

## Child Health Task Force – Private Sector Subgroup Meeting Notes May 30, 2018

**Participants:** Cathy Clarence (Abt Associates) [co-chair], Zaeem Haq (Malaria Consortium) [co-chair], Taiwo Adesoba, Malia Boggs (USAID), Nefra Faltas (USAID), Dyness Kasungami (MCSP/JSI), Joe Lewiski (PSI), Judith Moore (Abt Associates), Folake Olayinka (MCSP/JSI), Rashed Shah (SAVE), Emily Treleaven (University of Michigan), Anna Wadsworth (Abt Associates)

**Recording Link:** <https://mcsprogram.adobeconnect.com/p04gait0likr/>

### Meeting Minutes:

- Introduction of participants
- Sub-group members share organization's present and future private sector CH activities
  - Rashed Shah: Save the Children US has an upcoming program targeting private practitioners. We are planning to initiate a pilot urban health program in Kibera Slum in Nairobi, Kenya. The project is focused on improving skills and quality of care provided by private health care providers for the resident children in the informal settlement in Kibera, Nairobi, Kenya. There is also an ongoing project in Mali.
  - Joe Lewiski: PSI is currently supporting private sector child health improvements in a number of countries including Cambodia, Myanmar, and Vietnam, through a Gates-funded project. In Africa, we are supporting private providers through private sector quality control (using our health network quality improvements system - HNQIS app). For private sector engagement in Africa that PSI does, we are focused on private sector approaches that have a child health component in Angola, DRC, Tanzania, and Mozambique. This work is around improving data in the private sector that are providing iCCM services and integrate quality control standards in countries where we know there is a high level of access to child health or anti-malarial services to children under five. PSI created an app using the IMCI checklist which is added to a tablet-based feature used to test private provider's competency. These include such things as cleanliness, knowledge of fever diagnoses algorithms, etc. For more information on the app: <https://mis.psi.org/where-is-hnqis/?lang=en>
  - Emily Treleaven: Recently completed a research project related to private sector care in Nigeria. There are no ongoing projects to report at this time. We are currently seeking funding to build out a private sector component in several ongoing child health research projects in Mali (CHWs), India, and Nepal (private sector provider mapping).
  - Malia Boggs: Our USAID Child Health Team is primarily funding our private sector work via SHOPS+. Some recent activities include secondary analyses of the most recent DHS in 24 out of our 25 priority countries to answer the question about where sick children are being taken for care. A global technical brief has been produced as a result of

this analysis as well as country briefs. The findings will be shared in July during a series of four webinars throughout the month. Stay tuned for additional details!

- TOR review

- The co-chairs tried to align the TOR to the CH TF TOR and the five themes of the TF within the objectives.
  - Members discussed if there are any countries with TWGs on private sector.
    - There are not as many at the national level. There are some “coordination groups.” Ghana is trying to work on this at the national level and Cathy will keep the group updated.
- Added in definitions that are specific to private sector work as different organizations may use different definitions.
- The co-chairs would like to finalize the TOR at this point.

- Next steps

- Co-chairs to share meeting notes and a tool to capture what organizations are doing within private sector child health activities. Subgroup members to fill in tool.
- Members to give any feedback on the TOR to the co-chairs.