

# **Secretariat Update**

November 1, 2023

# Responding to Feedback from the Last SC Meeting

- I. Greater effort needed to engage francophone countries and provide resources in French, including the School Health and Nutrition (SHN) animated videos:
  - a. Welcomed Burkina Faso MOH to the SC
  - b. Engaging countries via CSA: Burkina Faso, Chad, DRC, Guinea, Niger
  - c. Translated the <u>SHN microlearning toolkit into French</u> (animated videos, infographics, etc.)
  - d. Hosting all webinars and event materials in French and English
- 2. Countries should be supported with their Global Fund proposals, in particular including non-malaria commodities and iCCM costing and planning.
  - a. iCCM Task Team supported countries in windows 1-3: See <u>advocacy brief</u> and <u>TA menu</u> (in English, French and Portuguese)
  - b. Community Health Planning and Costing Tool 2.0 training

# Responding to Feedback from the Last SC Meeting

- 3. Make the case for why investment in child survival should be a global priority and encourage and support national child health dialogues.
  - a. Global Child Survival Action (CSA) launch during 2nd Global Pneumonia Forum
  - b. Sierra Leone national CSA plan and Minister Demby's call to African Leaders at the WHO/AFRO Regional Committee meeting
  - c. Market Access Africa re-vamped the CSA Advocacy Action Team and working with Country Engagement Action Team on toolkit for national child survival advocacy
- 4. Need to explore strategies for engaging the private sector beyond webinars:
  - a. Subgroup engagement has been low there was a change in leadership with SHOPS Plus ending and Frontier Health Markets (FHM) starting
  - b. A priority moving forward, for example, engaging private sector partners at country level through CSA initiative

# By the Numbers: February – October 2023

#### **Growth of the Network**



2,952 new members
from 144 countries
Over 9 % francophone
Currently 6,375 total
members



41 New countries, including: Gabon, South Korea, Kiribati, Slovenia, Brunei Darussalam, and Barbados



**8,283 people** registered and 3,009 (36%) attended events



Task Force events: 22 webinars, 2 members meetings, 2 subgroup co-chairs meetings, 1 virtual conference

# Subgroup Highlights: February – October 2023



The **Re-Imagining the Package of Care for Children** subgroup hosted a 9 part series titled *Adapting Health Systems to Protect Children from the Impact of Climate Change*. All resources from each session including slides, recordings, and resources packs can be found on the <u>website</u>.



The **Commodities** subgroup launched the Call to Action: Improve access and use of quality medicines to save lives of children and newborns, a resource that can be found on the <u>website</u> in English, Spanish and Portuguese.



The **Institutionalizing iCCM** subgroup finalized and launched their <u>toolkit</u>, which is comprised of 8 modules for country stakeholders, including policymakers, national program managers, staff of technical agencies, professional associations, and non-governmental organizations working to institutionalize iCCM within their national health systems.



A new subgroup on **Childhood Vaccination** launched in October. The terms of reference, goal of the group, and materials from the kick-off event can be found on the <u>website</u>.



The Secretariat and co-chairs made the decision to retire the **Implementation Science** subgroup as its focus is cross-cutting, other subgroups will continue to advance related streams of work.

## Feedback/Questions from Subgroup Co-chairs

- I. Will the leadership of the Steering Committee member organizations issue strong public statements about their organizational support for Child Survival Action at key fora remaining in 2023 and 2024? Can we get agency heads to make public statements?
- 2. Can the Steering Committee members start talking more about this category of "post-neonatal" child deaths and making sure countries (and global actors) are routinely reporting on % <5 deaths that are in the 1-59 month period and progress reducing mortality in this group (as a complement to the 0-1 month reporting)?
- 3. Can the Steering Committee continue to raise its voice to ensure that activities and convenings by global partners do not continue to exclude child health from MNH discussions? Examples include last week's WHO-organized meeting on MNH commodities, and the AlignMNH conference in Cape Town in May..

# **Progress Highlights by Strategic Priority** February – October 2023



**STRATEGIC PRIORITY I:** Engage global and country stakeholders about the need for increased resources, accountability and a multi-sectoral approach to child health.

#### • Child Survival Action (CSA)

- Published <u>CSA webpage</u> including the vision, action teams, <u>video</u> and <u>two-pager</u> for advocacy
- Provided language to amplify child survival in the 2024 WHA resolution led by Somalia
- Developed regional advocacy plan, collaborating with the African Union through CARMMA Plus

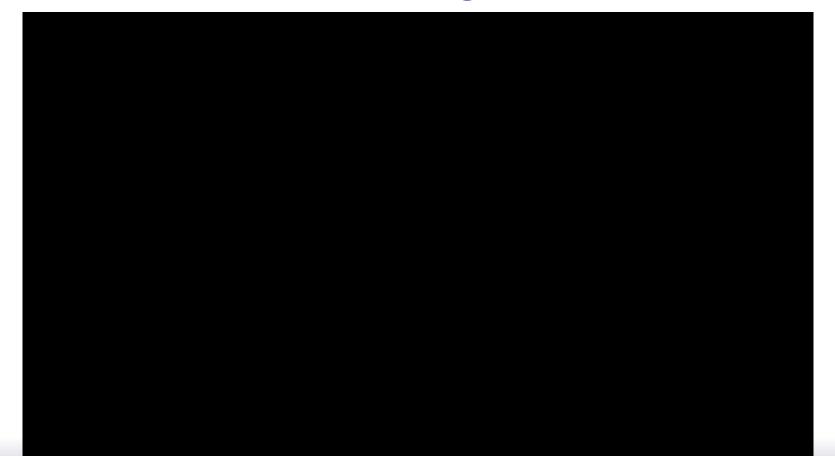
#### • School Health and Nutrition

- New microlearning products added to bilingual <u>toolkit</u>: animated video on school feeding, infographics on comprehensive sexuality education and menstrual health
- Co-hosted joint <u>launch</u> of the global status report on school health
- E-learning course on effective coordination for SHN under development

# **Child Survival Action Video**

Link: https://vimeo.com/863253756

### **School Feeding Video**



EN: <u>bit.ly/SchoolMealsVid</u>

10



STRATEGIC PRIORITY 2: Align around common goals and measures of success for child health along the life-course (including the newborn period, post-neonatal, and adolescence), with a focus on post-neonatal mortality reduction

- Convened **members meetings** in March and April 2023 to share results from the annual members survey, share CSA updates, and gather inputs for the virtual conference.
- **Gathered feedback** (in English and French) post-conference and via annual members survey October 2023.
- Continued support to co-chairs: Secretariat led quarterly co-chairs meetings to set priorities for 2023, collaboration across groups, and plan for the virtual conference
- Established CSA Advisory Group, convening monthly, and continued to lead monthly CSA working group calls; agreed on governance structure, and progress tracker for action teams



STRATEGIC PRIORITY 3: Partner to implement interventions, monitor for equitable coverage and quality care, and track progress towards SDG targets

- **Malawi MOH**: Developed an interactive dashboard mapping partner child health activities, projects and resources
  - Revamping the survey using a more advanced software compatible with MOH data systems
  - Developing a technical brief on survey and dashboard development
- CSA partnership with **countries**: Sierra Leone, Nigeria, South Sudan, Liberia, Mali, Burkina Faso, Chad, Guinea, and DRC
  - We are in different stages of engagement with each country, will hear more from the CSA country engagement team



STRATEGIC PRIORITY 4: Foster the generation and sharing of evidence, lessons learned, tools and promising program approaches

- Hosted technical webinars and sessions during the virtual conference with the global child health community (in French and English) on key issues including:\*
  - Strengthening nurturing care in humanitarian response
  - Integrating nutrition, responsive care and early learning
  - Addressing child survival during Somalia's drought response
  - Advancing pediatric quality of care
  - Global launch of the Nurturing Care Practice Guides
- The Implementation Science subgroup led a skills-building session during the conference on grant writing.



STRATEGIC PRIORITY 5: Synthesize and package information in sharable and

accessible products and enhance communications

### Website<sup>\*</sup>

- 20,155 users (20.2% increase from previous 6 months) from 199 countries
- 12% of users access the French version of the website
- 44,279 page views. Top 3 pages visited: Homepage, Virtual Conference, iCCM Hub

### Journal Digest

 I7 digests sharing over ~480 relevant child health articles

### Newsletter\*\*

• 3 issues disseminated in English and French

# Engagement of email campaigns & LinkedIn:



**Open rate** for all email campaigns: 40% (+1% industry avg)

Click rate: 12% (+10% industry avg)



Followers: 1,014 (gained 484)

Engagement rate: 5.98% (industry avg 2-3%)

Page views: 695

www.linkedin.com/company/child-health-task -force

# Moving Forward: Funding through M-RITE

- The Secretariat received funding through the USAID Advancing Nutrition Project from 2018 through December 2023.
- As of October 1, the Secretariat is funded through MOMENTUM Routine Immunization, Transformation and Equity (M-RITE) Project. Potential areas of collaboration include:
  - Newly launched Childhood Vaccination Subgroup and advocacy for coverage of lifesaving vaccines for children
  - Child Survival Action country partnerships with those M-RITE also supports (e.g., DRC)
  - Learning from NITAGs / coordination of immunization stakeholders at country level

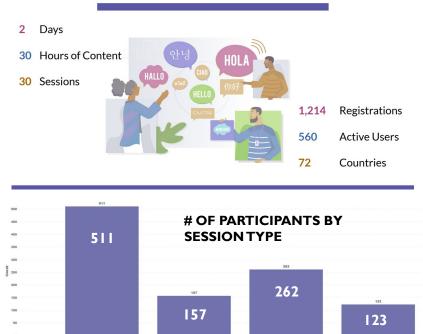
## Q&A on Secretariat Update

## Accelerating Progress Towards the 2030 SDGs: Reducing Inequities in Child Health

#### Background

- Conference held June 6 & 7, 2023, hosted on <u>TechChange</u> platform in English & French.
- Content organized in **3 thematic tracks**:
  - Defining and addressing inequity
  - Addressing inequities through strengthening primary health care
  - Measuring inequities, monitoring and tracking progress
- **Session types:** concurrent panels, live plenaries, skills building, networking tables, poster exhibit, and discussion boards.
- All conference recordings and materials posted on the <u>TF website</u> for all to access.

#### **CONTENT & PARTICIPATION**



Networking and Discussion Tables

Plenar

Event Topic -- Title

Skills Building

## Accelerating Progress Towards the 2030 SDGs: Reducing Inequities in Child Health

#### Breakdown of registrants' affiliated organizations

#### Engagement

 I,200+ individuals from over 90 countries and territories registered (70% LMICs) and 650 attended

#### **Takeaways & Recommendations**

#### International NGO or FBO / ONG internationale 35.37% Academic or research / Universitaire ou recherche 17.31% Government (e.g. Ministry of Health) / Gouverne... 11.96% Local NGO, CBO or FBO / ONG locale, CBO, FBO 8.11% 7.11% Other / Autre 5.69% Clinical care or medical provider / Soins clinique... Donor agency—bilateral / Agence de financemen... 5.43% 5.27% Donor agency—multilateral / Bailleurs de fonds... Private sector or for-profit / Secteur privé ou à bu... 2.51% Private foundation / Fondation privée 1.25%



- Reframe child survival as the triad of mother, newborn baby, and child health.
- Continue engagement & advocacy with political decision-makers at country & community levels.
- Create a larger coalition to include newborn and maternal health community.
- Build on momentum of the meeting and regroup in one year in-person: 50% of attendees recommend a hybrid meeting.
- Strengthen advocacy effort at country level & within communities.
- Ensure support and compensation for CHWs.
- Focus on how to improve the experience of care between the client & provider (quality of care vs. quantity of care).

## **Discussion Prompts**

- Are there areas with notable progress that are not highlighted?
- Where are we lagging behind and why?
- What would SC members want to hear more about?
- How can we leverage our partnership with the immunization community through M-RITE?
- How can we better support countries to advance child survival, health and wellbeing?
- The learning under the Task Force is underutilized. How can SC members encourage application and reporting of progress based on webinars and the virtual conference?
- How shall we take forward recommendations from the virtual conference and plan for a hybrid conference based on participant feedback?



The Child Health Task Force is managed by JSI Research & Training Institute, Inc. through the USAID Advancing Nutrition project and funded by USAID and the Bill & Melinda Gates Foundation.

This presentation was made possible by the generous support of the American people through the United States Agency for International Development (USAID), under the terms of the Contract 7200AA18C00070 awarded to JSI Research & Training Institute, Inc. The contents are the responsibility of JSI and do not necessarily reflect the views of USAID or the U.S. Government.