

# Momentum Country and Global Leadership Child Health Priorities and Activities

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## Vision

*Public sector, civil society and private sector entities at national, subnational, and service delivery level have the know how and capacity to plan, manage and deliver evidence based, safe, equitable, integrated promotive, preventive and curative child health services to sustain reductions in child mortality and morbidity.*

Momentum will approach the Child Health agenda over the life of the project through a continuum of care lens to ensure that children receive quality promotive, preventive, and curative services at appropriate levels of the health care system.

# Priorities

- Strengthen delivery of comprehensive child health services, including pneumonia, diarrhea, PSBI, and nutrition services
- Support countries to strengthen iCCM services to improve access to lifesaving interventions for childhood illnesses
- Support integration of Nurturing Care in child health and nutrition service delivery platforms
- Advance global QoC agenda and provision of quality CH services care in USAID-assisted countries
- Support countries to strengthen development and implementation of pediatric death audits, and response systems

## Support adaptation of WHO IMCI guidelines and operationalization of IMCI in selected countries

- Desk review of assessment/evaluation, peer reviewed articles to assess barriers/challenges and enablers/facilitators to inform the IMCI assessment guide/tool, global consultation and MCGL Technical Capacity Development Assistance plan.
- IMCI Implementation Assessment: Key informant interviews (KII) at policy (global and national), program, and service delivery level to assess barriers/challenges and enablers/facilitators of national adaptation of WHO IMCI guidelines, implementation and adherence to IMCI guidelines.
- Virtual global consultation: Share desk review results; IMCI Assessment Results; lessons from countries with strong implementation; develop action points/recommendations for early adaptation of guidelines and operationalization of IMCI.

## Support the Global iCCM Task Team to cost iCCM components, identify resource gaps, and develop mini iCCM investment cases, aimed at leveraging iCCM funding complementary to the Global Fund resources

- Partnership with UNICEF iCCM Task Team
  - supported select countries to strengthen the iCCM component in their GF concept notes
  - coordinating TA needs for gap analysis and write-up of iCCM component of countries
- Malawi and Uganda identified for provision of TCDA to conduct iCCM gap analysis and development of iCCM mini investment cases (specially non malaria commodities)
- **Malawi**
  - Formed in-country iCCM working group led by IMCI unit: MOH, USAID, UNICEF, SC to support and oversee the consultant
  - Hired consultant to complete the Community Health Planning and Costing Tool (CHCPT) and develop the iCCM investment case
  - Consultant completed the CHCPT
  - Validation exercise: key iCCM stakeholders validated the data entered in the CHCPT
  - iCCM working group reviewing the submitted CHCPT
- **Uganda**
  - Gap analysis; iCCM investment case; advocacy and resource development plan
  - Consultant hired, inception meeting led by the Dr Jessica Sabiti Nsungwa, the commissioner in charge maternal, child and reproductive health held
  - In-country iCCM Task Team formed: MOH, USAID, UNICEF, SC, FHI 360
- Sierra Leone and Zambia next in line



QUESTIONS!