promising). The Ethiopia trial Interpersonal Psychotherapy for Groups RCT by WV and IFPRI is, to our knowledge, the first trial to test the impact of a graduation program that provides mental health services. In the treatment arm that combined both the enhanced livelihoods and group therapy, we find a large and statistically significant reduction in depression more than one year after these treatments. We found no effects on depression from an enhanced livelihoods treatment on its own, or from the enhanced health programming including the group therapy treatment on its own.

Learning for Humanity: A Transformative Digital Solution to Accelerate Change

Govinda Bilges, Learning for Humanity Program Coordinator
Medicines for Humanity

Learning for Humanity (L4H) is a transformative digital learning solution for Catholic Sisters and their staff that strengthens the capacity of providers to deliver effective, quality services and bolster health systems. It is an online education platform that offers multimodality learning with objective-driven content making L4H an incomparable virtual resource designed to accelerate change and positively affect vulnerable populations. Utilizing interactive multimedia and active learning, L4H builds capacity with practical skill application, reinforcement of best practices, role modeling local expertise, and cultivating learner collaboration through a participatory, engaging, user-friendly mechanism. L4H is a bridge to improve outcomes, strengthen health systems, advance quality services, and foster effective maternal and child health management.

From Community Engagement to Policy Change: Exploring Effective Approaches to Mainstreaming Disability Inclusion in the Health Sector. A Case Study from an Inclusive Eye Health Project in Pakistan.
Syeda Munazza Gillani, Sightsavers Pakistan Country Office

Session Objectives:
- Present evidence on how a district-based inclusive eye health project in Pakistan led to disability inclusion being mainstreamed in the development of new eye health policies at national and provincial levels in Pakistan
- Provide recommendations and practical solutions to replicate key approaches across the broader health sector in different settings.

This project directly contributes to generating evidence on what works in promoting disability inclusion within
the health sector. Through this project, Sightsavers demonstrated the importance of adopting a twin-track approach to disability inclusion in healthcare – mainstreaming inclusion across key project interventions, and designing targeted strategies ensuring the inclusion of people with disabilities and other marginalised groups. People with disabilities played key roles in designing and implementing project activities, which represented a highly influential factor in raising awareness and tackling stereotypes. Building capacity of Organisations of People with Disabilities (OPDs) to engage meaningfully with stakeholders, be represented on institutional structures and contribute to policy dialogue, clearly emerged as crucial factors for promoting disability inclusion and a 'Leave no one behind' approach.

What Does it Take to Provide Nurturing Care for Nutrition?
Lisa Sherburne, SBC Advisor, USAID Advancing Nutrition/ The Manoff Group

Caregivers need multiple resources, including non-material ones, to provide the nurturing care required for health, nutrition, and development, and participate in programs and services. These resources include self-efficacy, social support, maternal mental health, time, and others. Measuring these non-material caregiver resources allows practitioners to prioritize care and caregivers themselves in multi-sectoral community health and nutrition programs. This is also key to understanding how resources influence childcare for health, nutrition and development. Join this session to learn about measures of caregiver resources from a scoping review of the literature, and program experience, and discuss how your program can measure related resources using a new toolkit. We designed the toolkit for practitioner use, and it will benefit from feedback during the session and discussion of application of the concepts in real programs.

Mental Health Impact of COVID 19 on frontline health workers in Nigeria
Aaliya Bibi, Plan International Canada

The session will contribute to the Mental Health theme of the conference as it focuses on importance of mental health of health workers not only as healers and front-line responders but also as individuals catering to the needs of their own families and loved ones. The health policies and strategic development frameworks within the national ministries and health systems have historically demonstrated minimum level of importance to the mental health issues of communities in general, and the same completely lacks prioritizing mental health of the health workers. There is a need to invest in future research priorities in maintaining wellbeing of the health workers. This will only happen if the policy makers and decision makers enhance support system for these health care workers who play a key role in everyday needs of individuals as well as large scale disease outbreaks. Mental health implications are seen to be negative and call for greater attention for mitigation with systematic involvement of adequately trained mental health experts, while raising awareness and accurate information sharing with long term follow-up.

How COVID-19 Affected Maternal and Infant Nutrition Practices and Health Service Delivery in Kenya: Key Findings and Program Implications
Justine Kavle, Kavle Consulting, LLC

This implementation science study examined the effects of COVID-19 on nutrition service delivery and practices among women and their infants in Nairobi and Uasin Gishu Counties, Kenya. The data from this study was used to formulate approaches for "building back better" from the COVID-19 pandemic with UNICEF Kenya and the Government of Kenya. Attendance of maternal and child health services declined and was attributed to fear of COVID-19 infection, and COVID-19 imposed restrictions. Facility and community health providers described confusion surrounding provision of guidance around breastfeeding for women
who were at-risk or COVID-19 positive. Fear of COVID-19 infection early in the pandemic disrupted early and exclusive breastfeeding practices, which was subsequently addressed by the health workforce. Importantly, the COVID-19 pandemic negatively affected the diets of both pregnant and lactating women.

Examining the Long-Term Impact of Capacity Building on Faith-Based Providers, Health Facilities & Community Health Outcomes
Kristen Fanfant, Medicines for Humanity

Medicines for Humanity (MFH) has been working with local partners in Haiti, specifically Catholic Sisters, to improve maternal and child health services, support Community Health Workers and empower communities to make sustainable changes. In September 2021, MFH began implementing the SISTERS Project to support high-quality healthcare, efficient clinic operations, and enhanced partnerships. The project supports Sisters and their staff to expand knowledge and practical skillsets through a new platform called Learning for Humanity. The interactive platform fosters skill building to provide effective clinical management, operations, financial/human resources, and engagement with health partners. Capacity-building programs such as this have demonstrated positive impacts on individual knowledge and attitudes toward developing evidence-based practices in the short term. However, the implications of long-term knowledge retention and skill application, along with the demonstrable impact of built capacity at the organizational and health system operational level remain under-researched. This evaluation seeks to address that gap through an impact research study that will inform program activities and understand the effect that capacity building has on clinic service and broader community health.