



 **coregroup**
GLOBAL HEALTH PRACTITIONER
CONFERENCE

SPRING 2016

ACHIEVING HEALTH FOR ALL
THROUGH
MULTI-DIMENSIONAL APPROACHES
MAY 16 - 20, 2016 | PORTLAND, OREGON



#GHPC16

CONTRIBUTING PARTNERS

USAID's Maternal and Child Survival Program

is the USAID Bureau for Global Health flagship program to introduce and support high-impact health interventions with a focus on 24 high-priority countries with the ultimate goal of ending preventable child and maternal deaths (EPCMD) within a generation.

www.mcsprogram.org



The CORE Group Polio Project is funded under USAID Cooperative Agreement AID-OAA-A-12-00031 to World Vision.

www.coregroup.org/polio



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CORE Group extends sincere appreciation to Planning Committee Members, Working Group Co-Chairs, Point People, Presenters, Participants, Moderators and Facilitators, Anonymous Donors, and Sponsors.

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WELCOME FROM THE CHAIR OF THE BOARD OF DIRECTORS

Dear Friends and Colleagues,

We are excited to have our Spring 2016 Global Health Practitioner Conference in Portland, Oregon and get to know new colleagues from the West Coast. There will be much to learn and explore about “Achieving Health for All through Multi-dimensional Approaches.” This conference will address many key issues facing health and development and examine strategies for successful integration of other sectors, levels, and actors to improve community health globally. We are fortunate to have Shawn Baker, Director of Nutrition at the Bill & Melinda Gates Foundation, as our keynote speaker. Lillian Shirley, Director of the Public Health Division at the Oregon Health Authority will provide a welcome to Oregon and give us a local context for sustainable health for all. We will also learn from many program examples of multi-dimensional approaches in our plenary and interactive sessions. We will start and end with dynamic workshops providing skills and strategic thinking about critical challenges. Of course, networking and informal discussions will also be essential.

This is an important time of renewal for CORE Group. We welcome Lisa M. Hilmi as our new Executive Director. Lisa is well qualified for this position with almost 30 years of global health, management, clinical, and capacity building experience. She has worked for several of our members and understands our work and challenges. Lisa brings energy, intelligence, and organization to work with us as we chart a sustainable business and global leadership plan for CORE Group. Please use the conference as an opportunity to get to know Lisa and provide her with your thoughts and perspectives.

We have reorganized our Working Groups and hope that you will participate in at least one because this is where our priorities, tools, and resources are generated and collaboration happens. We will also have our first CORE Group Member Meeting as a formal session on Wednesday at lunch time. This will provide members with an update on CORE Group activities, plans, and recommendations, and it is an opportunity to hear from all members. We will also finalize votes for the new board slate, membership, and the Dory Storms Award. I hope to see you there!

Many thanks to everyone who helped make this event possible, including our **volunteer planning committee members**: Molly Christiansen, Living Goods; Melisa Esposti, Project CURE; Paul Freeman, Independent; Joseph Ichter, Palladium; Katherine Jones Debay, Loma Linda School of Public Health; Jennifer Norman, Mercy Corps; Albertha Nyaku, PATH; Beth Otterson, MTI; David Pyle, Independent; and Sarah Shannon, Hesperian Health Guides. We also thank our **session presenters**; our **contributing partners** and **sponsors**; innumerable **volunteers**; our **Working Group Co-chairs**; **CORE Group staff**; our **conference organizer** Marcie Rubardt; and our **conference facilitator** Lynette Friedman.

We look forward to your valuable contributions.

Best wishes,



Judy Lewis
Chair, CORE Group Board of Directors

CONFERENCE OBJECTIVES

By the end of this conference, participants will have:

- 1. Exchanged and learned about community health approaches and good practices.**
- 2. Fostered substantive partnerships and linkages among our *Community Health Network* members and partners to advance community health efforts.**
- 3. Discussed progress in CORE Group Working Group FY16 workplans and brainstormed activities for FY17.**

PARTNER WITH CORE GROUP

CORE Group is a **leader in community health**, working to end preventable maternal, newborn, and child deaths around the world. We have a comparative advantage through **collaborative action** to **promote and safeguard health in communities** and create new models for reaching the most marginalized populations.

As a **neutral, trusted platform** for a coalition of more than 70 non-governmental organizations (NGOs), we work together with the broader global health community to foster **collaboration and learning**, strengthen **technical capacity**, develop **innovative tools and resources**, and advocate for effective community-focused health approaches.

We are a technical hub for community health approaches:

Reproductive, Maternal, Newborn, Child & Adolescent Health

Infectious & Non-communicable Diseases

Nutrition

Agriculture & Health

Social & Behavior Change

Monitoring & Evaluation

Equity & Social Accountability

Civil Society Engagement

Program Quality

Sustainability & Scale

BENEFIT FROM CORE GROUP'S STRATEGIC ADVANTAGE:

STRENGTHENING PROGRAMMATIC IMPACT

CORE Group mobilizes global health actors and stakeholders around evidence-based practices to translate science into effective community-based programming approaches, implement consistent, high impact interventions, and develop common monitoring and evaluation systems. Working together, we ensure that approaches are grounded in evidence-based practice, avoid duplication and strengthen collective impact at scale.

KNOWLEDGE MANAGEMENT

CORE Group is a recognized leader in knowledge management, providing a wide variety of opportunities for members and partners to better capture and use lessons learned in program implementation, build skills in knowledge management techniques, and collectively 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, by aligning NGOs and governments on key messages, strategies, and approaches. By mobilizing our membership and their strong in-country relationships, we engage key stakeholders in dialogue and collaborative, evidence-based action for programmatic efficacy. In these responses, we prioritize addressing gaps in community health and empowering civil society to ensure a smooth transition from emergency to sustainable development.

Let's explore the possibilities!

Contact Lisa M. Hilmi, CORE Group Executive Director:
lhilmi@coregroupdc.org | 202-380-3400, Ext. 11



USAID
FROM THE AMERICAN PEOPLE

Maternal and Child
Survival Program



Kate Holt/MCHIP



Ali Khurshid/MCHIP



Kate Holt/MCSP



Karen Kasmauski/MCSP



Kate Holt/MCSP

USAID's flagship Maternal and Child Survival Program (MCSP) is a global, USAID Cooperative Agreement to introduce and support **high-impact health interventions** with the ultimate goal of **ending preventable child and maternal deaths within a generation.**

MCSP supports programming in maternal, newborn and child health, immunization, family planning and reproductive health, nutrition, health systems strengthening, water/sanitation/hygiene, malaria, prevention of mother-to-child transmission of HIV, and pediatric HIV care and treatment.

www.mcsprogram.org

facebook.com/mcspglobal

twitter.com/mcspglobal

Come see what we see



MERCY CORPS

Though we work in over 40 countries, Portland is our global headquarters. It's here that we first started to see the world differently. In chaos, we see the power of human potential. In struggle, we see the ability of communities to come together to grow strong. We know that's how change happens. We know because we see it every day, all over the world. And you can too.

Stop by to say hello and learn more.

For more info on exhibits,
seminars and workshops, visit
mercycorps.org/action-center

Mercy Corps Action Center
Old Town/Chinatown, 28 SW 1st Avenue
11am–5pm, Monday–Friday

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WORKING GROUPS

Working Groups are the heart and soul of CORE Group's *Community Health Network* and the main voluntary mechanism to provide leadership within the network, and to implement activities relevant to the membership.

WHAT WORKING GROUPS DO

Working Groups push the field of community health forward by focusing on specific technical and cross-cutting issues. As the *Community Health Network* works to fulfill our vision of health and well-being for underserved communities in low- and middle-income countries, Working Groups help articulate that vision from a practical standpoint, identify barriers, and figure out how to move past them.

Working Groups contribute to:

- Developing state-of-the-art tools, practices, and strategies to benefit field programs
- Exchanging information related to best practices, resources, and opportunities
- Linking with academics, advocates, and private resources and expertise
- Fostering their own professional development
- Building organizational partnerships and capacity
- Articulating the community health perspective in global policy dialogues and alliances

Working Groups are teams of individuals from multiple organizations interested in contributing to further development and understanding of a technical or cross-cutting topic. The groups are self-organizing, self-governing, and adaptive entities that transcend organizational boundaries. Working Groups develop and implement collaborative activities aimed at improving international health and development. Working Groups are established and maintained based on the interest of CORE Group Membership.

GET INVOLVED

Learn more about Working Groups during lunchtime table topics on Tuesday, May 17.

We also encourage everyone to join a Working Group during the specified times on Wednesday and Thursday afternoons (see pages 27 - 28 and page 33 for more information).

And be sure to sign up for Working Group listservs at www.coregroup.org/network! By joining a Working Group listserv, you will receive related communications and updates, and you will be able to write directly to the group to share information and announcements, as well as solicit input on related areas of interest.



Visit MTI's Real Life Exhibit during the CORE conference!

Tours of MTI's Real Life Exhibit take you on a journey around the world through the eyes of people affected by disaster, conflict and poverty. It's a unique educational tool for all ages!

MTI hosts the Exhibit at its office at 14150 SW Milton Ct, Tigard, OR 97224. Allow 45 minutes for a self-guided tour. Visit at these times:

- Monday May 16: 5:00 – 6:45 pm tour and reception after the session on Holistic Indicators.
- Weekdays 9:00 am - 4:00 pm by reservation only. Call/write
- Camille Freestone for more information at cfreestone@medicalteams.org or 503-624-1201.



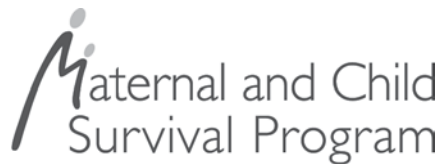
WORKING GROUPS

WORKING GROUP	VISION
CHILD HEALTH	The Child Health Working Group supports the development, documentation and advocacy of strong, truly integrated program approaches that maximize community-based child health impact. This newly formed Working Group will serve as an Idea Lab where members can come together to address emerging issues and challenges in child health.
COMMUNITY-CENTERED HEALTH SYSTEMS STRENGTHENING (CCHSS)	The CCHSS Working Group addresses the global need to focus on people-centered health systems and integration. The Working Group will also strengthen efficient and effective community health systems that deliver packages of maternal child health interventions tailored to address specific contextual needs and opportunities. Co-Chairs: Megan Christensen, Concern Worldwide Alfonso Rosales, World Vision
MONITORING AND EVALUATION (M&E)	The M&E Working Group develops tools and trainings to increase child survival and health program performance and quality through the standardization of use of data, analysis and reporting. This WG is committed to strengthening members': <ul style="list-style-type: none"> • Ability to collect and manage high-quality qualitative and quantitative data at the front line and community levels; and • Utilization of routinely collected data and evaluations for program improvement and learning. Co-Chairs: Claire Boswell, The TOPS Program, Food for the Hungry Dora Ward Curry, CARE
NUTRITION	The Nutrition Working Group underscores the critical and cross-cutting role of nutrition in maternal and child survival and health through the dissemination of state-of-the-art information and strengthening approaches essential for quality nutrition programming. Co-Chairs: Jennifer Burns, International Medical Corps Maureen Gallagher, Action Against Hunger Justine Kavle, USAID's Maternal and Child Survival Program, PATH
REPRODUCTIVE, MATERNAL, NEWBORN, AND ADOLESCENT HEALTH (RMNAH)	The former SMRH Working Group is now the RMNAH Working Group, which will focus on a broad range of health concerns related to sexual and reproductive health, maternal and newborn health, and adolescent health. Within the RMNAH Working Group, there are two task forces: <ul style="list-style-type: none"> • Maternal and Newborn Health (MNH), and • Sexual and Reproductive Health and Adolescents (SRH+A) Co-Chairs: <i>Maternal and Newborn Health Task Force:</i> Corinne Mazzeo, USAID's Maternal and Child Survival Program, Save the Children Cindy Uttley, Samaritan's Purse <i>Sexual and Reproductive Health and Adolescents Task Force:</i> Mychelle Farmer, Jhpiego Regina Benevides, E2A Project, Pathfinder International
SOCIAL AND BEHAVIOR CHANGE (SBC)	The SBC Working Group contributes to improved maternal and child health outcomes by strengthening the capacity of CORE members to design and implement effective social and behavior change strategies while documenting and disseminating valuable experiences. Co-Chairs: Lenette Golding, Alive & Thrive, FHI 360 Debora Freitas, Chemonics International Joseph Petraglia, Pathfinder International

USAID'S MATERNAL AND CHILD SURVIVAL PROGRAM



USAID
FROM THE AMERICAN PEOPLE



CORE Group is a partner on USAID's Maternal and Child Survival Program (MCSP), a project that aims to end preventable child and maternal deaths in 24 high-priority countries. Within MCSP, 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 to improve health for communities and families. CORE Group also diffuses MCSP information to our members and creates a forum for MCSP to solicit targeted input and feedback from an array of community health practitioners.

CORE Group has been instrumental in developing the Civil Society Engagement strategy for MCSP. The role of civil society in national health system strengthening remains ill-defined as disagreements continue concerning the roles and responsibilities of donors, governments and civil society itself. A recently published literature review, authored by CORE Group staff, showcases the potential of civil society engagement to strengthen national health systems. CORE Group also led the community and civil society engagement component of MCSP in Haiti. The project brought together 36 international and Haitian NGOs to improve coordination for ending preventable child and maternal deaths.

Building on CORE Group's role to mobilize members and partners around evidence-based practices, CORE Group led the development of a pilot strategy for community volunteers to improve newborn health by reaching marginalized populations in pastoralist border areas in Ethiopia through NGO immunization platforms. CORE Group staff and members hosted a three-day workshop in Ethiopia to develop agreed upon behavior change and communication messages. The pilot work and evaluation study will be conducted in the Somali region through June 2016 in partnership with the Consortium of Christian Relief & Development Associations in Ethiopia.

Learn more at www.mcsprogram.org.

CORE GROUP POLIO PROJECT



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. CGPP contributes to polio eradication by working through more than 10,000 community health workers who support campaigns, conduct community based AFP surveillance, promote routine immunization, track the vaccination status of under fives, newborns, and pregnant women, and mobilize communities to actively participate in vaccination services. The project conducts independent campaign monitoring, cross-border eradication activities, and advocacy, as well as supporting campaign and routine logistics, and AFP surveillance.

This is done as a coalition of national and international NGOs whose dedication, experience, and professionalism demonstrate the value and contribution of civil society to polio eradication and community health throughout the developing world.

The CORE Group Polio Project uses a secretariat model to coordinate the work of its 48 partners in seven countries. The secretariat is a central country office headed by a director or team leader that coordinates and supervises the work of partner NGOs in each country, represents civil society engagement in polio eradication to ministries of health, WHO, UNICEF, CDC, Rotary, and donors, and communicates national and global policies to the member NGOs. Fundamentally, the secretariats ensure that partner NGOs complement rather than duplicate the work of other agencies and that NGO partners know and follow national and global polio eradication policies. The secretariats also give civil society a voice and representation on national and regional polio eradication planning committees.

Learn more at www.coregroup.org/polio.



CORE Group is a partner on The Technical and Operational Performance Support Program (TOPS), a USAID/Food for Peace (FFP)-funded program that builds the capacity of FFP grantees and improves the quality of implementation through fostering collaboration, innovation, and knowledge sharing around food security and nutrition best practices.

CORE Group brings expertise in cultivating collaborative learning environments through facilitation, planning and leading participatory learning events, and furthering capacity and skills building in order to nurture an open community of practice, the Food Security and Nutrition (FSN) Network.

The main features of the FSN Network include:

- **Knowledge Sharing Meetings**, multi-day meetings held around the world that prioritize knowledge exchange through discussion and activity to stimulate cross-organizational collaboration and learning.
- **Task Forces** in key areas including Agriculture & Natural Resource Management, Social & Behavioral Change, Monitoring & Evaluation, Nutrition, Knowledge Management, Gender, and Commodity Management.
- **FSNNetwork.org**, the online home for the community of practice, with online discussions, over 700 resources, upcoming events, FFP updates and relevant news, and materials from past meetings and webinars.
- **FSN Network News**, a bi-weekly e-newsletter that engages and informs over 2,400 subscribers.

Learn more at www.fsnnetwork.org.

THANK YOU TO THE CORE GROUP BOARD OF DIRECTORS!

CORE Group would like to thank our Board of Directors for their continued dedication and support.

Chair, Judy Lewis
Independent

Antony Duttine
Handicap International

David Pyle
Independent

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Concern Worldwide

Joseph Ichter
Independent

Eric Starbuck
Save the Children

Alan Talens
World Renew



Shawn Baker

Director of Nutrition, Bill & Melinda Gates Foundation

As director of the Nutrition team, Shawn Baker leads the foundation's efforts to ensure that women and children receive the nutrition they need for healthy growth and development.

Before joining the foundation in 2013, Shawn served as vice president and regional director for Africa for Helen Keller International. In that role, he oversaw an expansion from four to 13 country programs and an 80-fold increase in program funding. He shaped flagship programs including vitamin A supplementation through child health days (reaching more than 50 million children twice a year) and food fortification (reaching more than 130 million people). He led the development of strategic regional relationships, particularly with the 15-nation West African Health Organisation. Shawn also served as country director for Niger and Bangladesh.

During his 30-year career, Shawn has served as co-promoter of the Niger Health Information System, coordinator of the Tulane University Center for International Health and Development, and coordinator of the Famine Early Warning System in Southern Africa. Earlier, he was a U.S. Peace Corps volunteer in Zaire (now the Democratic Republic of the Congo).

Shawn received a master's degree in public health from the Tulane University School of Public Health and Tropical Medicine, with concentrations in international health and nutritional epidemiology. He earned a bachelor of science degree in biology from the University of Miami. He is the author or co-author of more than 80 peer-reviewed publications, presentations at international conferences, and monographs. Shawn received the Officier de l'Ordre du Mérite du Niger from the president of the Republic of Niger and Niger's Ministry of Foreign Affairs. He currently chairs the Technical Review Panel for the Global Fund to Fight AIDS, Malaria and Tuberculosis.

**Continue all the fun,
and keep the conversations going!**

Social Networking Reception



**Tuesday, May 17 | 5:30 - 7:30pm
JB Club, Red Lion Hotel on the River**

Complementary Appetizers, Cash Bar, Unlimited Networking!

SPECIAL THANKS TO OUR NETWORKING RECEPTION SPONSOR:

THE TOPS PROGRAM

The Technical and Operational Performance Support (TOPS) Program is the USAID/Food for Peace-funded learning mechanism that generates, captures, disseminates, and applies the highest quality information, knowledge, and promising practices in development food assistance programming to ensure that more communities and households benefit from the U.S. Government's investment in fighting global hunger.

**At TOPS we know the true value of networking, learning, and knowledge sharing,
and we wish everyone at the conference many fruitful conversations!**



AGENDA AT-A-GLANCE

MONDAY, MAY 16, 2016

Pre-Conference Sessions

8:00am - 9:00am	<i>Breakfast Provided for those registered for Morning Pre-Conference Session</i>
9:00am - 12:30pm <i>Multnomah</i>	Social and Behavior Change Approaches during the Transition from Relief to Development Bonnie Kittle, Independent
12:30pm - 1:30pm	<i>Lunch Provided for those signed up for both Pre-Conference sessions</i>
1:15pm	Meet in lobby of Red Lion; Bus departs hotel for Medical Teams International
2:00pm - 5:00 pm <i>Medical Teams International</i>	Holistic Indicators Todd Nitkin, Medical Teams International
2:00pm - 4:00pm <i>Multnomah</i>	Welcome & Orientation Open to all, especially first-time conference attendees and new CORE Group members
5:00pm - 6:30pm <i>Medical Teams International</i>	Tour of Medical Teams International's REAL.LIFE Exhibit, followed by Reception All are welcome to attend
6:45pm	Bus departs Medical Teams International for Red Lion Hotel

TUESDAY, MAY 17, 2016

8:00am - 8:30am	<i>Registration & Breakfast</i>
8:30am - 10:30am <i>Mount St. Helens Ballroom</i>	Welcome and Keynote Welcome: Judy Lewis, Chair, CORE Group Board of Directors; Lisa M. Hilmi, Executive Director, CORE Group; Lillian Shirley, Director, Public Health Division, Oregon Health Authority Keynote: Shawn Baker, Director of Nutrition, Bill & Melinda Gates Foundation
10:30am - 11:00am	Break, Expo Tables Open
11:00am - 12:30pm <i>Mount St. Helens Ballroom</i>	Multi-dimensional Programming: The Rubik's Cube Challenge to Health Programming Esther Indriani, World Vision South Asia and Pacific Ocean; Paulina Bayiwasi, Ministry of Health, Ghana; Lee Po Cha, Immigrant & Refugee Community Organization; Katherine Jones Debay, Loma Linda University School of Public Health
12:30pm - 2:00pm <i>Mount St. Helens Ballroom</i>	Lunch Table Topics: Introductions to Working Groups Roundtable: Can a TV Spot Behavior Change?: Help Shape Alive & Thrive's Set of "Lessons Learned" on Role of Mass Media in Nutrition
2:00pm - 3:30pm <i>Mount St. Helens Ballroom</i>	Concurrent Sessions The Normative Dimensions of Social and Behavior Change as Part of a Community Action Cycle Telephore Kabore, USAID's Maternal and Child Survival Program, Save the Children; Susan Igras, Institute for Reproductive Health, Georgetown University; Feven Mekuria, CARE International
<i>Multnomah</i>	The Community Project: A Multi-dimensional Ethiopian Case Study Collen Kaleda, The Community Project: Ethiopia; Rita Cooper, Engineers Without Borders: Portland Maine Professionals; Judy Lewis, University of Connecticut
<i>Crown Zellerbach</i>	Savings Groups as a Platform for Multi-dimensional Programming Jennifer Orgle, CARE USA; Dennis Mello, PCI; Jennine Carmichael, FHI 360; Bobbi Gray, Freedom From Hunger; Paul Rippey, Savings Revolution
<i>Weyerhaeuser</i>	Multi-dimensions of Nutrition-related Research To Strengthen Programming Jose Luis Alvarez Moran, Action Against Hunger UK; Jennifer Nielsen, Helen Keller International; Justine Kavle, USAID's Maternal and Child Survival Program, PATH; Maureen Gallagher, Action Against Hunger US
3:30pm - 4:00pm	Break, Expo Tables Open
4:00pm - 5:30pm <i>Mount St. Helens Ballroom</i>	Measuring Resilience: Evidence from Ethiopia, Kenya, Uganda, Niger and Burkina Faso Tim Frankenberger, TANGO International
5:30pm - 7:30pm	Social Networking Reception, Red Lion Hotel on the River, Jantzen Beach; JB Club

WEDNESDAY, MAY 18, 2016

8:00am - 8:30am	<i>Registration & Breakfast</i>
8:30am - 9:00am <i>Mount St. Helens Ballroom</i>	Emerging Global Opportunities Lisa M. Hilmi, CORE Group; Lee Losey, CORE Group Polio Project, Catholic Relief Services
9:00am - 10:30am <i>Mount St. Helens Ballroom</i>	New Information Circuits See the full list on pages 19 - 24.
10:30am - 11:00am	Break, Expo Tables Open
11:00am - 12:30pm <i>Mount St. Helens Ballroom</i>	Concurrent Sessions Demystifying the Measurement of Complex Social Constructs: Assessing Social Capital Across Sectors William Story, University of Iowa, College of Public Health; Tim Frankenberger, TANGO International
<i>Multnomah</i>	Community Health Worker Models: A Focus on Sustainability Henry Perry, Johns Hopkins Bloomberg School of Public Health; Mike Park, Aspen Management Partnership for Health (AMP Health); Ari Johnson, Muso; Jennifer Norman, Mercy Corps; Molly Christiansen, Living Goods
<i>Crown Zellerbach</i>	Meeting Health Service Gaps In Emergency Situations – The Role For Community Health Dora Ward Curry, CARE; Lisa M. Hilmi, CORE Group
<i>Weyerhaeuser</i>	Early Childhood Development: The Whole-Child Perspective Lia C. Haskin Fernald, University of California, Berkeley School of Public Health; Renuka Berry, FHI 360; Lenette Golding, Alive & Thrive/Nigeria, FHI 360; Nora Zenczak-Skerrett, ChildFund International
12:30pm - 2:00pm <i>Mount St. Helens Ballroom</i>	Lunch CORE Group Member Business Meeting

AGENDA AT-A-GLANCE

Wednesday, continued

2:00pm - 3:30pm	Concurrent Sessions
<i>Mount St. Helens Ballroom</i>	A Call to Action: Aligning the Evaluation of Social and Behavior Change with the Realities of Implementation Joseph Petraglia, Pathfinder International; Janine Schooley, PCI; Chelsea Cooper, USAID's Maternal and Child Survival Program, Jhpiego; Lenette Golding, Alive & Thrive/Nigeria, FHI 360
<i>Multnomah</i>	Working with Governments: Experiences and Results from Recent CSHGP Projects Ira Stollak, Curamericas Global; Susan Thompson, Health Alliance International; Rachel Hower, World Relief
<i>Crown Zellerbach</i>	Facilitation to Transform Meetings into Learning Opportunities Shelia Jackson, The TOPS Program, CORE Group
<i>Weyerhaeuser</i>	Developing Ministry Capacity and Partnerships for Sustainability and Scale Julia Robinson, Health Alliance International; Mohammed Ali, Catholic Relief Services; Mary Anne Mercer, Health Alliance International; Paulina Bayiwas, Ministry of Health, Ghana
3:30pm - 4:00pm	Break, Expo Tables Open
4:00pm - 5:30pm	Working Group Time
<i>Multnomah</i>	Child Health Working Group
<i>Crown Zellerbach</i>	Community-Centered Health Systems Strengthening Working Group
<i>Washington</i>	Monitoring and Evaluation Working Group
<i>Clark</i>	Nutrition Working Group
<i>Weyerhaeuser</i>	Reproductive, Maternal, Newborn and Adolescent Health Working Group
<i>Clackamas</i>	Social and Behavior Change Working Group

THURSDAY, MAY 19, 2016

8:00am- 8:30am	Registration & Breakfast
8:30am - 10:30am	Review of Effectiveness of Community-based Primary Health Care in Improving Child and Maternal Health: Leveraging Results for Advocacy
<i>Mount St. Helens Ballroom</i>	Henry Perry, Johns Hopkins Bloomberg School of Public Health; Paul Freeman, Independent; Enric Jané, Bill & Melinda Gates Foundation
10:30am - 11:00am	Break, Expo Tables Open
11:00am - 12:30pm	Concurrent Sessions
<i>Mount St. Helens Ballroom</i>	Effectiveness of Community-based Primary Health Care: Participatory Discussion of Program Implications Mary Carol Jennings, Johns Hopkins Bloomberg School of Public Health; Paul Freeman, Independent; Henry Perry, Johns Hopkins Bloomberg School of Public Health; Moderator: Sarah Shannon, Hesperian Health Guides
<i>Multnomah</i>	Packaging Communications to Influence Longer-term Solutions Tom Paulson, Humansphere; Joy Portella, Minerva Strategies; Dara J. Royer, Mercy Corps
<i>Crown Zellerbach</i>	The Complexities of M&E in a Multi-dimensional, SDG World Dora Ward Curry, CARE; Claire Boswell, The TOPS Program, Food for the Hungry
<i>Weyerhaeuser</i>	Hot Topics in Social and Behavior Change Mary DeCoster, The TOPS Program, Food for the Hungry; Chelsea Cooper, USAID's Maternal and Child Survival Program, Jhpiego; Debora Freitas López, Chemonics; Antony Duttine, Handicap International
12:30pm - 2:00pm	Lunch
<i>Mount St. Helens Ballroom</i>	Lunchtime Roundtables (See the full list on page 31)
<i>Multnomah</i>	BabyWASH: Integrating WASH, Nutrition, MNCH and ECD to Reach Mothers and Children Under Two
<i>Crown Zellerbach</i>	Low-Burden M&E for Nutrition SBC: Brainstorm on Challenges and Methods Using Non-Technical Staff
<i>Weyerhaeuser</i>	Life After Polio: What Have We Learned and What Can We Use?
2:00pm - 3:30pm	Working Group Time
<i>Multnomah</i>	Child Health Working Group
<i>Crown Zellerbach</i>	Community-Centered Health Systems Strengthening Working Group
<i>Mount St. Helens Ballroom</i>	Monitoring and Evaluation; Nutrition; and Social and Behavior Change Working Groups
<i>Weyerhaeuser</i>	Reproductive, Maternal, Newborn and Adolescent Health Working Group
3:30pm- 4:00pm	Break, Expo Tables Open
4:00pm- 5:30pm	Sustainable Health - A New Vision for Programming
<i>Mount St. Helens Ballroom</i>	Debora B. Freitas Lopez, Chemonics; Charlene McGee, Multnomah County Health Department Health Equity Initiative; Jonathan Fink, Portland State University

FRIDAY, MAY 20, 2016

8:00am-8:30am	Registration & Breakfast
8:30am-12:00pm	Half-day Workshops
<i>Mount St Helens Ballroom</i>	Comprehensive Multi-dimensional Programming for Nutrition Sally Abbott, USAID Bureau for Food Security; Edye Kuyper, INGENAES Project, Jessica Bateman, Catholic Relief Services; Samantha Clark, SPRING, JSI Research & Training Institute; Moderator: Gwyneth Cotes, SPRING, Helen Keller International
<i>Multnomah</i>	Civil Society Engagement: Practical Solutions Nazo Kureshy, USAID; David Shanklin, CORE Group; Judy Lewis, University of Connecticut; Blanca Lomeli, PCI; Brenda Hegarty, Catholic Relief Services; Lee Losey, CORE Group Polio Project, Catholic Relief Services
<i>Weyerhaeuser</i>	Digital Storytelling: Using Video for Education and Behavior Change Michelle Shapiro, CORE Group; Adrienne Todela, The TOPS Program, CORE Group; Kristina Granger, SPRING, The Manoff Group
12:00pm-5:00pm	Social Networking Tour: Columbia River Gorge

PRE-CONFERENCE SESSIONS

Social and Behavior Change Approaches during the Transition from Relief to Development

Monday, May 16 | 9:00am – 12:30pm | Multnomah

Bonnie Kittle, Independent

The SBC Working Group, in collaboration with Medical Teams International (MTI), will be offering a morning workshop on Behavior Change during Emergencies. During this participatory four-hour workshop, the facilitator, Bonnie Kittle, will share her observation that, with some adjustments, the Designing for Behavior Change (DBC) framework can be a useful tool to re-design the behavior change strategy. The workshop will provide a quick review of the DBC framework but will focus on the component, Describing the Priority Group. An example of how the context in one emergency setting changed as a result of the emergency, how that changed which determinants were significant, and how the activities were impacted will be used to illustrate the point. Working in small groups, participants will be tasked to write their own comparative examples based on their experience to share with the wider group. A discussion of how NGO emergency teams assess the situation will be part of the workshop; participants are encouraged to bring the tool that their organizations use for this purpose.

Welcome & Orientation

Monday, May 16 | 2:00pm – 4:00pm | Multnomah

CORE Group Staff

Whether you are a new individual or organizational member or associate, a new employee of one of our member organizations, a first time attendee to a CORE Group Conference, or just want to know more about what to expect this week, please join us at the Welcome & Orientation to the Spring 2016 Global Health Practitioner Conference. Participants will briefly learn about the history and current work of CORE Group. Later, CORE Group Staff will host a knowledge cafe focusing on what to expect during this week's conference, our new Social Community, the Young Professionals Network, and programs.

Holistic Indicators

Monday, May 16 | 2:00pm – 5:00pm | Medical Teams International

Todd Nitkin, Medical Teams International

Participants will discuss the latest research on holistic indicators, share program examples with colleagues, and contribute to the finalization of a Compendium of Holistic Indicators. This session is sponsored by the Monitoring and Evaluation Working Group. All those who are interested in holistic health, holistic indicators, and M&E of projects through use of these indicators are welcome.

By the end of this session, participants will have:

- Discussed existing indicators for holistic health, and share experiences and gaps in their use.
- Reviewed Medical Teams International's (MTI) draft compendium of holistic indicators.
- Provided feedback to contribute to a complete thorough compendium for use by any NGOs that are interested.

Meet in the Red Lion Hotel lobby by 1:15pm to board the bus to MTI.

Tour of REAL.LIFE Exhibit and Reception

Monday, May 16 | 5:00pm – 6:30pm | Medical Teams International

All are invited to attend a tour of Medical Teams International's (MTI) REAL.LIFE exhibit and a reception afterwards, with several speakers from MTI and a networking reception at MTI's headquarters in Tigard, OR.

Provide your own transportation to MTI. A bus back to the Red Lion Hotel will depart at 6:45pm.

WELCOME AND KEYNOTE | 8:30AM | MOUNT ST. HELENS BALLROOM

Welcome

Judy Lewis, Chair, CORE Group Board of Directors; Lisa M. Hilmi, Executive Director, CORE Group; Lillian Shirley, Director, Public Health Division, Oregon Health Authority

Keynote: Keeping the Complexities of Multidimensional Nutrition Strategies Simple and Doable

Shawn Baker, Director of Nutrition, Bill & Melinda Gates Foundation

Shawn Baker, Director of Nutrition for the Bill & Melinda Gates Foundation, will walk us through the Foundation's recent "refresh" of its nutrition strategy, and how it was catalyzed by the larger global awakening to the crucial importance of nutrition to health and development. He will show how discussions within the Gates Foundation reflect the major themes of the global nutrition agenda. In particular, he will address how progress requires both a recognition of the complex, multi-sectoral nature of the solutions and a focus on priorities and allocation of roles and responsibilities in manageable parts; the importance of strengthening the ability to deliver proven approaches; how political and social resources are as crucial as technical tools in scaling up nutrition; and the role the NGO and research communities can play in the movement.

PLENARY | 11:00AM | MOUNT ST. HELENS BALLROOM

Multi-dimensional Programming: The Rubik's Cube Challenge to Community Health

Esther Indriani, World Vision South Asia and Pacific Ocean; Paulina Bayiwasi, Ministry of Health, Ghana; Lee Po Cha, Immigrant & Refugee Community Organization; Katherine Jones Debay, Loma Linda University School of Public Health

The origins of community and global public health and nutrition problems are rooted in a variety of multidimensional causes, addressed through multidimensional solutions with constellations of actors. Like the Rubik's cube, there are 42 quintillion possibilities but only one correct solution – healthy thriving people. Public health and nutrition problems are not engineered plastic Rubik's cubes subjected to trials and errors of individual players. Rather there are multiple actors sometimes working together and sometimes at odds to address public health and nutrition problems. In this session we will explore how various actors have different perspectives on the multi-dimensional aspects of public health and nutrition problems, how they consider the individual, household, community ecosystem, and globalization in designing and implementing programs, and how global health practitioners can apply the lessons from these different perspectives. Through group discussions participants will explore multi-dimensional programming challenges. A panel of practitioners from an international NGO, local government health agency, and a community-based organization will discuss how they have addressed the challenges to create successful programs.

Reflection Questions for the Conference:

- How can I master the Rubik's cube to be more effective in addressing the multi-dimensional aspects of public health and nutrition problems?
- What am I learning/hearing at the CORE conference that will help me master the Rubik's cube?

By the end of this session, participants will have:

- Described the most critical dimensions for effective community health programming.
- Described examples of how successful programs consider the multi-dimensional aspects of a community, national, global public health and nutrition problem in resource constrained settings.
- Defined the challenges global health practitioners face supporting solutions that address the multi-dimensional aspects of public health and nutrition problems.

LUNCHTIME ROUNDTABLES | 12:30PM | MOUNT ST. HELENS BALLROOM

Introduction to Working Groups

Learn more about CORE Group's Working Groups at these informal lunch tables: Child Health; Community-centered Health Systems Strengthening; Monitoring & Evaluation; Nutrition; Reproductive, Maternal, Newborn, and Adolescent Health; and Social & Behavior Change. Feel free to join one table, or visit a couple during the lunch period.

Can a TV Spot Change Behavior?: Help Shape Alive & Thrive's Set of "Lessons Learned" on Role of Mass Media in Nutrition

Lenette Golding, Alive & Thrive, FHI 360

Alive & Thrive (A&T) is seeking your input! During lunch, stop by the A&T table and offer your doubts and support for the kinds of lessons A&T staff are drawing from our data. Weigh in on topics like: Can TV or radio spots address nuanced and complex issues? For what kinds of behaviors is mass media alone likely to move the needle? Why do we say that mass and interpersonal communication are mutually reinforcing? What is the relative cost of mass media and at-scale interpersonal communication? Alive & Thrive is one of the few programs to assess the contributions mass media may be making in achieving rapid large scale improvements in infant and young child feeding practices. Here's your chance to make sure A&T's lessons are couched in terms that are relevant and useful for CORE Group members. We need to hear from you!

CONCURRENT SESSIONS | 2:00PM

The Normative Dimensions of SBC as Part of a Community Action Cycle

Tuesday, May 17 | 2:00pm – 3:30pm | Mount St. Helens Ballroom

Teleshore Kabore, USAID's Maternal and Child Survival Program, Save the Children; Susan Igras, Institute for Reproductive Health, Georgetown University; Feven Mekuria, CARE International; Moderator: Joseph Petraglia, Pathfinder

The centrality of social norms and normative change to the broader goal of behavior change is indisputable. In this panel, presenters will explore the role of normative change in community action-based SBC through examination of different elements: 1) the "reflection and dialogue" dimension of normative change as part of a community action-based SBC project using Social Analysis and Action (SAA) as a case in point; 2) the "action planning" dimension of normative change as part of a community action cycle; and 3) the "social networking and diffusion" dimension of normative change using Tekponen Jikuagou as a case in point. Panelists will speak of "dimensions" and "cases in point" as they aim to generalize the norm-changing potential of community action beyond the scope of any given project/activity.

By the end of this session, participants will have:

- Practiced guiding the dynamics of a reflection/dialogue discussion highlighting the role of norms.
- Practiced the translation of priority issues into an action phase focused on normative change.
- Learned how techniques of social networking can diffuse new ideas about healthier norms.

The Community Project: A Multi-dimensional Ethiopian Case Study

Tuesday, May 17 | 2:00pm – 3:30pm | Multnomah

Collen Kaleda, The Community Project: Ethiopia; Rita Cooper, Engineers Without Borders: Portland Maine Professionals; Judy Lewis, University of Connecticut

The Community Project (CP) is a multi-dimensional approach to education and health, housing and environment. CP engages Engineers without Borders (EWB), City Government of Debre Birhan including the Education Department, local universities, and a Community Development Committee (CDC). CP includes a school (1200 students), food-crop gardens and orchards for nutrition, healthy building and latrine design (urine-diverting toilets, composting, wash-up room for menstruating girls), hand washing station, soccer and track fields for exercise, and a community center with a health station, community meeting space and vocational activities. CP provides an excellent case study of multi-dimensional programming encompassing education, health, nutrition, water and sanitation, recreation/exercise, and economic development. This will provide the basis for small group work focusing on illustrative examples of issues and challenges arising from multiple organizations, perspectives on health and education, and community priorities to discuss problem-solving and strategies for multi-dimensional work from the point of view of the community.

By the end of this session, participants will have:

- Applied the components of a multi-dimensional approach to address issues arising from the implementation of a representative program from a low resource country.
- Identified different perspectives that the stakeholders (identified in the previous plenary) may have on these issues.
- Developed a "take home" strategy for improving program implementation and integration of multiple dimensions at the community level.

Savings Groups as a Platform for Multi-dimensional Programming

Tuesday, May 17 | 2:00pm – 3:30pm | Crown Zellerbach

Jennifer Orgle, CARE USA; Dennis Mello, PCI; Jennine Carmichael, FHI 360; Bobbi Gray, Freedom From Hunger; Paul Rippey, Savings Revolution

Savings Groups (SGs) are self-managed, self-capitalized village-based savings and credit groups. SGs have become a common component of community-based health and nutrition programs, and when they are used to complement another intervention, like MNCH, they earn a special name, SG+. In addition to their economic benefits, SG+ provide an effective platform for the dissemination of MNCH messages. Moreover, the less easily measurable factor of increased empowerment and confidence, particularly among female members, has also been noted. Representatives from Freedom from Hunger, CARE, PCI, FHI 360 and Savings Revolution will share experiences and lessons on how SG+ have been integrated into MNCH projects and contributed to their effectiveness. We will look at examples of what is being done with SG+, review results and impact from such programs in the past and look ahead to some issues that are on the horizon and should be considered when adding an SG+ component to multi-dimensional community-based MNCH programs in the future.

By the end of this session, participants will have:

- Discussed SG+ experience in several countries, outlining how this mechanism has added to and benefitted program effectiveness.
- Reviewed the results of SG+ programming based on rigorous research.
- Explored considerations and ideas for SG+ approaches in the future.

Multi-dimensions of Nutrition-related Research to Strengthen Programming

Tuesday, May 17 | 2:00pm – 3:30pm | Weyerhaeuser

Jose Luis Alvarez Moran, Action Against Hunger UK; Jennifer Nielsen, Helen Keller International; Justine Kavle, USAID's Maternal and Child Survival Program, PATH; Maureen Gallagher, Action Against Hunger US

This session will include the sharing of multisector nutrition projects and related research applied for program design, real time evaluation, and evidence building. Three projects bridging nutrition and health through agriculture, family planning and community health services will present diverse angles on the use of research for programming and health-related results.

By the end of this session, participants will have:

- Learned about different types of research and how they can be used at various stages of the project cycle in nutrition-related multi-dimensional programming.
- Learned about how a rigorous methodology for operations research looking at program delivery in a nutrition-sensitive agriculture and health & nutrition program can identify weaknesses and inform program improvements. In a complex program such as this, monitoring delivery is especially crucial.
- Discussed opportunities and challenges to the different types of research methods shared when analyzing and improving nutrition multi-dimensional programming.

PLENARY | 4:00PM | MOUNT ST. HELENS BALLROOM

Measuring Resilience: Evidence from Ethiopia, Kenya, Uganda, Niger and Burkina Faso

Tim Frankenberger, TANGO International

Resilience is increasingly seen as a unifying concept and policy instrument that uses humanitarian and development approaches to address the chronic vulnerability of populations exposed to recurrent shocks and stressors. Building resilience involves making investments that strengthen the absorptive, adaptive and transformative capacities of vulnerable populations to cope with and recover from specific shocks and stressors. Questions raised about resilience measurement are motivated by the need to assess and understand the dynamics that account for heterogeneous outcomes following shock exposure and the need to assess the impacts of the growing number of interventions that are meant to promote resilience. This presentation will summarize TANGO's research on the influence of key capacities that enable households and communities to mitigate, adapt to and recover from shocks and stressors. The focus of this work has been on the role of social capital, livelihood diversification and psycho-social factors in managing and recovering from climate related shocks.

PLENARY | 8:30AM | MOUNT ST. HELENS BALLROOM

Emerging Global Opportunities

Lisa M. Hilmi, CORE Group; Lee Losey, CORE Group Polio Project, Catholic Relief Services

Learn about new opportunities for CORE Group Members and partners, as well as updates on current collaborations.

NEW INFORMATION CIRCUIT | 9:00AM | MOUNT ST. HELENS BALLROOM

TABLE 1 | The Future for Data Driven Program Improvement: DHIS2

Hosted by: Dora Ward Curry, CARE

The software DHIS2 is the emerging standard among systems for collecting, managing and utilizing data in development programming, used by over 60 countries and over 50 international NGOs and donors including PEPFAR, CDC, WHO, UN-AIDS, UNICEF and Global Fund. As open-source software with an extensive global community for support and innovation, the basic design of DHIS2 prioritizes data utilization at the district and community levels, empowerment and accessibility for the end user, and building south-to-south leadership and expertise. Come hear who's doing what using this platform and explore the possibilities.

TABLE 2 | Community-led Complementary Feeding and Learning Sessions (CCFLS)

Hosted by: Mary Mpinda and Ana Maria Ferraz de Campos, Catholic Relief Services

CCFLS is an under-nutrition preventive approach targeting children under-2 and pregnant women and lactating women, which has been adapted from PD/Hearth by Catholic Relief Services. Implementation and training manuals to support the roll-out of this community-led participatory approach will be shared. CRS has been implementing this approach in three countries (Malawi, Zambia, and Madagascar) with positive results since 2007. The approach easily links with agriculture and provides opportunities for effective integration with other sectoral interventions such as water, sanitation, and hygiene (WASH), agriculture, microfinance and early childhood development. It is adaptable in situations of drought or food insecurity, and the target group may be expanded for all children under-5.

TABLE 3 | Curriculum Materials for Engaging Caregivers in Early Child Development and The Homecare Plan: A Tool for Monitoring Community Health Volunteer Activities at the Household Level

Hosted by: Setungoane Letsatsi-Kojoana and Everlyn K. Matiri, Catholic Relief Services

Catholic Relief Services has developed a series of curricula materials for family caregivers and caregivers working with children 0 - 5 years in preschools. These materials include essential early childhood development (ECD) topics that include health, nutrition and child protection to ensure holistic child development. In a context where resources are very limited, the curricula has proven to be useful in providing the much needed guidance to caregivers both at household and pre-school settings and has been used widely by different ECD stakeholders to scale up the messages on early childhood. This circuit table will share some of the experiences of rolling out the curriculum for potential replication in similar contexts. The Homecare Plan: A Tool for Monitoring Community Health Volunteer Activities – CRS has been implementing the THRIVE project, an ECD project targeting children of 0-5 years, since 2012. The THRIVE project builds the capacity of caregivers, community health volunteers (CHVs) and other practitioners to ensure that children thrive in a sustainable culture of positive parenting, care, stimulation and support. In order to ensure that caregivers are reached with key ECD messages, the project works with CHVs who visit caregivers in their households to deliver these messages. CHVs are expected to fill in a summary form every end of the month with information regarding the household visits. It was noted that some CHVs, however, were not visiting the households but would fill out their monthly summary forms showing that they had visited all their caregivers. The project then adopted the home care plan book to better track the CHV activities.

TABLE 4 | If These Walls Could Talk: Couples' Functionality Assessment Toolkit & Links to Development in Southern Malawi

Hosted by: Angela Tavares, Catholic Relief Services

While couple relationship quality and functionality are believed to be linked to a wide range of health and development

outcomes in low resource settings, few tools to assess couple relationships have been validated in this context. In Africa there is little research on couple relationship quality which is linked to development indicators. Catholic Relief Services has developed the Couple Functionality Assessment Tool (CFAT) and validated it in a rural population in southern Malawi. The CFAT showed validity in this population, and findings suggest that strengthening couple relationship quality may support behaviors which are critical to household health and development. The CFAT is a simple survey tool that will allow projects which target the enhancement of couple functionality for the purpose of improving development outcomes to capture valid and reliable data on relationship quality. Program designers and managers will have a greater understanding of the importance of measuring couple relationship quality in order to achieve development outcomes and participants will have a hands-on experience with using this toolkit.

TABLE 5 | Transforming Gender Norms for Improved Food Security and Nutrition

Hosted by: Jennifer Nielsen, Helen Keller International

Are you convinced that transforming the roles of women and men in agriculture and child care is essential to improved health, nutritional status, well-being and prosperity, but are unsure how to get there? Helen Keller International (HKI) has an approach and some lessons learned from Asia and Africa that may help. Jennifer Nielsen and Sheela Sinharoy will be presenting HKI's Nurturing Connections© curriculum, developed in 2013, which uses community-based, participatory learning to lead communities to challenge the gender inequalities that undermine food security and nutrition and begin to change community norms. The curriculum helps wives, husbands, and community elders work separately and then together to identify harmful stereotypes, build negotiation skills, and try new ways of shared decision-making within the household. By creating a community-level experience, the process helps build long-term change. It has been extensively tested in HKI projects in Bangladesh and has been adapted (in collaboration with the International Center for Research on Women) as "Cultivons les Relations" in West Africa. The presenters will explain how the program works and what the action research has found to date. Participants will become familiar with a new tool and how it might be integrated into their own nutrition-food security interventions.

TABLE 6 | Expanding Essential WASH Actions

Hosted by: Renuka Bery, FHI 360

With growing recognition of the role of water, sanitation and hygiene (WASH) in achieving nutrition and growth outcomes, a set of Essential Hygiene Actions has emerged to facilitate integrated programming. Currently, these Essential Hygiene Actions focus generally on handwashing and corresponding support materials are limited. Integration advocates are exploring a more comprehensive menu of Essential WASH Actions that includes safe water, feces disposal, as well as multiple aspects of hygiene, elaborated by age cohorts, corresponding to Essential Nutrition Actions for the First 1000 Days. The expanded Essential WASH Actions propose feasible, effective behaviors, with relevant detail to incorporate into behavior-centered programming, and focused capacity building materials to complement the Essential Nutrition Action resources. These resources will serve as practical guidance for implementers and improve quality, efficiency and effectiveness of integrating WASH into nutrition and food security programming. This circuit table will introduce the Essential WASH Actions elements, and elicit feedback on the draft tools to date to then incorporate into future iterations of the Essential WASH Actions package.

TABLE 7 | Getting It Right: Designing Context-Appropriate Nutrition Programs

Hosted by: Kristen Cashin, FANTA, FHI 360

This circuit table will introduce participants to the updated Nutrition Program Design Assistant (NPDA), a tool that helps teams design the nutrition component of community-based maternal and child health, food security, or other development programs. The NPDA reference guide and accompanying workbook provide updated technical information and walk users through conducting a nutrition situation analysis, developing program goals and objectives, mapping health and nutrition services and policies, and selecting the most appropriate interventions and approaches for a program's objectives, target population, and geographic area. The session will include a discussion of key concepts in the guide and the essential information and steps in designing a nutrition program. Participants will understand the purpose of the NPDA tool and how to use it - including key information needed and the key steps in applying that context specific information to nutrition program design.

TABLE 8 | Saving the Rain Forest with a Stethoscope*Hosted by: Kinari Webb, Health In Harmony*

The destruction of forest areas is an ongoing threat to global environmental health. Health In Harmony, founded in 2005, works with communities on the ground to conserve the rain forests through initiatives suggested and guided by the communities themselves. This innovative program was launched as simply a process of listening: in 400 hours of community meetings, Dr. Webb learned that the greatest need driving small-scale illegal logging was affordable and high-quality health care. So, in 2007, a subsidized clinic was established. The clinic works at the intersection of human and environmental health with an incentive system. People who live in villages that have verifiably ceased logging receive up to a 70% discount on health care - the less logging in the village, the higher the discount. The clinic also offers patients the opportunity to pay for health care services with non-cash means such as seedlings (used in reforestation), manure (used in sustainable farming), and handicrafts that are later sold in the US. Additionally, the clinic doctors are always learning; they work with volunteer physicians (mainly from the US) and engage in fellowships (funded by Health In Harmony) at the medical school of Yale University and Stanford University. Since the clinic opened its doors, community meetings have inspired a sustainable agriculture training program, a reforestation effort, a forest monitoring team, and, most recently, a chain-saw buy-back program for illegal loggers. Health In Harmony and its Indonesian partner ASRI approach health holistically, addressing the economic, social, and physical ailments faced by the community. This approach has led to a decrease in illegal logging from over 1350 households, logging down to just 180 individuals in eight years. Healthcare simultaneously dramatically improved. Linking human and environmental healthcare harmoniously and addressing them together leads to better outcomes for all. By radically listening to communities and addressing problems in an intertwined manner, dramatic successes can be achieved.

TABLE 9 | Adapting Traditional Community Health Worker Programs for an Increasingly Urban World*Hosted by: Sarah Shannon, Hesperian Health Guides*

Historically most community health worker (CHW) programs operated in rural settings with communities that could be defined primarily geographically. As urbanization increases globally, the need for adapting the CHW model to urban settings has become imperative to addressing the changing health needs and demographics of an increasingly urban and migrant world. Urban CHW programs face unique challenges: greater population diversity with recent migrants from different places, increased mobility of households and destabilized housing, and larger numbers of women working outside the home, among others. Nonprofit organization Latino Health Access has successfully developed and sustained a CHW program working in the urban, poor, and heavily immigrant community of Santa Ana, California. They have created a blueprint of applying a "traditional" community health promoter model to an urban setting. "Recruiting the Heart, Training the Brain: The Work of Latino Health Access," Hesperian's just-published title, tells the story of Latino Health Access and provides practical strategies for adapting health promotion to work in any urban community. By focusing on culturally inclusive, peer-to-peer health education, major health problems including diabetes and obesity are being addressed and outcomes are improving using this innovative model.

TABLE 10 | GrowUp Smart: Building Future Reproductive Health via Puberty Education*Hosted by: Susan Igras, Institute for Reproductive Health, Georgetown University*

More than ever, very young adolescents (VYA) are emerging as a key age group to engage in sexual and reproductive health programming. Puberty presents a critical window of opportunity to intervene before most youth become sexually active and before gendered attitudes and behaviors with negative consequences become entrenched. The knowledge, attitudes, and skills acquired during this time set the stage for future relationships, communication with romantic partners, and self-care practices to prevent risky sexual behavior and unintended pregnancy. During this discussion, you will learn about the interactive GrowUp Smart puberty curriculum, a comprehensive resource package of facilitated and take-home materials to introduce VYA girls and boys, and their parents, to key concepts of puberty, fertility, sexuality, gender, and safe behaviors. The curriculum is designed for youth-serving organizations to implement in collaboration with influential community stakeholders like teachers and schools, traditional and civic leaders, and health workers. Conversation will focus on: 1) the program's theoretical background and community-based learning approach; 2) the curriculum content and specific resources; and 3) results and lessons learned from the pilot in Rwanda. The session will prepare you to integrate the cur-

riculum, in part or in whole, into your existing adolescent sexual and reproductive health ASRH programs to better reach VYAs as they enter a consequential and transformative period in their lives.

TABLE 11 | Being Oteka Together: Using the GREAT How-to Guide

Hosted by: Nana Apenem Dagadu, Institute for Reproductive Health, Georgetown University

Have you heard a bit about the GREAT Project and wondered what it was all about? Are you struggling to reach adolescents on issues related to gender norms, sexual and reproductive health, or gender-based violence (GBV) in an engaging way? This circuit table will introduce GREAT's newly launched How-to Guide, a six-chapter resource package with instructions and supporting materials and tools that provide direction to programs that want to implement GREAT as part of their own activities. The GREAT How-to Guide is written for NGOs with some experience in community-based development but can be adapted in new settings. Specifically, you will: 1) be oriented to the intervention's theoretical background and content in the areas of gender equality, sexual and reproductive health and gender-based violence prevention; 2) learn about results from the pilot phase; and 3) use an overview of the chapters to work through a participatory exercise with fellow session participants. This session will prepare you to design a concrete adolescent sexual and reproductive health programming work plan based on a proven intervention and will ultimately help you reach both boys and girls throughout their lives.

TABLE 12 | It Begins with a Smile: Applying Human Centered Design to the Community Health Policy Process in Mbeya, Tanzania

Hosted by: Tanvi Pandit-Rajani and Kim Farnham, Advancing Partners and Communities Project, John Snow, Inc.

In 2015, the Government of Tanzania launched a process to design a new community-based health program, including creating a new cadre of professional community health workers. To support implementation of the new strategy and program, The Advancing Partners and Communities (APC) and Community Health Systems Strengthening (CHSS) Projects partnered with the firm, Matchboxology to pilot a human centered design approach to identify key areas for policy attention and develop a district implementation plan to serve as a "prototype" for other districts in the country. Findings revealed important considerations for CHW training tuition costs, CHW deployment and retention, scope of practice, among others. Furthermore, the process led to an appreciation of and new perspectives on various actors working within the health system. Recommendations to address existing policy gaps are currently being considered by the national level CHW Taskforce in Tanzania. Participants in this session will be introduced to the work in Tanzania through a participatory exercise linking policy to service delivery, followed by a short video of the human centered design approach used in country. Key objectives for this session are to: 1) introduce some of the challenges of Community Health Policy implementation through a human-centered design approach, 2) showcase the application of HCD for policy development.

TABLE 13 | mHealth System Strengthening for Improved Community Case Management and Surveillance of Malaria, Pneumonia, and Diarrhea in Mozambique

Hosted by: Karin Kallander, Malaria Consortium

Under a 2012 grant from The Bill & Melinda Gates Foundation, Malaria Consortium in collaboration with London School of Hygiene & Tropical Medicine and University College London, developed an innovative mHealth package for community health workers (CHWs), locally referred to as Agentes Polivalentes Elementares, or APEs, in Mozambique which aimed at improving supervision, motivation, and increasing quality of care given to sick children with malaria, pneumonia, and diarrhea. Under this project, named inSCALE, an opportunity was provided to explore the potential impact of technology solutions for quality of case management provided at community level when implemented in a national health system. The intervention was evaluated with a total of 132 APEs and 47 supervisors in six of the 12 districts of Inhambane province. The other 6 are being used as control districts. In 2016, at the Ministry of Health's request, UNICEF and Malaria Consortium will use DFID funding to expand the scope of content of the APE CommCare app to align with the revised APE curriculum, and to bridge the system with the District Health Information System 2 (DHIS2). The ultimate goal is to improve the delivery of quality services from APEs by creating an mHealth system-strengthening (mHeSS) platform with focus on service delivery and referral, along with strong supervision and performance quality assurance - all essential components of an effective health system. The presentation will share findings from the project and discuss these within the wider context of the challenges of implementing iCCM at scale.

TABLE 14 | Medic Mobile for Android: Building A Better Application for Community Health Workers (CHWs)

Hosted by: Sharon Langevin, Medic Mobile

The product team at Medic Mobile has built a new Android app designed for community health workers and it is in the middle of its first deployment. Community health workers provide care for neighbors at the most critical times. They also serve as proactive agents of change in their communities. Medic Mobile for Android was designed for a new wave of community health workers and integrated health systems. The new app provides an automated, prioritized list of upcoming tasks. In the app, CHWs are guided through actions — such as screening for high-risk pregnancies or diagnosing and providing treatments for children. It also shows progress towards their goals, and allows remote health workers to communicate with contacts and central support teams. Over the past year, Medic Mobile has worked with the Living Goods team and community health promoters in Uganda to identify important features, design and test the user experience and user interface, and configure the application for an initial deployment. The Living Goods app will support their high-impact model being replicated in multiple countries. Medic Mobile is also deploying the application in West Africa by June 2016. Medic Mobile for Android is an offline web app with an Android container, delivering the benefits of the web and a native app. This circuit table will demo both the mobile application and the web application to participants and talk in more detail about our design and development process for the application. Additionally, Medic Mobile can share details about the progress of the ongoing deployment with Living Goods and its partner in West Africa. CHWs deserve new and better technology tools to support their work and we will present an example.

TABLE 15 | Prioritizing the Maternal & Newborn Health Agenda through Advocacy

Hosted by: Arif Noor, Mercy Corps

Mercy Corps has been working in Pakistan since 1986 and is actively engaged in maternal, newborn and child health programming. Through support from the Research and Advocacy Fund, Mercy Corps has worked closely with national, provincial, and district actors to influence policy change with respect to 2 life-saving maternal and newborn drugs. The pathway for policy change was enabled through the facilitation of multi-stakeholder forums at the district and provincial level, complemented by targeted advocacy efforts with national level stakeholders. Misoprostol is now included in province-specific essential drug lists, clinical protocols in community and facility settings have been endorsed by provincial health departments and, the training curriculum for nurses and community based providers has been revised to include misoprostol delivery. Clinical guidelines for multiple applications of chlorhexidine have been approved by provincial health departments, chlorhexidine is now included in the essential drug lists and purchase list of the District Health Offices, and it is included in community midwife birthing kits and Lady Health Worker's service lists. Specific steps included: 1) Advocacy with key stakeholders; 2) Identification of champions within the provincial health departments; 3) Prioritization of relationship building and follow-up; 4) Use of multi-stakeholder forums; 5) Enabled policy environment to promote the use of Chlorhexidine for umbilical cord care & Misoprostol for preventing Postpartum Hemorrhage.

TABLE 16 | Fixing the Internet of Broken Things in Global Health

Hosted by: Evan Thomas, Portland State University

At Portland State University, the SweetLab develops and implements remotely accessible instrumented monitoring technologies designed to improve the collection of effectiveness evidence in global health programs, including monitoring the performance and adoption of high efficiency cook stoves, water pumps, household water filters, sanitation systems, pedestrian footbridges, and other developing world appropriate technologies. Standard approaches for evaluating global health interventions, including methods used within randomized controlled trials, often rely on surveys and observations. These methods have known limitations including infrequent data collection, respondent bias, and reactivity. Cellular reporting instrumentation installed in households and communities can more objectively measure and incentivize healthy behaviors, and tie implementer incentives to performance.

TABLE 17 | Count Me In: An App with Customized Feeding Solutions for Vulnerable Children

Hosted by: Maureen Dykinga, CCC-SLP; Jon Baldivieso, SPOON Foundation

SPOON Foundation is creating an online solution to serve individual children living without permanent families, and children with disabilities by tracking their growth and nutrition and offering highly customized recommendations to promote

optimal development. It also assesses the feeding techniques of caregivers and provides real-time feedback on improving technique and practices. Its primary focus is aiding healthcare workers to quickly assess a child and his or her caregiver, to detect problems, and to respond with detailed, specific, multimedia content. Institution supervisors, international partners, and government overseers also benefit from detailed reports and emailed alerts showing problem areas, trends over time, and point-in-time summary information at the child, site or community, or regional level. At this table you will gain a new understanding of the benefits of customizing and integrating interventions for feeding and nutrition issues for children with disabilities and young children living outside of permanent care.

TABLE 18 | Community Video for Nutrition: Show and Tell to Learn about the Guide and Innovative Approach

Hosted by: Kristina Granger, SPRING, The Manoff Group

Improving the agricultural and nutrition practices in lower and middle income countries can result in improved income, health, and well-being of millions of farming families. However, local languages, customs, and the variation of settings require context-specific approaches to social and behavior change communication efforts. Community video is a cost-effective intervention that enables community members to observe practices in their own geographical context, demonstrated in their own language and by someone of similar means. Seeing practices promoted by their neighbors, community members realize that they, too, have the means to implement them. SPRING and Digital Green have recently launched their Community Video for Nutrition Guide to help global agriculture and nutrition practitioners integrate community video for nutrition into their projects. The guide is based on experience implementing two proofs of concept in India and Niger over the past two years. This approach uses Digital Green's video-based methodology, originally designed to promote improved agriculture behaviors, to specifically promote better nutrition and hygiene practices. Videos are shared among small community and women's groups using portable Pico projectors. A robust suite of analytic tools, coupled with feedback from community members, provide program partners with timely data to better target the production and distribution of videos. During this session, participants will be oriented to the guide as a resource and get a chance see the videos and equipment and experience how accessible the approach really is!

TABLE 19 | Newly Devised and Field-validated Modules for the Rapid Health Facility Assessment

Hosted by: Todd A. Nitkin, Medical Teams International

Medical Teams International (MTI), led by Dr. Todd A. Nitkin, has developed and added several new modules to the Rapid Health Facility Assessment originally offered to INGOs by USAID and MEASURE Evaluation to measure a set of key indicators for maternal, newborn and child health (MNCH) services at the primary health care level. The new modules expand the key indicators to include the areas of Antenatal Care, Labor and Delivery, Immediate Postnatal Care, Emergency Obstetrics and Newborn Care (EmONC) Signal Functions, and EmONC Provider Competence. The modules were tested by MTI in Uganda, and also in collaboration with World Vision in Sierra Leone and Zambia. This work is in conjunction with the M&E Working Group.

CONCURRENT SESSIONS | 11:00AM

Demystifying the Measurement of Complex Social Constructs: Assessing Social Capital Across Sectors

Wednesday, May 18 | 11:00am – 12:30pm | Mount St. Helens Ballroom

William Story, University of Iowa, College of Public Health; Tim Frankenberger, TANGO International

Community-driven development is most successful when communities are participating in the problem-solving process and they recognize that they can collectively change their circumstances. However, the effect of these community-strengthening initiatives largely remains unknown due to measurement limitations. In order to build the evidence for the impact of community-driven approaches to health and development, it is critical to develop valid and reliable measures to assess social change. During this session, participants will review approaches to measuring complex social constructs, explore examples of social capital assessment, and discuss the adaptation of existing measurement tools for wider use in population-based surveys.

By the end of this session, participants will have:

- Reviewed the approaches to creating valid and reliable measures of complex social constructs.

- Examined the design of social capital assessment tools and discovered how the tools have been used in health and development programs.
- Compared various assessment tools for measuring social capital and discussed how to adapt them for wider use in population-based surveys.

Community Health Worker Models: A Focus on Sustainability

Wednesday, May 18 | 11:00am – 12:30pm | Multnomah

Henry Perry, Johns Hopkins Bloomberg School of Public Health; Mike Park, Aspen Management Partnership for Health (AMP Health); Ari Johnson, Muso; Jennifer Norman, Mercy Corps; Molly Christiansen, Living Goods

Given the heavy burden of preventable child and maternal deaths in Low and Middle Income Countries, many governments and funders have recognized the value of Community Health Workers (CHWs) in delivering essential interventions to improve and save lives. In reality the level of government support for and mandate of community-based services varies greatly, as does the training, motivation, management and sustainability of CHWs. Many NGOs implement effective programming through CHWs but these efforts are often not sustained beyond project support. This session will explore some of the challenges countries face in financing and scaling effective community health systems, and present case studies of CHW models that have promise for large-scale impact and sustainability.

By the end of this session, participants will have:

- Learned about challenges facing countries in scaling, financing, managing and sustaining effective CHW systems.
- Learned about different CHW models with promising sustainability and understood what drives the success of these CHW models.
- Gained insight into ways to integrate principles focused on sustainability into CHW programming and planning.

Meeting Health Service Gaps In Emergency Situations – The Role For Community Health

Wednesday, May 18 | 11:00am – 12:30pm | Crown Zellerbach

Dora Ward Curry, CARE; Lisa M. Hilmi, CORE Group

Meeting the health needs of populations affected by emergencies and other crises (such as chronic crises and fragile states) is a critical role for global health actors. Increasingly, it is clear that very few emergency situations meet a traditional acute humanitarian response model: a defined population residing in defined limits of a camp. Community level health interventions are essential elements of successful health programming in complex settings, not, as they may seem, non-essential add-ons. This session will examine some of the ways in which community health approaches are contributing to health responses in emergency and crisis settings. We will examine three case studies, one covering community health promotion and education related to Ebola in Sierra Leone, another reviewing efforts to reach communities in Northern Syria with reproductive health services, and a third examining the complexities of maximizing coordination with the Ministry of Health in the sometimes flood and earthquake, and consistently highly politically sensitive and insecure, environment of Pakistan.

By the end of this session, participants will have:

- Identified and distinguished among some of the important elements of meeting health needs in the diverse settings of emergency affected populations, specifically: 1) meeting health service delivery gaps; 2) addressing reproductive health needs often considered non-essential; and 3) coordinating with crisis-affected health systems.
- Examined case studies of these three elements.
- Identified common challenges and themes and novel solutions to programming in these circumstances.

Integrated Childhood Development: The Whole-Child Perspective

Wednesday, May 18 | 11:00am – 12:30pm | Weyerhaeuser

Lia C. Haskin Fernald, University of California, Berkeley School of Public Health; Renuka Berry, FHI 360; Lenette Golding, Alive & Thrive, FHI 360; Nora Zenczak-Skerrett, ChildFund International

Early childhood is the most critical period of a child's growth and development. During this time, the brain and body are developing more quickly than at any other time and the relationships a child establishes during this period lay the foundation for all future learning and living. During this session, Clean, Fed, & Nurtured, a community of practice of international

SESSION DESCRIPTIONS | WEDNESDAY, MAY 18

NGOs committed to holistic child development, and Dr. Lia Haskin Fernald from the University of California, Berkeley, will present on integrated childhood development. Afterwards, we will collaboratively explore early childhood development (ECD) across the nutrition and water, sanitation, and health (WASH) sectors. Together, we will review the latest evidence of what works in integration, entry points and evidence in programming with young children and their families, and discuss how practitioners can foster further whole child integration across sectors to achieve better outcomes for young children as we move into post-2015.

By the end of this session, participants will have:

- Learned of the most current research in the area of integrated programming in child development across ECD, nutrition, and WASH.
- Participated in an exercise to map their experience (tools and approaches), evidence (research and evaluations) and identify gaps, resulting in a global map of the integrated ECD portfolio.
- Made concrete commitments to further their efforts in integrated child development programming, filling gaps identified in the mapping.

LUNCH SESSION | 12:30PM | MOUNT ST. HELENS BALLROOM

CORE Group Member Business Meeting

This meeting is for CORE Group Members to find out updates and opportunities about CORE. The meeting will include a report from the Board of Directors and Executive Director, as well as discussion of important membership and fund development issues and opportunities. Non-Members are welcome to eat in any other session rooms or outdoors.

CONCURRENT SESSIONS | 2:00PM

A Call to Action: Aligning the Evaluation of Social and Behavior Change with the Realities of Implementation Wednesday, May 18 | 2:00 – 3:30pm | Mount St. Helens Ballroom

Joseph Petraglia, Pathfinder International; Janine Schooley, PCI; Chelsea Cooper, USAID's Maternal and Child Survival Program, Jhpiego; Lenette Golding, Alive & Thrive, FHI 360

For the past year the CORE Group's SBC Working Group has been exploring new and emerging ideas for M&E of SBC. During a one-day workshop at the 2015 Fall Conference, the group discussed whether behavior change evaluations as currently conceived can be responsive to the dynamic background in which interventions operate and looked at the needs and dynamics driving new trends in thinking for M&E of SBC. After the workshop, the organizers drafted a "Call to Action" encouraging implementers and donors to make evaluation more responsive to the contextual realities of implementation and then presented the paper at the International SBCC Summit. This panel will synthesize the conversations to date and present, "A Call to Action: Aligning the Evaluation of Social and Behavior Change with the Realities of Implementation." The panelists include session leaders from the workshop and the Summit and a representative from USAID's Maternal and Child Survival Program (MCSP).

By the end of this session, participants will have:

- Provided an update of all the work that has been done and conversations that have occurred on this topic to date.
- Provided feedback to "A Call to Action: Aligning the Evaluation of Social and Behavior Change with the Realities of Implementation."
- Discussed methods that integrate both qualitative and quantitative evidence in an iterative process, incorporating community participation, dialogue and ownership, two-way communication and feedback loops, while attending to gender and power relations and local social and cultural norms.

Working with Governments: Experiences and Results from Recent CSHGP Projects Wednesday, May 18 | 2:00 – 3:30pm | Multnomah

Ira Stollak, Curamericas Global; Susan Thompson, Health Alliance International; Rachel Hower, World Relief; Moderator: Melanie Morrow, USAID's Maternal and Child Survival Program, ICF International

SESSION DESCRIPTIONS | WEDNESDAY, MAY 18

Three recent projects of USAID's Child Survival and Health Grants Program (CSHGP) will present their experiences and results working with government and national programs in Rwanda, Guatemala and East Timor. Presentations will be followed by a Q&A and open discussion.

By the end of this session, participants will have:

- Heard results from three recent CSHGP projects.
- Learned about CSHGP experiences and what has worked well or not, in working with governments and integrating with national programs.
- Discussed their own experiences in working with governments and how they can use presented lessons in their work.

Facilitation to Transform Meetings into Learning Opportunities

Wednesday, May 18 | 2:00 – 3:30pm | Crown Zellerbach

Shelia Jackson, The TOPS Program, CORE Group

Have you ever attended a meeting in which your organization or project was coming together to solve a problem? The group was going to brainstorm and decide on a path forward. You came to the meeting excited to share your ideas and were looking forward to learning your colleagues' thoughts. But instead of a meeting in which everyone was given a chance to contribute, only one person talked and no ideas on how to solve the problem were discussed. You left the meeting feeling like you wasted your time because you were not heard and nothing was accomplished. There are two things that make a meeting successful: planning and facilitation. Please join us as we explore and practice methods and techniques to plan and facilitate meetings where everyone's voice is heard, learning is an expected outcome and next steps are formulated.

By the end of this session, participants will have:

- Obtained the skills and experience to plan and facilitate participatory meetings.
- Gained the skills to incorporate learning into meetings.

Developing Ministry Capacity and Partnerships for Sustainability and Scale

Wednesday, May 18 | 2:00 – 3:30pm | Weyerhaeuser

Julia Robinson, Health Alliance International; Mohammed Ali, Catholic Relief Services; Mary Anne Mercer, Health Alliance International; Paulina Bayiwasi, Ministry of Health, Ghana

International agencies that aim to improve health in resource-poor countries have recently become cognizant of the need to strengthen public sector health systems to produce sustainable and scalable improvements. NGOs working in health have a critical role to play, but are often constrained by relatively low levels of funding and the requirements of funders to produce measurable substantial results within a short time frame. This panel will present several approaches through which NGOs have worked in collaboration with Ministries of Health to strengthen national public sector health programs.

By the end of this session, participants will be able to:

- Explain the importance of MOH-NGO partnerships in sustaining and scaling up effective health activities or projects.
- Describe at least three important challenges of MOH-NGO partnerships.
- Suggest at least two approaches to strengthening MOH-NGO partnerships.

Working Group Time

Child Health Working Group

Wednesday, May 18, 2016 | 4:00 – 5:30pm | Multnomah

Facilitated by CORE Group Staff, this Working Group session will identify critical child health technical or programmatic challenges, solicit targeted feedback from colleagues working in similar situations, and identify opportunities to work across organizations to solve common challenges time-bound task forces.

Community Centered – Health Systems Strengthening Working Group

Wednesday, May 18, 2016 | 4:00 – 5:30pm | Crown Zellerbach

Co-Chairs: Megan Christensen, Concern Worldwide; Alfonso Rosales, World Vision

The Community-centered Health System Strengthening (CCHSS) Working Group invites all those who are interested to join us. We welcome those who are simply interested in the topic or guest speakers, anyone looking to join a new Working Group, and individuals who are passionate and have experience with health systems strengthening. We will be hosting two guest speakers, one during each session. A guest from USAID will present the new community health framework and lead a discussion. In addition, we will have a guest from USAID's Maternal and Child Survival Program present a working document that is a joint effort with WHO on design and implementation principles for community-oriented health interventions. They have approached the CCHSS Working Group and are seeking feedback from the perspective of practitioners. A portion of the time will also be used to share the workplan and solicit input from members. Our goal is to make the time participatory, thought-provoking and fun. We looking forward to seeing you.

Monitoring and Evaluation Working Group

Wednesday, May 18, 2016 | 4:00 – 5:30pm | Washington

Co-Chairs: Claire Boswell, The TOPS Program, Food for the Hungry; Dora Curry, CARE

Monitoring and Evaluation's Working Group time will include looking back at the Work Plan to use it as an update and evaluation of where the Working Group is at this moment. The Working Group will review an informal environmental scan of materials for field-level M&E capacity building and identify directions for strengthening CORE members' work in this area, as well as provide opportunities for any hot topics that should be added to the Work Plan.

Nutrition Working Group

Wednesday, May 18, 2016 | 4:00 – 5:30pm | Clark

Co-Chairs: Jennifer Burns, International Medical Corps; Maureen Gallagher, Action Against Hunger; Justine Kavle, USAID's Maternal and Child Survival Program, PATH

The first Nutrition Working Group time will be focused on the annual work plan for FY2016-2017, revising achievements during the last fiscal year and defining key priority areas for 2017.

Reproductive, Maternal, Newborn and Adolescent Health Working Group

Wednesday, May 18, 2016 | 4:00 – 5:30pm | Weyerhaeuser

Co-Chairs: Corinne Mazzeo, USAID's Maternal and Child Survival Program, Save the Children; Cindy Uttley, Samaritan's Purse; Mychelle Farmer, Jhpiego; Regina Benevides, E2A Project, Pathfinder International

This will be the inaugural meeting of the Reproductive, Maternal, Newborn and Adolescent Health (RMNAH) Working Group. The former Safe Motherhood and Reproductive Health (SMRH) Working Group is now the RMNAH Working Group, which will focus on a broad range of health concerns related to sexual and reproductive health, maternal and newborn health, and adolescent health. Within the RMNAH Working Group, there are two task forces: Maternal and Newborn Health (MNH), and Sexual and Reproductive Health and Adolescents (SRH+A). The first RMNAH Working Group session at the Spring Conference will include a Share Fair that will provide an opportunity for members to share new and innovative tools and materials related to RMNAH.

Social and Behavior Change Working Group

Wednesday, May 18, 2016 | 4:00 – 5:30pm | Clackamas

Co-Chairs: Lenette Golding, Alive & Thrive, FHI 360; Debora Freitas, Chemonics International; Joseph Petraglia, Pathfinder International

The SBC Working Group will review technical accomplishments from FY16, discuss current priorities and strategic directions for working group members, and review a draft of its FY17 workplan.

PLENARY | 8:30AM

Review of Effectiveness of Community-based Primary Health Care in Improving Child and Maternal Health: Leveraging Results for Advocacy

Thursday, May 19 | 8:30am – 10:30am | Mount St. Helens Ballroom

Henry Perry, Johns Hopkins University; Paul Freeman, Independent; Enric Jané, Bill & Melinda Gates Foundation; Moderator: Sarah Shannon, Hesperian Health Guides

With funding from multiple donors, including the Gates Foundation, Henry Perry and colleagues are completing a 10-year, ground-breaking effort of the Working Group on Community-based Primary Health Care (PHC) of the International Health Section of the American Public Health Association to compile and review evidence about the effectiveness of community-based PHC in improving child and maternal health. The upcoming release of this study presents a unique opportunity to increase the visibility of, and to advocate for, community-based interventions. During this session, Henry Perry and Paul Freeman will present key findings, and Enric Jané will comment on the findings and discuss current activities and future plans of the Gates Foundation regarding integrated community-oriented primary health care. Participants will have the opportunity to strategize about how we might work together to publicize the results of the Review to advocate widely for our shared commitment to community engagement and community-based interventions.

By the end of this session, participants will have:

- Learned about the key findings of the Review of the Effectiveness of Community-based Primary Health Care in Improving Child and Maternal Health.
- Identified how these key findings can support our advocacy for Community-based Primary Health Care.
- Identified specific ways to use the release of the Review to increase advocacy for community-based health programs as individual organizations and as CORE Group members.

CONCURRENT SESSIONS | 11:00AM

Effectiveness of Community-based Primary Health Care: Participatory Discussion of Program Implications

Thursday, May 19 | 11:00am – 12:30pm | Mount St. Helens Ballroom

Mary Carol Jennings, Johns Hopkins Bloomberg School of Public Health; Paul Freeman, Independent; Henry Perry, Johns Hopkins Bloomberg School of Public Health; Moderator: Sarah Shannon, Hesperian Health Guides

This session builds on the plenary above. A 10-year study to compile and review evidence about the effectiveness of Community-based Primary Health Care in improving child and maternal health has just been concluded. This major effort of the Working Group on Community-based PHC of the International Health Section of the American Public Health Association provides extensive findings on maternal health, neonatal health, child health, equity, integration, and strategies for community engagement and intervention implementation that can inform and strengthen approaches to improve child and maternal health. Speakers will share a brief overview of key findings and then participants will discuss how these findings can be used to inform and strengthen NGO programs.

By the end of this session, participants will have:

- Learned about the results of the Review of Effectiveness of Community-based Primary Health Care regarding maternal health, neonatal health, child health, equity, integration, and strategies for community engagement.
- Discussed how these findings can inform and strengthen the implementation of NGO community-based programs.

Packaging Communications to Influence Longer-term Solutions

Thursday, May 19 | 11:00am – 12:30pm | Multnomah

Tom Paulson, Humanosphere; Joy Portella, Minerva Strategies; Dara J. Royer, Mercy Corps

We've all seen (and maybe even created) the flashy communications targeting funders, policymakers, and media around "hot topics" in global health like Ebola and Zika. But how can we draw more attention to longer-term health interventions such as health systems strengthening? In this session we will discuss how NGOs can be more purposeful in their communications to advocate for funding and policies that support more abstract health solutions. While they can have significant impact in the field, these solutions are more challenging to package neatly as communications sound bites. Panelists will

suggest ways communications and program staff can better work together internally to improve these communications, and how blogging and other media can be employed to orient people toward these longer-term investments.

By the end of this session, participants will have:

- Engaged in meaningful discussions about how we develop different types of communications and messaging based on the topic and audience.
- Learned how communications staff and program staff at field and HQ levels can better complement each other and work together toward creating the most effective external messaging.
- Gained tips and tricks to communicate to external audiences that long-term health interventions are just as urgent and impactful as more targeted interventions.

The Complexities of M&E in a Multi-dimensional, SDG World

Thursday, May 19 | 11:00am – 12:30pm | Crown Zellerbach

Dora Ward Curry, CARE; Claire Boswell, The TOPS Program, Food for the Hungry

Participants will explore M&E issues raised by new directions for 21st century, post-child survival global health, as exemplified by the new SDGs. These changes imply a range of new needs for documenting and assessing the “how,” “how well” and “why (impact)” of our programming. The session will use small group guided discussions, concluding in a plenary discussion. The themes of the three small groups will include: 1) M&E options to better understand and document truly integrated programming (as contrasted to parallel vertical programming); 2) key elements of M&E for multi-dimensional SBC, such as practical methods for assessing social and gender norms and prioritizing issues within SBC M&E in this context; and 3) M&E implications for assessing health impact of work from other “sectors,” especially how the theory of change in multi-dimensional programming influences the choice of monitoring and evaluation indicators and design of M&E approach.

By the end of this session, participants will have:

- Discussed three specific challenges related to monitoring and evaluation of programming with a multi-dimensional approach: integration in programming across systems or sectors; the M&E of social change; and improvement of our understanding and assessment of the causal pathways from interventions in other sectors to health outcomes.
- Identified key priorities for future work by CORE Group members related to these three issues.

Hot Topics in Social and Behavior Change

Thursday, May 19 | 11:00am – 12:30pm | Weyerhaeuser

Mary DeCoster, The TOPS Program, Food for the Hungry; Chelsea Cooper, USAID's Maternal and Child Survival Program, Jhpiego; Debora Freitas López, Chemonics; Antony Duttine, Handicap International

This participatory session will cover "hot topic" areas in social and behavior change (SBC): 1) Broadening and deepening our approaches, increasing our efficacy in SBC: Working in small groups, we will discuss SBC methods used in participants' interventions, how to effectively add more methods to the mix, and potential usefulness of a common taxonomy of methods for more effective program design, implementation, and assessment. 2) Existing linkages between SBC and quality of care interventions: We will explore use of SBC approaches to address health worker behavior and institutional norms, and how client-health worker interactions effect perceived quality of care and health outcomes. We will provide an overview of global evidence and program approaches, tools, and resources, offer case examples, and discuss how to further strengthen work in this area. 3) Using SBC methods to address risky road user behaviors: Road crashes cause over 1.2 million deaths annually and many more injuries and permanent disabilities. We will discuss how SBC is used to enhance road user behavior, providing an overview of current approaches, tools, and resources used, offering case examples on how risky behaviors are being addressed, and considering what more can be done to connect SBC and road safety in the community.

By the end of this session, participants will have:

- Identified SBC methods that could be used for more effective program design, implementation, and assessment.
- Identified SBC approaches to address health worker behavior and norms, and improve perception in quality of care received.
- Identified SBC approaches and tools used to address risky road user behaviors.

LUNCHTIME ROUNDTABLES AND SESSIONS | 12:30PM

Roundtable: New Tools for Tracking Multi-Sectoral Nutrition Investments

Thursday, May 19 | 12:30pm – 2:00pm | Mount St. Helens Ballroom

Amanda Pomeroy, SPRING, John Snow Inc.

This session will orient participants to SPRING Project's new nutrition budget analysis tool and user's guide to track financing for nutrition activities at multiple levels within a country. This tool has been used successfully in Uganda and Nepal, and can be used in other country contexts as well. Come by this lunch table session to hear more about the tool and user's guide, get links to the resources, and walk through an example from the Nepal study via a data placemat.

Roundtable: Accelerating Change Through Nutrition-Sensitive Agriculture

Thursday, May 19 | 12:30pm – 2:00pm | Mount St. Helens Ballroom

Ashley Aakesson, SPRING, John Snow Inc.

At this Lunchtime Roundtable, participants will work together with sample project data to identify nutrition-sensitive agriculture practices which are likely to contribute to improved nutrition outcomes in a specific context. This exercise is part of a larger online training that SPRING Project is designing for agriculture project staff to build their knowledge and skills to design stronger nutrition-sensitive agriculture projects. A key aspect of the training is practicing the application of social and behavior change (SBC) principles to define practices and priority and influencing groups, and to use data from formative research to design SBC interventions to reduce barriers to and strengthen enablers for change. The training places nutrition-sensitive agriculture interventions into the broader context of inclusive value chain and agriculture market development, helping project designers and implementers to focus resources effectively to achieve project objectives through SBC.

Roundtable: Behavior Change in Urban WASH in Eastern DR Congo

Thursday, May 19 | 12:30pm – 2:00pm | Mount St. Helens Ballroom

Nicole Weber, Mercy Corps DRC

Mercy Corps is currently implementing a large-scale DFID-funded urban water, sanitation and hygiene (WASH) program, known as IMAGINE. IMAGINE aims to reduce diarrhea in children under five and to reach 1 million beneficiaries in urban centers in Eastern DR Congo by 2019. It seeks to simultaneously improve the availability of, access to, management of, and proper utilization of WASH resources to ensure sustained health impacts. As part of an integrated approach, a multifaceted behavior change strategy including radio campaigns, integrated care groups with the Ministry of Health, and participatory theater is underway. Behavior change is cross-cutting and not only targets key hygiene behaviors linked to child health, but also promotes behaviors related to the other components of IMAGINE including good governance, gender, service provision, and infrastructure. At the base of the BCC campaigns are formative research, ensuring that our messages, materials, lessons, and tools based on local research that identified attitudes, perceptions, and behavioral determinants. Your feedback, peer review, and inputs will be very much welcomed during this session.

By the end of this informal session, participants will have:

- Identified strengths and challenges in implementing integrated care groups in an urban setting.
- Discussed the utilization of barrier analyses results in multiple behavior change channels in an urban WASH setting.
- Recommended new ideas and provide peer review on the current approach used by IMAGINE.

BabyWASH: Integrating WASH, Nutrition, MNCH, and ECD to Reach Mothers and Children Under Two

Thursday, May 19 | 12:30pm – 2:00pm | Multnomah

Kristie Urich, World Vision International

There is increased focus on water, sanitation, and hygiene (WASH) as a key missing piece in health programming. Improved WASH conditions during pregnancy and childbirth can reduce maternal and newborn mortality and morbidity, and healthy WASH conditions and behaviors within a young child's feeding and play areas can help to prevent environmental enteric dysfunction, leading to a reduction in stunting. Yet, the practice of systematic integration between WASH, maternal newborn and child health, nutrition, and early childhood development remains hindered on multiple levels, including policy, advocacy, financing, research and programmatic implementation. Acknowledging that the Sustainable Development Goals

(SDGs) encourage more cross-sector collaboration, World Vision initiated the BabyWASH Coalition to provide guidance and focus on the lack of integration in the First 1000 Days. This session will present World Vision's current work on BabyWASH, the purpose and work of the BabyWASH Coalition, and invite input and further involvement.

By the end of this session, participants will have:

- Understood the research and rationale for an integrated approach to maternal and child health in the First 1000 Days.
- Learned the purpose and current work of the BabyWASH coalition.
- Had the opportunity to contribute to BabyWASH efforts through dialogue, discussion, and opportunities for further involvement.

Low-Burden M&E for Nutrition SBC: Brainstorm on Challenges and Methods Using Non-Technical Staff

Thursday, May 19 | 12:30pm – 2:00pm | Crown Zellerbach

Tom Davis, Independent; Jennifer Nielsen, Helen Keller International; Cheryl Combest, URC; Kristina Granger, SPRING, The Manoff Group

This session will be an opportunity to brainstorm challenges and solutions for nutrition social and behavior change (SBC) monitoring that non-technical staff (volunteers and community-level agents) can conduct and use. It will begin with mini-presentations of programs using innovative solutions for dealing with existing challenges. Participants will then be invited to break into groups and discuss their own challenges while collectively brainstorming solutions. Specific topics might include: issues of self-reporting of nutrition practices, trial vs. sustained behavior change, observational methods, difficulty with dietary recall for non-technical staff, and more. Program examples will be presented by Tom Davis on using low quality assurance sampling (LQAS) as a mini-KPC in Mozambique, Jennifer Nielsen from Helen Keller International on modifications to dietary recall questions, Cheryl Combest from URC on monitoring plans for husband schools on nutrition under REGIS-ER in the Sahel, and Kristina Granger on routine monitoring of maternal, infant, and young child nutrition MIYCN behaviors presented through community videos using community volunteers, and MIYCN monitoring forms with illustrations for illiterate volunteers in Guatemala designed by The Manoff Group.

By the end of this session, participants will have:

- Learned about specific program examples using low-burden techniques for monitoring and evaluating nutrition SBC.
- Identified specific challenges to using non-technical staff for M&E for nutrition SBC.
- Brainstormed potential solutions that programs can use for the identified challenges.

Working with Partners to Leverage Resources and Maximize Impact to Achieve Big Results: Lessons from the CORE Group Polio Project and the Gavi Civil Society Network

Thursday, May 19 | 12:30pm – 2:00pm | Weyerhaeuser

Lee Losey, CORE Group Polio Project, Catholic Relief Services; Janine Schooley, PCI; Brenda Hegarty, Catholic Relief Services; Moderators: Meg Lynch, CORE Group Polio Project, Catholic Relief Services; Frank Conlon, CORE Group Polio Project, World Vision

We have seen immense growth in the formation of global, multi-stakeholder coalitions to address large and increasingly complex development issues. The collaborative actions of these coalitions have the potential to extend the reach and multiply the impact of more isolated efforts multifold. The potential for bigger results cannot, however, be uncoupled from more complex challenges in the governance and management of such collaborative efforts. Join the CORE Group Polio Project and the Gavi Civil Society Network as they share their experiences in convening coalitions of civil society organizations within larger global health partnerships – the Polio Eradication Initiative and the Gavi Vaccine Alliance, respectively. The group will discuss the strategies, advantages, and challenges of working in coalitions as well as consider other global health issues that could benefit from similar structures and strategies.

By the end of this session, participants will have:

- Understood the structures and strategies of two coalition projects, the CORE Group Polio Project and Gavi CSO Network.
- Discussed the advantages, in terms of resources and outcomes, of working in large coalitions.
- Discussed lessons-learned from a perspective of NGO coalition convener and global coalition partner.
- Considered other global health issues beyond polio eradication and routine immunization that could benefit from similar coalition approaches.

WORKING GROUP TIME | 2:00PM

Child Health Working Group

Thursday, May 19 | 2:00 – 3:30pm | Multnomah

This session will build on the work conducted on Wednesday to identify critical child health technical or programmatic challenges, solicit targeted feedback from colleagues working in similar situations, and identify opportunities to work across organizations to solve common challenges time-bound task forces.

Community-centered Health Systems Strengthening Working Group

Thursday, May 19 | 2:00 – 3:30pm | Crown Zellerbach

Co-Chairs: Megan Christensen, Concern Worldwide; Alfonso Rosales, World Vision

The Community-centered Health System Strengthening (CCHSS) Working Group invites all those who are interested to join us. We welcome those who are simply interested in the topic or guest speakers, anyone looking to join a new Working Group, and individuals who are passionate and have experience with health systems strengthening. We will be hosting two guest speakers, one during each session. A guest from USAID will present the new community health framework and lead a discussion. In addition, we will have a guest from USAID's Maternal and Child Survival Program present a working document that is a joint effort with WHO on design and implementation principles for community-oriented health interventions. They have approached the CCHSS Working Group and are seeking feedback from the perspective of practitioners. A portion of the time will also be used to share the workplan and solicit input from members. Our goal is to make the time participatory, thought-provoking and fun. We looking forward to seeing you.

Monitoring and Evaluation; Nutrition; and Social and Behavior Change Working Groups

Thursday, May 19, 2016 | 2:00 – 3:30pm | Mount St. Helens Ballroom

Co-Chairs: Monitoring and Evaluation - Claire Boswell, The TOPS Program, Food for the Hungry; Dora Curry, CARE; Nutrition - Jennifer Burns, International Medical Corps; Maureen Gallagher, Action Against Hunger; Justine Kavle, USAID's Maternal and Child Survival Program, PATH; Social and Behavior Change - Lenette Golding, Alive & Thrive, FHI 360; Debora Freitas, Chemonics International; Joseph Petraglia, Pathfinder International

This time will be devoted to a theme of integration and collaboration among the Nutrition, SBC and M&E working groups. During the first 40 minutes, Sally Abbott, USAID Bureau for Food Security Nutrition Advisor, will present to the Nutrition, M&E, and SBC working groups on the new USAID nutrition indicators. These indicators will be used with all nutrition programs overseas funded by the US Government. This includes Feed the Future, Food for Peace, Global Health and others. This small group of new indicators is part of a drive to focus measurement on the end goal: improved nutrition. USAID would be very pleased to have implementer discussion on these indicators as they roll out. Given that the USG Multi-sectoral Nutrition Strategy is multi-faceted, participation from Nutrition, M&E, and SBC would be very useful in the discussion. Following the presentation, there will be 20 minutes for providing feedback to Sally on implementing partners' perspective of these indicators in programming. During the last 30 minutes of the working group time, an exercise will take place to brainstorm ways to enhance collaboration among our working groups. The outcome will be a list of activities that feed into work plans on ways to strengthen integration – both across technical sectors and of M&E and SBC into integrated programming.

Reproductive, Maternal, Newborn and Adolescent Health Working Group

Thursday, May 19 | 2:00 – 3:30pm | Weyerhaeuser

Co-Chairs: Corinne Mazzeo, USAID's Maternal and Child Survival Program, Save the Children; Cindy Uttley, Samaritan's Purse; Mychelle Farmer, Jhpiego; Regina Benevides, E2A Project, Pathfinder International

The RMNAH Working Group will focus on a broad range of health concerns related to sexual and reproductive health, maternal and newborn health, and adolescent health. Within the RMNAH Working Group, there are two task forces: Maternal and Newborn Health (MNH), and Sexual and Reproductive Health and Adolescents (SRH+A). This session will include a joint Hot Topics session that will provide members with the opportunity to discuss emerging health crises and policy developments affecting RMNAH.

PLENARY | 4:00PM | MOUNT ST. HELENS BALLROOM

Sustainable Health - A New Vision for Programming

Debora B. Freitas Lopez, Chemonics; Charlene McGee, Multnomah County Health Department Health Equity Initiative; Jonathan Fink, Portland State University; Moderator: Beth Outterson, Medical Teams International

This session focuses on what sustainable health means, and how multi-dimensional approaches can catalyze our efforts to improve and sustain health. As the world's population continues to grow and merges into urban centers, and as global warming looms, we need to find collaborative solutions both locally and globally in order to be more efficient and more resilient. We will start with a global example in the developing world, and then move toward local examples that promote social and behavior change and sustainable living.

Debora B. Freitas López, will share how a multifaceted coastal city adaptation project in Mozambique is integrating urban planning, governance, climate change adaptation, and social and behavior change approaches to help coastal cities become climate-smart, resilient, and healthier. Charlene McGee will share the Multnomah County Department of Health's Equity Initiative ecological model for social and behavior change. And Jonathan Fink from Portland State University will discuss how a series of unique partnerships in the Portland has turned Portland from one of the most polluted cities in the US to one of the most livable "smart cities."

By the end of this session, participants will have:

- Explained how multi-dimensional programming can promote sustainable health.
- Described how an ecological model can help increase access and promote positive behaviors for disadvantaged populations.
- Described local and global examples of ways that multi-dimensional programs and partnerships can improve and sustain health.

HALF-DAY WORKSHOPS | 8:30AM

Comprehensive Multi-Dimensional Programming for Nutrition

Friday, May 20 | 8:30am – 12:00pm | Mount St. Helens Ballroom

Sally Abbott, USAID Bureau for Food Security; Edye Kuyper, INGENAES Project; Jessica Bateman, Catholic Relief Services; Samantha Clark, SPRING, JSI Research & Training Institute; Moderator: Gwyneth Cotes, SPRING, Helen Keller International

During this session, participants will start by learning more about USAID's multi-sectoral nutrition strategy and policy setting for programming. This will be followed by an international café where various tools for multi-dimensional programming will be shared which will allow some small group discussions. Partners will have a chance to also learn about different approaches to coordinating multi-dimensional nutrition programs across varying contexts in Asia, Latin America and Africa. The key outputs of the session will be a series of lessons learned and recommendations based on the rich discussions and sharing by participating partners.

By the end of this session, participants will have:

- Gained a better understanding of the components and frameworks underpinning USAID's Multi-sectoral Nutrition Strategy.
- Been exposed to and discussed approaches and tools used for nutrition multi-dimensional programming.
- Learned about different country and partner experiences in nutrition related programming, discussed lessons learned and agreed on key recommendations.

Civil Society Engagement: Practical Country Platform Solutions to Reach Every Woman Every Child

Friday, May 20 | 8:30am – 12:00pm | Multnomah

Nazo Kureshy, USAID; David Shanklin, CORE Group; Judy Lewis, University of Connecticut; Blanca Lomeli, PCI; Brenda Hegarty, Catholic Relief Services; Lee Losey, CORE Group Polio Project, Catholic Relief Services

This session builds on a high level USAID consultation held in Washington, DC on January 14, 2016. It uses the resulting "Common Frame of Action for Civil Society Engagement" to discuss how to sustainably end preventable mortality, and enable women, children and adolescents to enjoy good health and thrive. The framework included a set of recommendations for immediate attention by global actors, governments, international NGOs, and local civil society. An overview of the Frame of Action, a recent civil society engagement (CSE) literature review and an analysis of key structural components of consortia will be presented. Several CSE models of secretariats and consortia at the country level will be presented and analyzed for strengths and challenges using the structural analysis. Small group work will develop recommendations for best practices for CSE to promote Every Woman Every Child (EWEC) at the country level. These findings will be summarized and disseminated.

By the end of this session, participants will have:

- Explained the rationale and need for civil society engagement (CSE) for EWEC.
- Identified key structural elements, strengths and challenges of major models of consortia/secretariats for effective country collaboration on RMNCAH programming.
- Formulated a best practices model for CSE engagement, coordination and evaluation in support of national plans for EWEC.

Digital Storytelling: Using Video for Education and Behavior Change

Friday, May 20 | 8:30am – 12:00pm | Weyerhaeuser

Michelle Shapiro, CORE Group; Adrienne Todela, The TOPS Program, CORE Group; Kristina Granger, SPRING, The Manoff Group

Video is a powerful mechanism to educate people and motivate changes in behavior, particularly in development settings. Locally produced videos featuring familiar villagers as actors are increasingly used to encourage behaviors such as hand-washing, breastfeeding, irrigation techniques, etc. In this hands-on session, you will learn all the steps to producing your own short educational film. Take on the role of director, writer, or videographer, and go through the actual process of brainstorming, storyboarding, and filming in small groups. This broad overview of video production is open to all – no previous experience required.

SESSION DESCRIPTIONS | FRIDAY, MAY 20

By the end of this session, participants will have:

- Learned why videos are useful for education and behavior change.
- Developed a basic understanding of video storytelling principles.
- Gained first-hand experience storyboarding and filming their own videos.

SOCIAL NETWORKING TOUR

Columbia River Gorge Tour

Friday, May 20 | 12:00 - 5:00pm

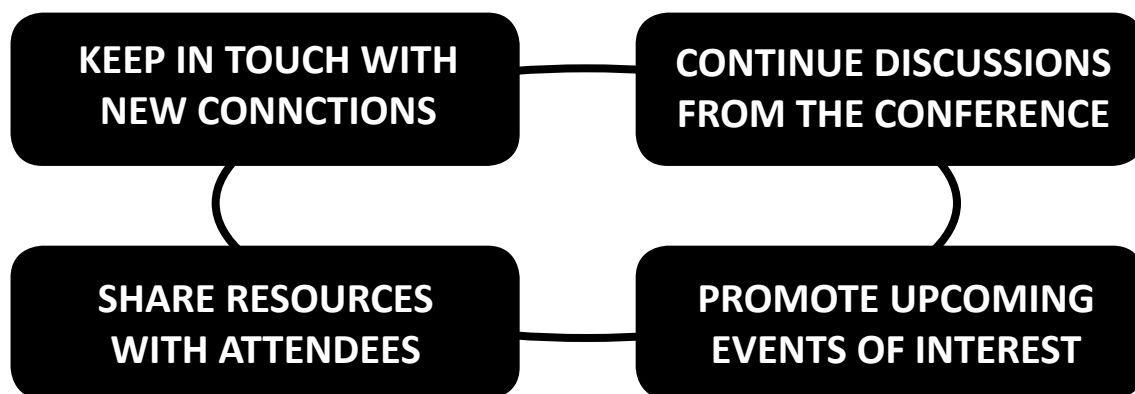
Drive along the Columbia River through quaint towns to see the majestic Multnomah Falls! Other sites along the way include Crown Point and Bonneville Lock and Dam, as well as views of Mount Hood, Mount St. Helens, and Mount Adams.

Meet in the hotel lobby at 12:00pm, directly following the morning sessions, to board the bus. The tour includes lunch. You can register for the tour anytime during the conference at the Registration table.

KEEP IN TOUCH AFTER THE CONFERENCE

As an attendee of this conference, you are already a member of the group
"Achieving Health for All Through Multi-dimensional Approaches"
in CORE Group's online social community!

Through the group you can...



Log in using the same credentials from your conference registration at
<http://bit.ly/GHPC16Group>.



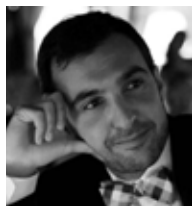
Sally Abbott, Nutrition Advisor, Bureau for Food Security, USAID

Dr. Sally Abbott is a Nutrition Advisor in the Bureau for Food Security at USAID. Prior to this role, she was a Nutrition and Food Security Advisor in the Bureau for Global Health. She has been at USAID since 2010. Dr. Abbott serves as a member of the Agency's nutrition team, provides strategic leadership and oversight of agency nutrition programs, and provides technical assistance to field missions on the design and implementation of comprehensive nutrition programs. Prior to coming to USAID, Dr. Abbott worked for various NGOs in a consulting capacity. Previously she spent four years at the Feinsein International Center at Tufts University. She holds a Doctorate of Philosophy and a Master of Science from Tufts University Friedman School of Nutrition and Science Policy.



Mohammed Ali, Program Manager - Health, Catholic Relief Services Ghana

Mohammed Ali is the Health Program Manager for CRS Ghana. Mohammed trained as a professional teacher and received his BSc in Community Nutrition from the University for Development Studies in Tamale. He also earned an MSc in Human Nutrition and Dietetics from the University of Ghana, Legon. In September 2009, Mohammed pursued higher education in the Netherlands and graduated with a Masters of Public Health. He returned to CRS Ghana as the Health Advisor to the Country Program and Technical Lead for the USAID-funded SHARPER HIV/AIDS project. He led two successful health proposals funded by the USG starting in 2011 (the End in Africa Neglected Tropical Disease and Encouraging Positive Practices for Improving Child Survival-EPPICS) and two others funded by the Helmsley Charitable Trust in 2013, which significantly expanded CRS Ghana's health programming.



Jose Luis Alvarez Moran, Head of Technical Development, Action Against Hunger UK

Dr. Jose Luis Alvarez is the Head of Technical Development at Action Against Hunger UK (ACF-UK). He is a Public Health Epidemiologist, with a PhD from the University Rey Juan Carlos in Madrid. Dr. Alvarez is responsible for supporting all technical activities implemented by ACF-UK, most of which are centered around nutrition health information. He also leads the Global Nutrition Cluster's working group on Information and Knowledge Management and collaborates in global initiatives such as the Global Nutrition Report. Before taking up the role of Senior Technical Advisor, he worked as Coordinator of the Coverage Monitoring Network (CMN), an inter-agency platform designed to increase the availability of nutrition coverage information. He has also worked as an advisor to NGOs in Mali, Benin, Philippines, Haiti and Pakistan. Dr. Alvarez is based in London, is fluent in Spanish, English and French and has some knowledge of Chinese.



Jessica Bateman, Award Management Officer, Catholic Relief Services

Jessica Bateman is an agricultural development and public health professional with eight years of experience in sustainable agriculture and community food security and nutrition programs in Africa, Asia, Latin America and the U.S. She has experience working with both governmental agencies and non-governmental organizations in the design and implementation of child nutrition and food security projects in the U.S. and abroad. Ms. Bateman joined CRS as an International Development Fellow in Zambia. Following the fellowship, she joined the Feed the Future Zambia Mawa Project as the Nutrition Technical Quality Coordinator. As technical lead for Mawa's nutrition activities, she supported positive behavior change for improved household nutrition in Zambia's Eastern Province. Upon relocating to the U.S., Ms. Bateman continued to support Mawa Project by leading the development of the integrated agriculture/nutrition training materials. Ms. Bateman earned a Master's of Science in Agricultural and Applied Economics, a Master's of Public Health, and a Global Health Certificate from the University of Wisconsin-Madison. She is currently an Award Management Officer with CRS' Institutional Advancement and Donor Engagement Department.



Paulina Bayiwasi, District Director of Ghana Health Services, East Mamprusi Health Directorate - Gambaga, Ministry of Health, Ghana

Paulina Bayiwasi holds an advanced certificate in Public Health Nursing, after training as a Midwife at Tamale Nurses Training College. She has been the Government District Director of Health for the East Mamprusi District for the past five years, after serving as the District Public Health Nurse for three years. Paulina is the GHS Focal Person during the design stage of the USAID funded Maternal and Child Survival Program (Encouraging Positive Practices for Improving Child Survival (EPPICS)). As the District Director, she led the field implementation team to galvanize different resources and strategies to inform a multi-dimensional approach to improving maternal and child health indicators in her district. The East Mamprusi District under her leadership moved from worst performing district in 2010 to best performing in 2014, among 26 other districts in northern Ghana. The East Mamprusi District has become a success story that is being showcased at the local, regional and national levels.

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Renuka Bery, Senior Program Manager, WASHplus, FHI 360

Renuka Bery is a seasoned, public health professional adept at developing, managing and technically advising international health and communication programs. Technical areas of experience include: water and sanitation, maternal, newborn and child health, malaria and infectious disease and nutrition. She is currently senior program manager at FHI 360, directing WASH integration efforts focused on improving practices and therefore health. She has demonstrated experience leading programs that yield results. She directed a WASH-HIV/AIDS program in Kenya for 5 years that also emphasized inclusive sanitation. Ms. Bery currently directs a program in Burkina Faso integrating WASH and neglected tropical diseases and also oversees the WASH and Nutrition activity in Mali. She is a member of Clean, Fed & Nurtured community of practice that links WASH, nutrition and early childhood development for thriving children. She is a graduate of Wesleyan University and has an MPH from Columbia University.



Claire Boswell, Specialist for Social and Behavioral Change, The TOPS Program, Food for the Hungry

Claire Boswell, MHS, is a Specialist for Social and Behavioral Change with the TOPS Program. With over 15 years of experience in international maternal and child health programming, her particular interest is developing and applying practical tools for building capacity of field staff in behavior change and monitoring and evaluation.



Jennine Carmichael, Deputy Director, Accelerating Strategies for Practical Innovation & Research Economic Strengthening (ASPIRES), FHI 360

Jennine Carmichael, MA, has over 15 years of experience in international development, focused in economic development and gender, and including field experience in Eastern Europe. Ms. Carmichael is Deputy Director of ASPIRES, a 5 year, \$40 million associate award funded by USAID, PEPFAR and DCOF to advance evidence-based, gender-sensitive programming and learning to strengthen the economic security of highly vulnerable individuals and families, including orphans and vulnerable children (OVC) and key populations at high risk of acquiring HIV. Ms. Carmichael holds a Master of Arts degree in Gender and Development from the University of Melbourne.



Lee Po Cha, Executive Director, Immigrant & Refugee Community Organization (IRCO)

Lee Po Cha, MBA, became IRCO's Executive Director in April 2015. He has served IRCO since 1981 in a multitude of leadership roles, most recently as Associate Director and Director of IRCO Asian Family Center, which he helped found in 1994. A tireless advocate, Lee provides a voice for Oregon's increasingly diverse communities through his service on numerous commissions and boards, including the Governor's Commission on Senior Services, co-chair of the New Portlander Policy Council, the Home for Everyone Board, past president of the All Hands Raised Board, past president of the Hmong American Community of Oregon, and co-founder of the Coalition of Communities of Color. A former Hmong refugee from Laos, Lee came to Oregon in 1978 and received his MBA from Marylhurst University. He embodies the vision of IRCO as an organization committed to helping each immigrant and refugee family achieve their full potential in their new home.



Molly Christiansen, Director Advocacy and Impact, Living Goods, @mchristiansen

Molly is Director of Advocacy and Impact at Living Goods. She was part of the early team that designed and built Living Goods' innovative community health worker model in Uganda that has since been shown to reduce under five child mortality by over 25%. Molly leads Living Goods' impact and evaluation strategy as well as its advocacy team, building awareness about Living Goods' proven community health model and advocating for increased investment in effective and lasting community health worker systems globally. Previously, Molly launched and directed Living Goods Partnerships unit, helping other organizations replicate Living Goods' model in new markets. Prior to Living Goods, Molly consulted with Vision Spring and Hindustan Unilever's Project Shakti in India, and worked with Acumen's health and water portfolios. She also directed community development programs for ProWorld in Peru and managed a rural sanitation program in Mexico. Molly earned an MBA/MPH from the University of Michigan and graduated Magna Cum Laude from Brown University with a BA in Community Health.

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Samantha Clark, Food Security and Nutrition Specialist, SPRING, JSI Research & Training Institute

Samantha Clark is a Food Security and Nutrition Specialist with the SPRING Project. She has been with SPRING since 2011, providing technical and operational support to build evidence and capacity to better link nutritional outcomes with agriculture programming across SPRING and Feed the Future countries worldwide. Prior to joining JSI, she served as a Peace Corps Volunteer in Kazakhstan and acted as the Director of Outreach and Support for Early Learning NH, a nonprofit committed to ensuring that all New Hampshire children have the opportunity to reach their full potential. She holds a Masters of Public Health from Johns Hopkins Bloomberg School of Public Health, with a focus on maternal and child health.



Frank Conlon, Director, CORE Group Polio Project, World Vision

Frank Conlon, MS, has extensive management experience, most recently as Director of the CORE Group Polio Project. Under his leadership, the program has expanded from 3 to 7 countries, all of which have become polio free. CGPP has attracted funding from the Gates Foundation, and has grown from \$6M to \$15M per year. He has excelled as Chief of Party in Tanzania, Haiti, Nigeria, and Kenya for a consortium (AIDSRelief) that provided HIV care and treatment to under-served populations. Mr. Conlon was executive director of a growing international organization (Partners for Development), where he established its first-ever multi-year strategic plan and budget. Along with daily management, Mr. Conlon has experience handling the fluctuating and sometimes urgent nature of field work – as a leader in Lutheran World Relief in Africa, and as Peace Corps Country Director of the Comoros Islands and Gabon. Mr. Conlon has a strong record of piloting projects, establishing standards, mentoring, and collaborating with local and national government and non-government representatives, volunteers, partner agencies, donors, and international media. He is fluent in French and Hausa, and has both a BS and MS in Forest Management from the University of Maine.



Chelsea Cooper, Social and Behavior Change Communication Advisor, USAID's Maternal and Child Survival Program, Jhpiego, @ChelsMCooper

Chelsea Cooper serves as Social and Behavior Change Communication (SBCC) Advisor for Jhpiego on the USAID-funded Maternal and Child Survival Program (MCSP). She provides cross-cutting SBC support for the project, with a special focus on integrated service delivery and family planning. She co-chairs the interagency Family Planning and Immunization Integration Working Group. Prior to MCSP, Ms. Cooper worked on the Maternal and Child Health Integrated Program (MCHIP) where she provided SBCC technical support for demonstration projects and studies focused on integrated service delivery in Liberia, Kenya, Tanzania, Bangladesh, Egypt, and Yemen. Prior to working for Jhpiego, Ms. Cooper worked for the American Refugee Committee where she managed a participatory communication program, "Through Our Eyes." She has a Master of Health Science degree in International Health with a focus on Social and Behavioral Interventions from Johns Hopkins School of Public Health.



Rita Cooper, Project Lead, Engineers Without Borders: Portland Maine Professionals

Rita is a native Mainer and graduated from the University of Maine with a Bachelor's Degree in Civil and Environmental Engineering with a focus in water resources and environmental engineering and a minor in Anthropology. For six years Rita has been an active member of Engineers Without Borders (EWB) and has led teams on construction projects in Honduras and Ethiopia. As a student member, she traveled to Honduras for a sanitation project and led the construction of a septic tank and leach field system for a community of about 100 people. As a professional EWB member, she continued her passion for international development and engineering with the EWB chapter in Portland Maine where she served as the project lead for the Community Project in Ethiopia. Rita has led the team during the construction of the first phase of the project which includes the school footings, foundation, and grade beams. She is a Project Engineer at Hydro International where her work focuses on industrial and municipal storm water treatment.



Gwyneth Cotes, Director, Global Initiative, SPRING, Helen Keller International

Ms. Cotes has spent the past 13 years supporting, designing, and leading health and nutrition programs around the world, with 9 years spent living and working in Malawi, Sudan, Ghana, and Eritrea. She has a wide range of experience in the health and nutrition sectors, spanning projects focused on emergency nutrition, child survival, infant and young child feeding, social and behavior change, adolescent reproductive health, and advocacy. In Malawi, Ms. Cotes was responsible for leading the development of national guidelines for management of acute malnutrition, and also helped to establish a national civil society alliance for nutrition. She has a strong background in program management, and most recently worked as the Country Director/Programs Director for Concern Worldwide in Malawi, where she was responsible for a

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multi-sectoral portfolio of development and emergency relief programs encompassing health, nutrition, agriculture, education, and social protection. Gwyneth holds an MPH in International Health from Tulane University.



Dora Ward Curry, Senior Technical Advisor, CARE

Dora Ward Curry currently serves as Senior Advisor for Program Effectiveness in CARE-USA's Sexual, Reproductive and Maternal Health team, where she leads monitoring and learning efforts for program effectiveness in crisis-affected settings. For five years, she led CARE's global technical support to the CORE Group Polio Project (CGPP), which coordinated civil society organization's support to the Global Polio Eradication Initiative. Shortly after receiving her Master's of Public Health from Emory University, Ms. Curry was involved in the early stages of the CGPP and later implemented child health programming in Latin America and Southern Africa, including for a USAID Child Survival Grant child health and HIV/AIDS project. She has had the privilege to work with leaders and communities in a wide range of settings from rural Kwa-Zulu Natal, South Africa, to refugee camps and host communities in southern Chad, and from flood-affected, rural communities in Pakistan to urban slums in Angola. Atlanta, Georgia, USA is her home base and her hometown.



Mary DeCoster, Senior Specialist for Social and Behavioral Change, The TOPS Program, Food for the Hungry, @MaryDeCoster

Mary DeCoster, MPH, MLS, IBCLC, Senior Specialist for Social and Behavioral Change Programs, Food for the Hungry, is the technical lead for SBC programs for The TOPS Program, working to strengthen food security implementer capacity to address social and behavior change programming. She has over twenty years of experience in behavior change in international and domestic programming. She has expertise leading trainings of trainers, and developing training materials and curricula.



Antony Duttine, Rehabilitation Advisor in Global Health, Handicap International, @antduttine

Antony Duttine is Handicap International's Rehabilitation Advisor in Global Health, including on aspects around road safety. Antony has worked in international development and humanitarian contexts since 2006 in both Africa and Asia. Prior to this, he worked as a physical therapist within the UK health system. He holds a Masters in Development Management and is currently pursuing his Doctorate in Public Health from the London School of Hygiene and Tropical Medicine. Antony currently serves as a board member of CORE Group.



Jonathan Fink, Vice President for Research and Strategic Partnerships, Portland State University, @jonathanfink

Jonathan Fink is Vice President for Research and Strategic Partnerships and Professor of geology at Portland State University, where he helps faculty and administrators connect the university's research with the needs of civic, non-profit and private sector partners, including the City of Portland, Intel Corporation, and the Oregon Health and Sciences University. Before moving to PSU in 2010, Dr. Fink spent 30 years at Arizona State University in a number of academic and administrative roles, including vice president for research, and director of their urban-oriented Global Institute of Sustainability. While his primary research expertise is on volcanic eruptions, over the past 15 years he has turned much of his academic and administrative attention to urban systems. Dr. Fink got his PhD from Stanford University and is an elected fellow of the American Association for the Advancement of Science and the Geological Society of America.



Tim Frankenberger, President, TANGO International

Tim is the President and co-founder of TANGO International (12 years) and has over 30 years of experience in international development activities. He was previously the Senior Food Security Advisor and Livelihood Security Coordinator at CARE for six years. Prior to this, he was a farming systems research specialist at the University of Arizona for eight years. He has published numerous articles on household food security and is considered an expert on livelihood approaches. He received a BS in Anthropology from Iowa State University and an MA in Anthropology with a minor in Agricultural Economics from the University of Kentucky. Tim also carried out his doctoral studies at the University of Kentucky in Anthropology with a minor in Agricultural Economics.

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Paul Freeman, Independent

Paul Freeman DR. PH(Hopkins), MBBS, MHP(ED) MPH (TH) has over 30 years of experience in the design, implementation and evaluation of national and regional health programs, and human capacity building from national and university to community levels. He has worked in 14 developing countries. He is an Independent consultant and Clinical Assistant Professor at the University of Washington. He was elected Chair of the International Health Section of the American Public Health Association in 2012.



Debora B. Freitas López, Director, Global Health Division, Chemonics, @Chemonics, @debofreitas

Debora B. Freitas López, MS, has over fifteen years of experience in global health. She has led or taken part in the development, implementation, management, and monitoring and evaluation of multi-level initiatives for social and behavioral changes in health and in other sectors, such as agriculture, climate change, and education. Through her work and consultancies, she has provided support in establishing sound SBC initiatives for specific social issues and strengthened the capacity of stakeholders, decision-makers, policy-makers, among others, so that they were better-prepared to address challenges in their respective nations. As Director in the Global Health Division of Chemonics International, she serves as the SBC point person, providing leadership and technical expertise and support to current and future projects to ensure technical integrity. She has served on various local and national boards, including most recently as a member of the Publications Board of the American Public Health Association.



Lynette Friedman, Independent

Lynette Friedman, MPH, is an independent consultant committed to strengthening organizational collaboration through facilitating strategic planning, designing and facilitating effective meetings, developing and conducting effective training workshops, facilitating collaborative tool development and instructional design, designing effective social and behavior change interventions, and coaching for developing effective coalitions and working groups. Lynette was previously the Deputy Director of the CORE Group, where she supported the member organizations to share effective community-based approaches, facilitated organizational collaboration to reach more children, and brought member's community-based perspectives into policy dialogues. Lynette's background includes management of community development and community outreach programs with the Texas Department of Health, facilitation of health planning efforts with VISTA programs in Texas, and development of organizational partnerships at international and U.S. levels. Lynette is a certified practitioner in the Myers-Briggs Type Indicator.



Maureen Gallagher, Senior Nutrition & Health Advisor, Action Against Hunger US

Maureen Gallagher is the Senior Nutrition & Health Advisor at Action Against Hunger US, based in New York. She is a public health specialist with an MSc in Social Policy and Planning, specializing in health & nutrition policy and programming. She has been working in nutrition programming for the last 15 years in Niger, East Timor, Uganda, Chad, DRC, Burma, Sudan and Nigeria.



Lenette Golding, Program Director, Alive & Thrive/Nigeria, FHI 360

Lenette's work spans sectors such as infant and young child feeding, advocacy, interpersonal communication, community mobilization, mass media, and qualitative research. She is an active leader in CORE Group's Social and Behavior Change working group and is an assistant adjunct professor for global health at Emory University. She also sits on the review board of several health behavior peer journals and is presently helping edit a special edition of *Frontiers in Public Health* on "Participatory Community Approaches for Social and Behavior Change." She has a PhD in Mass Communication from the University of Georgia, an MPH from Emory University, and is a returned Peace Corps volunteer. She is interested in how storytelling and mediated communication environments can be used to improve decision making, enhance the user experience, influence group outcomes, and support adaptive and healthy behaviors.



Kristina Granger, Social and Behavior Change Communication Manager, SPRING, The Manoff Group

Kristina Granger is Social and Behavior Change Communication (SBCC) Manager on the USAID-funded SPRING project with the Manoff Group. She has worked on designing, adapting and implementing a number of Infant and Young Child Feeding (IYCF) training packages being used in Haiti, India, Niger, Burkina Faso, Nigeria, and Bangladesh; the development of SBCC program strategies; the testing of a community media approach to nutrition SBCC; and has led TIPs research on WASH and nutrition in Sierra Leone. Kristina has a diverse background in marketing and com-

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munications, project management, and infant and young child nutrition. Before joining SPRING, Kristina worked briefly with the MCHIP project and was Senior Associate at Devex. Kristina also designed and conducted IYCF research in Guatemala with PCI as well as conducted program implementation and design research for a program working with teens in the US and in Mexico City for the Population Council. Kristina has her MPH in Global Health Communication from George Washington University.



Bobbi Gray, Research Director, Freedom From Hunger

Bobbi Gray, Research Director, joined Freedom from Hunger in 2004. She works closely with the organization's partners, which includes over 180 microfinance institutions and non-governmental organizations who promote savings groups across Latin America, Southeast Asia, and Africa, to determine solutions for measuring and assessing the social performance and impacts of integrated financial and non-financial services for adults and youth. Recently, she led a project to identify and test health outcome indicators that financial service providers could use to monitor client health outcomes over time. Bobbi has been an active member of the Microfinance CEO's Working Group sub-committee on social performance management and she is a member of the Technical Committee for Truelift, which is a global initiative that pushes for accountability in pro-poor development. In addition, she facilitates the Health and Market Development (HAMED) working group at the Small Enterprise Education and Promotion Network (SEEP). She holds a Master of Public Administration degree in International Management from the Monterey Institute of International Studies and speaks both French and Spanish.



Lia C. Haskin Fernald, Associate Dean for Research, Professor, Public Health Nutrition, Professor, Community Health and Human Development, University of California, Berkeley School of Public Health

Dr. Fernald's work has focused primarily on how inequalities in socio-economic position contribute to growth and developmental outcomes in mothers, infants and children, and on how interventions can address socio-economic and health disparities. Much of her work for the past decade has centered on looking at the effects of interventions (e.g. conditional cash transfer programs, parenting programs, microcredit interventions, and community-based nutrition interventions) on child development and maternal mental health, particularly focused on low and middle-income countries. She recently worked with a team of authors to write a review for The Lancet about strategies to address poor development among infants and children in low and middle-income countries.



Brenda Hegarty, Technical Advisor, Catholic Relief Services

Brenda Hegarty supports the Gavi Civil Society Organization Constituency, through Catholic Relief Services, to strengthen national civil society networks for health system strengthening around the world. She holds Masters in International Studies and Nutrition and a Graduate Certificate in Global Health. She previously worked in policy and advocacy for UNAIDS and as a Peace Corps Volunteer in Uzbekistan and Uganda.



Rachel Hower, Senior Technical Advisor for Health and Nutrition, World Relief, @WorldRelief

Rachel has been part of the World Relief Health Team for 11 years. As Senior Technical Advisor for Health and Nutrition, Rachel provides technical assistance to maternal and child health, nutrition and disaster response programming. While she supports many aspects of World Relief's health work, Rachel's particular expertise is in Care Groups, community based nutrition programming and monitoring and evaluation.



Susan Igras, Senior Technical Advisor, Institute for Reproductive Health, Georgetown University

Ms. Igras has supported NGOs and Ministries over the past 25 years to design and evaluate programs aiming to improve adult and adolescent/youth sexual and reproductive health, gender equality, and social wellbeing. She is currently a Senior Technical Advisor at IRH, overseeing the Tekponen Jikuagou project in Benin and leading the scale up practice and capacity building stream of the Passages Project, which aims to contribute to understanding and measurement of transformative norms interventions that lead to improved adolescent sexual and reproductive health.



Esther Indriani, Regional Health & Nutrition Advisor, South Asia and Pacific, World Vision International

Esther holds fifteen years of experience in health and nutrition programming with World Vision International. In the last five years, she has served as the Regional Specialist for Maternal Child Health and Nutrition, overseeing and providing technical support to various health and nutrition programs in the South Asia and Pacific Region: India, Indonesia, Bangladesh, Sri Lanka, Nepal, Timor Leste, and the Pacific. She has extensive experience in the Design, Monitoring and Evaluation of various health and nutrition programs across Asia, capacity building planning and

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implementation, coordination of project management and implementation. Her subjects of interest include community development, sustainable development, multi-sectoral approaches, capacity building and quality improvement. Esther earned a Master of Public Health Degree with honors from Maastricht University and also holds a post graduate degree in Food Security and Nutrition with distinction from Wageningen University, both on full scholarship from the Netherlands government's STUNED programs.



Enric Jané, Program Officer, Integrated Delivery, Global Development Program, Bill & Melinda Gates Foundation

Dr. Enric Jané is a Program Officer in the Integrated Delivery team, Global Development, since 2012. His work is focused mostly on strengthening of primary health care in sub-Saharan Africa, with a particular focus in Burkina Faso, Nigeria and Tanzania. Prior to his appointment at the Bill & Melinda Gates Foundation, Dr. Jané held positions as Special Advisor to the Director-General at the Barcelona Institute for Global Health (ISGlobal) and Scientific Coordinator at the Manhica Health Research Center in Mozambique. Enric holds a MD degree, a BSc and a PhD in Physics from the University of Barcelona, and a MSc in Biomedical Engineering from Columbia University.



Mary Carol Jennings, Chief Resident, General Preventive Medicine Residency, Johns Hopkins Bloomberg School of Public Health

Dr. Jennings is Chief Resident and faculty of the General Preventive Medicine Residency at the Johns Hopkins Bloomberg School of Public Health. She is also a post-doctoral research fellow in International Health working in implementation science, quality of care metrics, and community-based primary health care and maternal health. She holds an MPH from Johns Hopkins and an MD from the University of South Carolina, and has practiced in the U.S., the Philippines, Kenya and Tanzania.



Ari Johnson, Chief Executive Officer, Muso, @musohealth

Ari Johnson, MD is co-founder and CEO of Muso and Assistant Professor at the University of California San Francisco Global Health Sciences. Ari trained at Harvard Medical School and completed his residency at the University of California San Francisco. A Draper Richards Kaplan Fellow, Ari has conducted research at the National Institutes of Health, the International Health Institute, the Medical Research Council of South Africa, Brown University, Harvard University, and the Kuvim Center for the Study of Infectious and Tropical Diseases in Jerusalem. He has published peer-reviewed articles and essays in the fields of health systems design, healthcare financing, infectious disease, health policy, neurobiology, AIDS, and migration.



Katherine Jones Debay, Assistant Professor, Global Health, Loma Linda University School of Public Health

Katherine (Kate) Jones Debay was a public servant since she was 26, first as a junior epidemiologist with the State of Oregon, then as a Peace Corps Volunteer in Nicaragua, and finally with USAID. A retired USAID Health and Development Officer, she served long term assignments in Liberia, Bolivia, Ecuador, and the Regional Economic Development Services Office for West and Central Africa based in Abidjan, and one of the most "foreign" posts – Washington DC. Her last USAID assignment was managing the Child Survival and Health Grants Program from 1995-2001, through which she met so many of the people still in CORE. Kate is a coach and mentor to multi-cultural teams, organizations and individuals to achieve results and fulfill their potential. In this stage of her life, Kate's ministry is teaching, coaching and mentoring MPH students to prepare them to be excellent global health practitioners and grounded, well balanced, compassionate human beings.



Telesphore Kabore, Advisor for Community Mobilization, USAID's Maternal and Child Survival Program, Save the Children

Telesphore Kabore is an expert in Community-based Programming, Civil Society and Community Capacity Strengthening with a focus on public health, particularly on Maternal Newborn and Child Health. He has over 20 years of experience in providing leadership in Community Mobilization, Training and Program Management to assist Ministries of Health and NGOs to work with communities to establish community-based prevention, nutrition and curative services.

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Colleen Kaleda, Co-Director, The Community Project: Ethiopia

Colleen Kaleda is a writer, college instructor and nonprofit co-founder of The Community Project (CP): Ethiopia. The CP is directed by Colleen Kaleda and co-founder, Angelique Smith, in partnership with two Engineers Without Borders (EWB) chapters — Portland, Maine and Portland, Oregon (Portland State University). They are working on design and construction of a school, latrines, community center, gardens and recreational areas. In Debre Birhan, CP is working with local leaders, a Community Development Committee to provide oversight, the city mayor and administration, local universities and officials from the Ethiopian Ministry of Education. Colleen lives in Portland Oregon, where she and her husband train their 12 dogs, nine of which are a racing sled dog team. Colleen is an adjunct professor at Portland State University teaching about refugees, immigration, poverty and homelessness and working with two local community organizations, Immigrant and Refugee Community Organization (IRCO) and Street Roots. She is also a freelance writer and photographer focused mainly on environmental and cultural topics, both national and international.



Justine Kavle, Interim Nutrition Team Lead, USAID's Maternal and Child Survival Program, PATH, @jkavle

Justine Kavle, PhD, MPH, is the Interim Nutrition Team Lead, for the Maternal and Child Survival Program (MCSP)/PATH. She has expertise and provides technical guidance on maternal anemia, micronutrient deficiencies, infant and young child feeding approaches to address stunting, and the integration of nutrition into other health areas, including family planning and child health for MCSP/PATH. Dr. Kavle provides leadership for nutrition integration into the RMNCH platform in 9 countries, including Democratic Republic of Congo, Egypt, Haiti, Kenya, Malawi, Mozambique, Pakistan, and Tanzania. Kavle was the principal investigator on the USAID- MCHIP Project funded study examining infant and young child feeding and factors associated with stunting in Egypt, in collaboration with the American University in Cairo, the National Nutrition Institute of Egypt, University of North Carolina Gillings School of Global Public Health and the George Washington University Milken Institute School of Public Health. She is dedicated to capacity building of nutritionists in low and middle income countries. Justine Kavle serves on the Secretariat of the USAID-led Anemia Task Force and as a co-chair of the CORE Group Nutrition Working Group, based in Washington DC. Dr. Kavle mentors doctoral students and teaches at the Milken Institute School of Public Health, GWU, as an adjunct assistant professor.



Nazo Kureshy, Team Leader, Community Health Team, USAID

Ms. Kureshy serves as the Team Leader for the Community Health Team and guides community and civil society priorities for USAID's goal to end preventable child and maternal deaths through the Child Survival and Health Grants Program, the Integrating Community Health mechanism, USAID's flagship Maternal and Child Survival Program (MCSP), and for USAID/Pakistan. In this role, Ms. Kureshy provides strategic contributions to USAID's policy dialogue on partnerships with civil society organizations in the health sector with senior leadership in GH, with other U.S. Government, and with leadership among the PVOs, faith-based organizations and other development partners such as UNICEF, WHO, and the Bill and Melinda Gates Foundation.



Edye Kuyper, Nutrition Advisor, INGENAES project

Edye provides nutrition leadership to the INGENAES project (<http://ingenaes.illinois.edu/>). Raised on a farm in Vermont, Edye served as a Peace Corps Volunteer in rural Mauritania. Upon returning to the United States, she was a community organizer and nutrition educator. Edye has also worked for the UC Davis World Food Center and the Program in International and Community Nutrition to link international nutrition research with improved programming and policy. Edye holds an MS in International Agricultural Development from UC Davis.



Judy Lewis, Professor, University of Connecticut

Professor Judy Lewis is a public health sociologist in the Faculty of Medicine, University of Connecticut, since 1973. She is Professor Emeritus of Community Medicine and Pediatrics, serving most recently as the Director of Global Health Education, and establishing many community health and education programs. In 1975 she developed one of the first school-based health programs in the US, which still provides health, mental health and dental services to 27,000 children in Hartford, CT. Prof. Lewis has conducted research and training in over 50 countries including Haiti, Sri Lanka, Costa Rica, Tanzania, Turkmenistan, Puerto Rico, Sierra Leone and Malaysia; presented at international and national conferences; and authored many books and publications. She has been CORE Group Board Chair since 2010. Other leadership includes Chair, Women, Children and Adolescent Health Working Group, World Federation of Public Health Associations; Co-Chair, American Public Health Association MCH Section International Health Committee; Management Committee of Women and Health Taskforce of the Network: TUFH; Board Member, International Health Central American Institute; and Board Chair, Global Health Education Consortium.



Blanca Lomeli, Senior Technical Advisor, Local Capacity Strengthening, Gender and Infectious Diseases, PCI

Dr. Blanca Lomeli has over 30 years of experience in the fields of community health and development. From 1998 to 2004, Dr. Lomeli led PCI efforts in a binational US-México Border Health Initiative for California and Baja California, implementing local capacity strengthening interventions and supporting the efforts of local partners working in binational border health to strengthen their capacity to achieve mission-related objectives more effectively and efficiently. From 2004-2012 Dr. Lomeli led a USAID- funded partnership with the Mexican Ministry of Health to strengthen prevention, and control of Tuberculosis; TB-HIV/AIDS; and TB-Diabetes services across Mexico. Blanca was a technical lead on PCI's participation in the H1N1 response in Mexico in 2009. She supports infection, prevention and control aspects of PCI's Ebola response in Liberia. Currently, Blanca leads PCI's efforts in Zika prevention and control in the Americas. Blanca is a founding member of PCI's Gender Equity Commission and member of the Global Leadership Team at PCI.



Lee Losey, Deputy Director and Technical Lead, CORE Group Polio Project, Catholic Relief Services

Lee Losey has worked in international health and education since 1983 when he was a Peace Corps Volunteer to Tanzania. Mr. Losey has graduate degrees in English from St. Andrews University, Scotland, as a Rotary Scholar, and The University of Chicago. He taught English in Chicago, Tanzania, Japan and Colombia. He has an MPH from the University of Illinois at Chicago. Mr. Losey has managed health projects for CRS, Save the Children, CARE International and Mercy Corps; was research coordinator of health education programs for the Chicago Department of Health, and program evaluator at the Midwest Latino Health Research Center. He is currently the Deputy Director and Technical Lead for the CORE Group Polio project, overseeing technical implementation and providing senior leadership and representation globally. The project is active in seven countries with more than fifty sub-grants to International and national NGOs. He was the first Secretariat Director for the CORE Group Project in Angola in 1999. He has been a consultant for polio for the CDC and WHO.



Meg Lynch, Technical Advisor, CORE Group Polio Project, Catholic Relief Services

Meg Lynch currently serves as Technical Advisor to the CORE Group Polio Project through Catholic Relief Services. She has ten years' experience working in public health, focusing on community health, immunization, intimate partner violence, and gender and women's empowerment. She holds a Master of Public Health degree from Emory University and a degree in International Relations from Mount Holyoke College.



Charlene McGee, Senior Health Policy Analyst, Health Equity Initiative, Multnomah County Health Department, @CAddyMcGee

At Multnomah County Health Department, Ms. McGee leads Oregon's efforts to provide high quality healthcare and mental health services for newly arriving refugees in partnership with state and federal agencies. She also works to improve health outcomes of immigrants. A native of Liberia, Ms. McGee emigrated in 1993 to Oregon to escape a civil war. In 2012, Ms. McGee relocated to Liberia and worked within the Office of the President of the Republic of Liberia, coordinating philanthropic support globally. She was also Executive Director for EQUIP Liberia – an NGO providing community and church-based health education to address issues ranging from water and sanitation to sexual and gender-based violence. Prior to relocating to Liberia, Ms. McGee served positions at Kaiser Permanente Northwest, Multnomah County, and Oregon State University. She was President of the African Women's Coalition, and President of the Portland National Association for the Advancement of Colored People. Ms. McGee resides in Northeast Portland with her family and eight year old son. She has a BA in Public Health from Oregon State University.



Dennis Mello, Global Associate Technical Advisor, Women Empowerment Initiative, PCI

Dennis Mello is the Global Associate Technical Advisor for the Women Empowered (WE) Initiative, PCI's savings-led social and economic empowerment methodology. In this role Dennis provides technical and programmatic support to 20 projects in 12 countries currently implementing the WE Initiative. In addition to the standard activities of a savings group, WE group meetings include dedicated time for action oriented social issues discussions led by group members. Through these discussions members work together to address challenges in their families and communities, utilizing existing knowledge within the group and bringing in outside experts when necessary. PCI works to integrate WE groups at the design stage of its projects, believing that socially and economically empowered women amplify the impact of our programs, whether they be related to MNCH, climate change adaptation, HIV/AIDS prevention and treatment, food security, and urban renewal. A civil engineer by training with project management experience in the private, public and nonprofit sectors, Dennis has worked in international development since 2007, including as a Peace Corps Volunteer in the Pacific Island nation of Vanuatu. He has been with PCI and the Women Empowered Initiative for two years.



Feven Mekuria, Senior Advisor for SRMH Global Program Approaches, CARE International

Feven Mekuria is a medical doctor with more than ten years of public health program management experience in Ethiopia. Based in Atlanta, Feven currently serves as the Senior Advisor for SRMH and Rights, Global Program Approaches for CARE USA's Sexual, Reproductive and Maternal Health team. In this role she is responsible for collaborating with colleagues from across CARE to identify key approaches, consolidate learning, and support refinement, expansion and scale up of SRMH program innovations and approaches, including those specifically aimed at removing adolescent's barriers to accessing sexual and reproductive health information and services.



Mary Anne Mercer, Senior Maternal and Child Health Advisor, Health Alliance International

Mary Anne Mercer, DrPH, MPH, is a public health practitioner specializing in the delivery of maternal and child health services in developing countries, with a special interest in the effect of globalization on health. Dr. Mercer began her international work in rural Nepal, and since then has provided technical support to a number of health programs in Asia and Africa. Between 1989 and 1994 she directed a technical support program at Johns Hopkins University for NGOs implementing efforts in HIV/AIDS prevention in Africa, and subsequently was Deputy Director of the Johns Hopkins-based support program for child survival projects. She is co-editor of a 2004 book 'Sickness and Wealth: The Corporate Assault on Global Health' and blogs regularly for the Huffington Post. Dr. Mercer is currently a Senior MCH Advisor at Health Alliance International where she supports projects in Timor-Leste, and is also a Senior Lecturer in the Department of Global Health at the University of Washington.



Melanie Morrow, Senior Technical Specialist, Community Health Team Manager, USAID's Maternal and Child Survival Program, ICF International

Melanie Morrow is a global health practitioner with expertise in multiple aspects of community health, including community mobilization, social and behavior change communication, monitoring and evaluation, and maternal and child health interventions. Ms. Morrow joined ICF International in 2013 and manages the Community Health and Civil Society Engagement team on USAID's Maternal and Child Survival Program. Prior to joining ICF, Ms. Morrow spent 13 years in health technical and leadership roles at World Relief and served as an interim technical advisor on gender violence at USAID Tanzania. She was a Rainer Arnhold Fellow for her work on Care Groups and collaborated with the Ministry of Health of Colombia as a Fulbright Scholar. Ms. Morrow has a Master's degree in public health from Johns Hopkins University and a B.A. in anthropology with a minor in biology from the College of William and Mary.



Jennifer Nielsen, Senior Nutrition Advisor, Helen Keller International

Jennifer Nielsen received her AB from Harvard, an MA from the Johns Hopkins School for Advanced International Studies and a PhD in International Health and Human Nutrition, from the Johns Hopkins Bloomberg School of Public Health. She worked in international development for ten years with USAID in West Africa and Egypt, designing strategies for maternal and child health and primary education. With Helen Keller International since 2006, she provides technical guidance to 13 country programs in Africa and 7 in Asia. HKI's mission is to save the sight and lives of the most vulnerable and disadvantaged by establishing programs based on evidence and research, and building local capacity to deliver. The nutrition portfolio is guided by the Essential Nutrition Actions-Essential Hygiene Actions framework, which integrates nutrition interventions into platforms ranging from health clinics to agriculture, WASH and education programs. HKI aims to build the capacity of local government and community partners to assume long-term responsibility for program management and financing. Jennifer served as co-chair of CORE's Nutrition Working Group from 2010-2014.



Jennifer Norman, Director of Public Health, Mercy Corps, @mercy Corps

Jennifer is the Director of Public Health at Mercy Corps. She works closely with Mercy Corps' country programs in the design, implementation and evaluation of diverse and evidence-based Public Health programs, with a focus on sustainable improvements in maternal, newborn and child health, nutrition, reproductive health, and infectious diseases. Jennifer has over 25 years of experience in the health sector including: twelve years of clinical experience in obstetrics, pediatrics, public health nursing, and international emergency medical relief and; fourteen years of international public health experience in more than fourteen countries. She holds a Master of Public Health degree from Johns Hopkins University and a Bachelor of Science and Nursing Degree from the University of Calgary, Canada.

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Jennifer Orgle, Program Director, Nutrition at the Center, CARE USA

Jennifer Orgle joined CARE USA's flagship Nutrition Program, Nutrition at the Center in 2013 as Program Director. With over 19 year's hands-on program management experience, Jenny has extensive knowledge of integrating development programs into VSLA platforms. As lead for the Nutrition at the Center program, Jennifer is responsible for the effectiveness of each of the program's integrated components and works closely with the 4 implementing countries (Bangladesh, Benin, Ethiopia and Zambia) to ensure high quality program interventions with measurable impact, that align with CARE's broader goals to empower women and reduce poverty. In relation to this, Jennifer has supported the development of Social and Behavior Change strategies which use VSLA platforms to improve nutritional status for women and children by improving women's economic empowerment and participation in household decision-making, with regards, to intra-household food distribution and food choices. Before joining CARE 12 years ago, Jenny worked as Regional Director of the National Mobilization Program in Ghana, where she supported women's cooperative groups to access small scale credit to expand their businesses. Jennifer holds a Master of Science degree in Rural and Regional Resources Planning from the University of Aberdeen.



Beth Outterson, Capacity Building Advisor, Medical Teams International

For the past year and a half, Beth has served as Capacity Building Advisor at MTI. In that role, Beth builds staff competencies in Community Based Primary Health Care through developing and disseminating online resources, and training a cadre of field-based Capacity Building Champions. She also conducts global training in the Partnership Defined Quality methodology. Previously, Beth served as Adolescent Reproductive Health Advisor at Save the Children, and Health and HIV/AIDS Specialist at the US Peace Corps in Washington, DC. Beth has an MA and MPH from Tulane University, and is a member of the Social and Behavior Change working group at Core. After many years on the East Coast, she is enjoying living in the Pacific Northwest!



Mike Park, Director, Strategy & Operations, Aspen Management Partnership for Health (AMP Health), @AMPforHealth

Mike Park is the Director of Strategy & Operations for the Aspen Management Partnership for Health. He joined the Aspen Institute from McKinsey & Company, where he advised public, private and social sector organizations in Africa, Asia, Europe and the US on health systems and public health. While at McKinsey, he was seconded to the Global Alliance for Improved Nutrition to help develop and launch the Access to Nutrition Index, a ranking of the world's largest food and beverage companies on their nutrition practices. As a practicing primary care physician, he served as a fellow at the University of North Carolina, Assistant Professor at the University of Colorado and an Assistant Editor at the Journal of Family Practice. Mike holds a Master of Public Health from Harvard University.



Tom Paulson, Founder, Humansphere, @tompaulson

Tom Paulson is founder and publisher of Humansphere, an online news site devoted to covering the global fight against poverty and inequity. The organization's motto is Give a Damn, and its mission is to make the humanitarian sector as newsworthy and fascinating as a cat video, explosion or celebrities having their latest personal crises. Prior to founding Humansphere in 2010, Paulson was a medical and science reporter for the dearly departed newspaper, the Seattle Post-Intelligencer. Before that, Paulson was a carpenter and lived in his car.



Henry B. Perry, III, Senior Scientist, Health Systems Program, Department of International Health, Johns Hopkins Bloomberg School of Public Health

Dr. Perry, MD, PhD, MPH, has four decades of experience working in community health and primary health care as a physician provider of services, field program manager, founder of Curamericas Global, consultant, program evaluator, technical advisor, researcher and teacher. Dr. Perry is a graduate of Duke and Johns Hopkins Universities with training in general surgery, public health, as well as sociology and anthropology. He lived in Bolivia, Bangladesh and Haiti where he provided leadership for health programs.



Joseph Petraglia, Senior Advisor for Behavior Change, Pathfinder International

Joseph Petraglia is Senior Advisor for Behavior Change for Pathfinder International. Joseph specializes in behavior change and learning theory. Prior to joining Pathfinder, he worked as a behavior change consultant and visiting scientist for the US Centers for Disease Control and Prevention and as faculty in the rhetoric and cognitive science programs at Georgia Tech. The author of several books and articles, Joseph's research centers on beneficiaries' perspectives on what is "authentic" information: information that can be readily incorporated into their understanding

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of health and behavioral risk. As part of the authentication process, Joseph emphasizes the use of narrative, dialogue, and participatory approaches. Additional areas of interest include the application of complexity science in public health, intervention design, implementation science and qualitative approaches to evaluation.



Joy Portella, President, Minerva Strategies, @joyportella

Joy Portella is the president of Minerva Strategies, a Seattle-based consultancy dedicated to inspiring action and creating positive change through smart communication. Clients include the Institute for Health Metrics and Evaluation, the Nike Foundation, and the Chicago Council on Global Affairs. Prior to establishing Minerva, Joy spent more than five years as director of communications at Mercy Corps. Joy led a team of communicators in the U.S. and Europe, and she personally guided Mercy Corps' messaging, media relations, crisis communication, and communication related to corporate relationships. Previously, Joy worked for a decade at leading communication firms – Burson-Marsteller, Ruder Finn, and SS+K – in New York and Washington DC. Eclectic highlights of those years include running the media announcement of Warren Buffett's unprecedented \$31 billion gift to the Bill & Melinda Gates Foundation, developing a restructure plan for the UN Department of Public Information, and crafting a brand identity and outreach plan for Pfizer Philanthropy's "Global Health Fellows" program. Joy holds a BA from Yale University and an MA in International Economics and European studies from the Johns Hopkins School of Advanced International Studies.



Paul Rippey, Cofounder and Editor, Savings Revolution

Paul Rippey has worked with financial services for the poor since the early 1980s. He managed three MFIs until, in 2003, he discovered Savings Groups. He was immediately attracted to them because they are managed by the community, based on savings rather than debt, and retain the interest and fees paid by members in the community rather than sending them off to a distant capital city. He has worked with Savings Groups almost exclusively since 2008, conducting trainings, strategic planning, and evaluations in a dozen countries of Africa and Asia. He promotes the use of videos - played on cell phones, DVDs or other channels - to supplement trainers and to assure that complete information about good group management is faithfully and widely disseminated. With partners in Kenya, he has helped develop and publicize a smartphone app that replaces the ledgers and passbooks usually found in Savings Groups. He is co-author of *Beyond Financial Services: A Synthesis of Studies on the Integration of Savings Groups and Other Developmental Activities*, (Aga Khan Foundation, 2011) which helped define the concept and good practices of SG+. He runs a website, Savings-Revolution.org, contains a blog, news, and curated links to works on savings-led community-managed microfinance.



Julia Robinson, Senior Program Manager, Cote d'Ivoire and Advocacy Programs, Health Alliance International

Julia Robinson currently serves as the lead of Advocacy Programs and Senior Program Manager for Cote d'Ivoire programs at Health Alliance International, a Seattle-based organization working to strengthen public-sector health systems. She has been working in West Africa since 2001, when she was a Peace Corps Volunteer in Benin. She has worked on country programs in Cote d'Ivoire, Sudan, and Timor Leste on programs involving health systems strengthening, HIV programs and services, working in post-conflict regions, and advocating for just macroeconomic and global health policies. Julia also serves as the North America Global Steering Council representative for the People's Health Movement, a grassroots health activist organization working to promote health as a human right across the world.



Dara J. Royer, Chief Development & Marketing Officer, Mercy Corps, @darajoy22

Dara J. Royer is passionate about building and growing mission-driven brands. As an award-winning marketer and successful fundraiser, Royer has led high-performing teams to exceptional success. As Chief Development and Marketing Officer for Mercy Corps, a global organization operating in 42 countries, Royer is responsible for private and corporate fundraising, global marketing and brand stewardship. She also serves as a member of the Executive Leadership Team. Within her first year as the agency's first Chief Marketing Officer, her team increased media hits by more than 100% and was recognized nationally for creative excellence. Prior to joining Mercy Corps in 2013, Royer served as Vice President of Brand Marketing for ALSAC/St. Jude Children's Research Hospital, the largest healthcare charity in the world. Prior to this role, she spent a number of years as a leader of ALSAC's Radio and Entertainment Team. Beginning in 2006, Royer served as Senior Vice President of Corporate and Community Affairs for Cook Children's, one of the nation's leading pediatric health care systems. Royer began her career as an Emmy and AP award-winning television journalist. Royer received her BA in History from Indiana University in Bloomington.

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Janine Schooley, Senior Vice President, Programs, PCI

Janine ensures the quality and integrated programming for PCI as well as oversees all new business development, monitoring, evaluation and research. She obtained her MPH with an emphasis on Maternal and Child Health from San Diego State University in 1985. She spent the last 30 years in leadership positions with two San-Diego-based non-profit international health and development organizations: Wellstart International from 1985-2000 and PCI since October 2000. Janine is a specialist in NGO/PVO leadership, with emphasis on program design, evaluation and management, including capacity strengthening, gender and behavior change aspects of integrated, community-based health and development programming. Since 2007 she has been a faculty member at the Monterey Institute of International Studies where she teaches a course on behavior change. From 2002-2011 Ms. Schooley served as Secretary of the Board of Directors of the CORE Group.



Sarah Shannon, Executive Director, Hesperian Health Guides

Under Sarah's leadership since 1996, Hesperian creates and distributes practical, accessible health materials in 84 languages for primary health care and community health, including digital tools and mobile formats used by over 5 million people last year alone. Prior to joining Hesperian, Sarah trained community health workers in Central America for 15 years. Sarah is the 2013 recipient of the Dory Storms Child Survival Award, and the 2015 Ruth Roemer Social Justice Leader Award.



Lillian Shirley, Director, Public Health Division, Oregon Health Authority

Lillian Shirley is the director of the Oregon Health Authority's Public Health Division and has been a local and a national leader in advancing public health. Most recently, she led the Multnomah County Health Department. Ms. Shirley was the Vice Chair of the Oregon Health Policy Board that designed Oregon's Transformation Plan. She served as the founding Vice Chair of Health Share, Oregon's largest Coordinated Care Organization. Before coming to Oregon, Ms. Shirley was the Director of Public Health for the City of Boston and was also the first executive director of the Boston Health Commission, where she led the agency through the establishment, design and organization of the new public health authority in Boston. Ms. Shirley has served on the boards of the Public Health Foundation, the Oregon Public Health Institute, Portland Sustainable Development Commission and served as President of the National Association of City and County Health Officials. She holds a bachelor's degree in Nursing from the University of the State of New York. She also holds a Master's Degree in Public Health from Boston University and a Master's Degree in Public Administration from the Kennedy School of Government at Harvard University.



Ira Stollak, Program Manager for Latin America, Curamericas Global

Ira Stollak MA MPH, the Program Manager for Latin America for Curamericas Global, is a graduate of Columbia University and the University of Washington School of Public Health and Community Medicine. He has designed and backstopped USAID and PEPFAR community-based health programs in low-resource settings that include Liberia, India, Haiti, and Guatemala. Prior to working with Curamericas he did research on health disparities in rural Alaska and on HIV dissemination among truck drivers in Mexico, and implemented HIV prevention programs in Mexico and Belize. He is experienced in qualitative and quantitative research, learner-centered pedagogy, curriculum design, training facilitation, organizational capacity building, strategic planning, community mobilization, monitoring and evaluation, Care Groups, and the Designing for Behavior Change framework. He speaks fluent Spanish and (rusty) French and has lived in Alaska, Mexico, Belize, Guatemala, and Colombia.



William Story, Assistant Professor, Department of Community and Behavioral Health, University of Iowa, College of Public Health

Will has 15 years of experience in global public health focused on program design, program evaluation, and operations research related to maternal and child health, HIV/AIDS and malaria in South Asia and Sub-Saharan Africa. He completed his PhD in Health Services Organization and Policy and his MPH in Health Behavior and Health Education from the School of Public Health at the University of Michigan. Will has published multiple peer-reviewed articles related to male involvement during childbirth and the effect of social capital on maternal and child health care utilization using both quantitative and qualitative methods. Will is currently an Assistant Professor in the Department of Community and Behavioral Health at the University of Iowa's College of Public Health where he studies household- and community-level factors that are critical to the improvement of maternal and child health in resource- poor countries and translates that research into effective interventions and policies.



Susan Thompson, Director of Timor-Leste Programs, Health Alliance International

Susan Thompson, BA, M.P.H., is a public health practitioner with experience working on both domestic and international public health programs. Ms. Thompson has worked on maternal and child health, family planning and HIV programs in the countries of Indonesia, Timor-Leste and Cote d'Ivoire. She currently serves as Director of Timor-Leste Programs for Health Alliance International, a non-profit organization based in Seattle, Washington. Previously, Ms. Thompson worked for ten years at Seattle - King County Public Health Department in the Office of the Director on programs addressing worsening health trends among vulnerable populations. She holds a Masters Degree in Public Health and a B.A. in Southeast Asian Studies from the University of Washington. Ms. Thompson also holds a clinical faculty appointment in the Department of Global Health at the University of Washington.



Kristie Urich, WASH Knowledge Management Coordinator, World Vision International, @wvwater

Kristie Urich is currently the Knowledge Management Coordinator for the water, sanitation and hygiene team with World Vision International. She coordinates World Vision's WASH community of practice – a network of more than 700 WASH technical experts from more than 50 countries around the world. She has been supporting World Vision's efforts to develop integrated programming in BabyWASH since its inception more than a year ago, and participates in the current work of the BabyWASH coalition.



Nora Zenczak-Skerrett, Technical Coordinator, Early Childhood Development, ChildFund International

Nora is Technical Coordinator for Early Childhood Development with ChildFund. She has nine years of experience in the field of international development across education, ECD, and business development. At Creative Associates International, Nora provided broad support to their \$50 million USAID-funded Tanzania 21st Century Basic Education early literacy project. Prior to that role, Nora mentored a team as the Education Director for Village Health Works (VHW) in Burundi, implementing UNICEF-funded ECD programming; developed an ECD capacity mapping database at Save the Children; completed an ECD situation analysis for the Millennium Villages Project in Rwanda; and prepared parenting training materials for parents of children between 0-3 for CARE-Rwanda. She holds a MPA in Development Practice from the School of International and Public Affairs (SIPA) at Columbia University and undertook course work at Columbia Teachers College.

CORE GROUP STAFF BIOS



Lisa M. Hilmi, Executive Director | lhilmi@coregroupdc.org | @lisa_hilmi

Lisa Hilmi has an extensive career in global health, employing both human rights and community-based participatory approaches to addressing health disparities for women, children and communities. Lisa brings a wealth of experience working at multiple levels of global health from policy, research, emergency relief, workforce development, health systems strengthening, and fund raising, from local to global levels. Lisa also adds technical expertise, as a pediatric nurse with clinical experience in hospital, community, academic, and crisis settings. She has a strong commitment to partnership and collaboration. She has also worked with several CORE Group members in over 12 countries. Her extensive networks in academia, Ministries of Health, UN, bilateral and private funders will be a great asset to CORE Group as we move forward with our strategic plan and business development. Lisa's research and global projects have focused on children's health and psychosocial well-being post-disaster and post-conflict in Asia and Africa; injury surveillance/prevention and addressing health disparities, gender and water/sanitation; women's livelihood development to improve health and nutrition, disaster preparedness and humanitarian relief; and health concerns amongst internally displaced persons and refugees in multiple countries. She is completing a PhD in Nursing at the University of Pennsylvania, and has an MPH from Columbia University, a BSN from University of Pennsylvania and a BA in Political Science/Communications from Villanova. She is a Registered Nurse and nationally certified pediatric nurse.



David Shanklin, Community Health and Civil Society Advisor | dshanklin@coregroupdc.org

David S. Shanklin, MS has over twenty years of experience in community-based health programming in the context of national health system strengthening. His specialties include maternal, neonatal, and child health and nutrition; mortality impact assessment; and health program monitoring and evaluation. His activities include: leadership in the participatory development of project designs together with country staff; overseeing pilot tests of new concepts in order to improve models for replication and scale up; and conducting operations research to improve field strategies, advancing the evidence-base, and the importance of community health care as an integral part of national health systems.



Michelle Shapiro, Communications and Knowledge Manager | mshapiro@coregroupdc.org | @michelleshapiro

As Communications and Knowledge Manager, Michelle strengthens communication and knowledge-sharing between CORE Group, its membership, and the broader global health community to advocate for key community health activities and messages, and to demonstrate CORE Group's value and impact in the field. Michelle has over six years of marketing and communications experience in both the for-profit and nonprofit sectors. Michelle holds a Bachelor of Science in Communication from Boston University. In her free time she enjoys exploring new neighborhoods, cooking for friends, and volunteering.



Shelia Jackson, Senior Knowledge Management Specialist | sjackson@coregroupdc.org | @sljackson19

Shelia Jackson is the Senior Knowledge Management Specialist with the TOPS Program. She has experience in envisioning, developing, and directing knowledge sharing programs that focus on the role knowledge management plays in helping people to efficiently accomplish daily tasks while adding to the institutional knowledge of their organization. A lifelong learner, Shelia enjoys the collaboration and training processes. She strives to create environments where everyone feels comfortable to participate and learn. Shelia earned a Master's degree in Library and Information Science from Florida State University. She enjoys travelling, exercising, hiking, reading, cooking, volunteering, and doting on her nephews.



Yemisi Songo-Williams, Knowledge Management Specialist | ysongowilliams@coregroupdc.org | @Yemisi_SW

Yemisi designs and executes knowledge management activities and processes to strengthen and expand the TOPS FSN Network. She works to improve food security and nutrition practice by providing support to the TOPS technical leads in leveraging new technologies and practices for engaging online communities in knowledge exchange and capacity strengthening. She has experience in developing strategies and forums to facilitate knowledge sharing through meetings, conferences, field exchange visits, social media and other online collaboration forums. In her previous role as a Knowledge Management and Learning Officer with CRS, Yemisi led the creation and management of a web-based platform for knowledge collection and dissemination. She also developed synergistic relationships with partner organizations to improve learning and collaboration, and capture critical knowledge, innovations and best practices. Yemisi holds an MSc in Social Research Methods from the London School of Economics and Political Science. She is based at CORE Group.

CORE GROUP STAFF BIOS



Adrienne Todela, Knowledge Management Coordinator | atodela@coregroupdc.org | [@atodela](https://www.instagram.com/atodela)

As Knowledge Management Coordinator, Adrienne is responsible for supporting both the CORE Group and TOPS Program teams with online content creation and management, events planning, and overall community engagement through the FSN and Community Health Networks. She has gained experience in content creation, media outreach, and events management from her work with varied non-profit, non-governmental organizations such as Accion International, The African Foundation for Development, and the United Nations High Commissioner for Refugees.

Adrienne received her B.A. in International Relations and B.S. in Journalism from Boston University in 2015. Passionate for advocacy work, she holds knowledge sharing and public information essential to effective capacity building in the international development arena. She enjoys traveling domestically and internationally, trying different types of cuisines, reading poetry and prose, exercising at Gold's Gym, and spending quality time with family and friends.



Erin Murray, Manager of Network Operations | emurray@coregroupdc.org

As Manager of Network Operations, Erin is responsible for managing the CORE Group's office operations, membership, and event planning, including conferences and webinars. She has worked in operations and administration for varied non-profit organizations, including a charter school located in DC, an alternative energy association, and an international educational non-profit. She served as a volunteer English teacher for WorldTeach in Costa Rica, and has taught English to various adult communities. Erin enjoys yoga, traveling, reading, and attempting to cook.



Unjum Pervez, Controller, Finance & Administration | upervez@coregroupdc.org

Unjum, Controller for Finance & Administration, joined CORE Group in 2004. Unjum's financial background includes work for International NGOs, private organizations, and the United Nations. Unjum started as a Staff Accountant for CORE Group and rose over the years to Controller due to his expertise in management of CORE Group's budget, financial systems, grants and contracts, and annual revenues. Unjum holds a Master's Degree in Accounting and completed Chartered Accountancy and Chartered Secretary courses.

CORE GROUP POLIO PROJECT STAFF

Frank Conlon, Director (World Vision) | frank.cgpp@gmail.com

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Meghan Lynch, Technical Advisor (Catholic Relief Services) | meghan.lynch@crs.org

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South Sudan: Anthony Kisanga Lomoro, cgpp.ssudan@gmail.com

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CORE Group has always engaged and supported the future innovators of the field, but now we are making it official with the new CORE Group Young Professionals Network (YPN)!

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WHAT: A community to foster engagement, collaboration, knowledge sharing, and career development.

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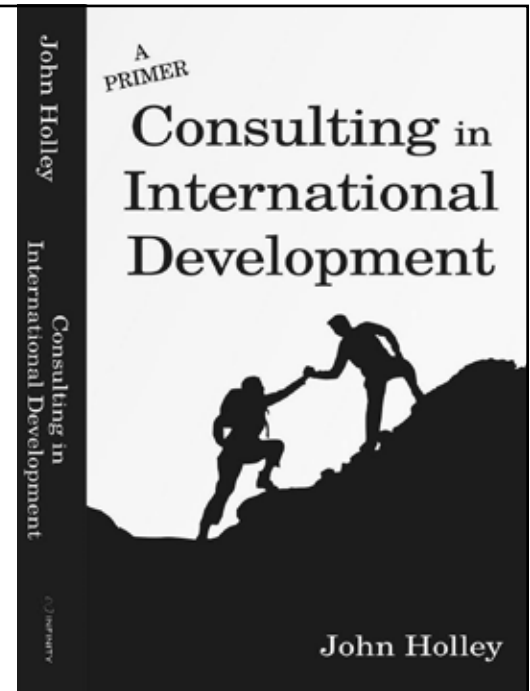
When you **begin a career** in the world of development, you arrive with expertise in something, but rarely have been exposed to the wide range of skills, concepts, and tools necessary to get the job done as a consultant.

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I did it well enough to say that I was able to improve the lives of millions of people in small ways. And I thought, how incredible it would be if thousands of others were able to say the same; and imagine the tremendous the impact we could collectively have!

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Organizations should also consider this book as a potential training tool for both expatriate and local staff. If your staff and employees grow more competent, the organization will benefit many ways. **For more information visit my website: jholleywritings.com.**



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wishes CORE Group
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LIST OF NEW CONTACTS

Keep in touch with colleagues and new friends!

Name: Email: We discussed...	Organization:
Name: Email: We discussed...	Organization:
Name: Email: We discussed...	Organization:
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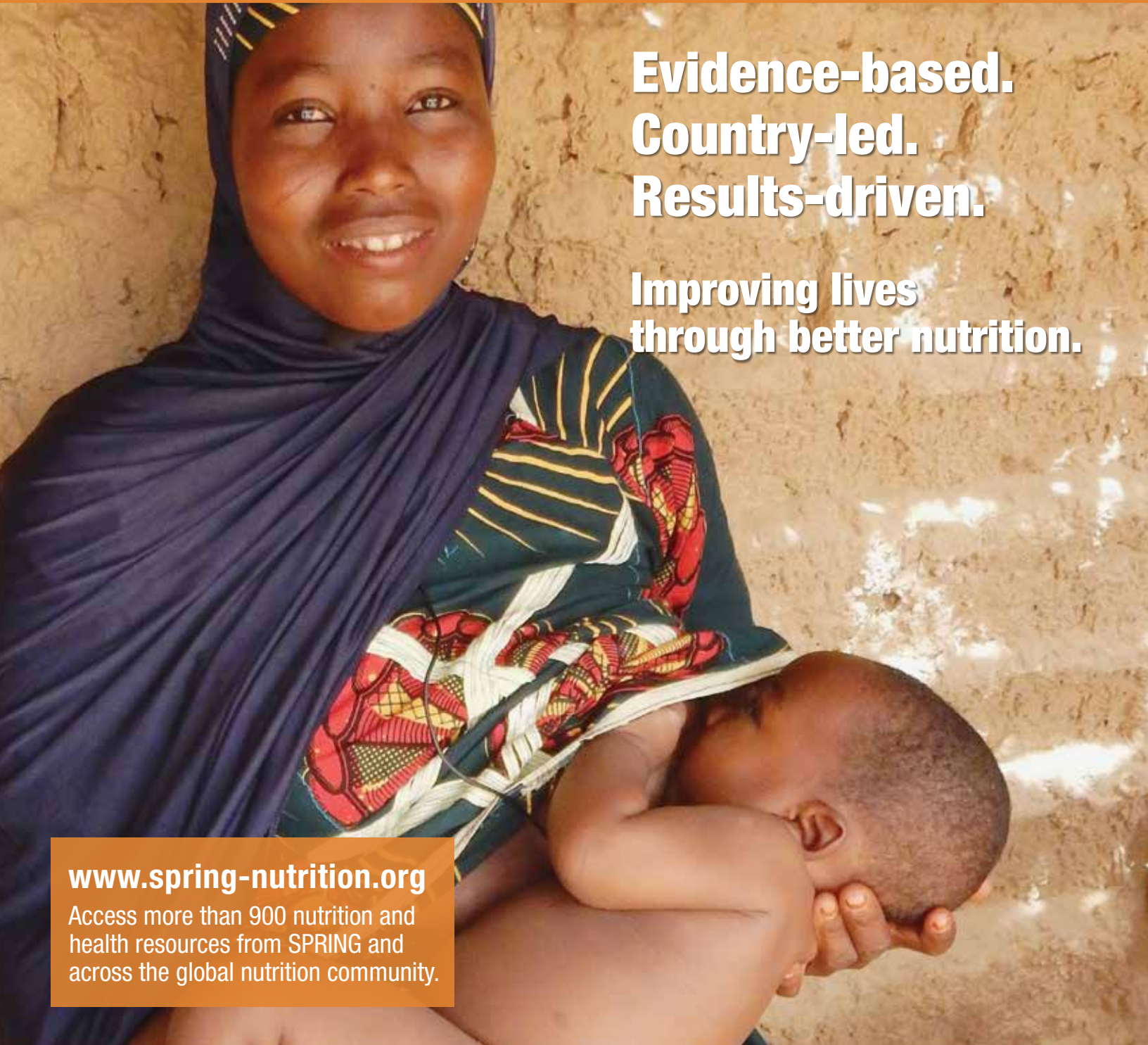
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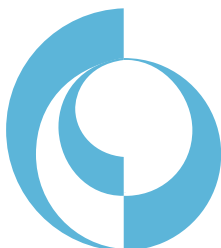
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 World Relief
 World Renew
 World Vision

CORE GROUP INDIVIDUAL ASSOCIATES

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American College of Nurse-Midwives
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 Institute for Reproductive Health, Georgetown University
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UPCOMING EVENTS

World Health Assembly: May 22 - 28, 2016 | Geneva, Switzerland

Global Social Service Workforce Alliance Symposium: June 2, 2016 | Washington, DC

SBC Journal Club - Improving Public Engagement With Climate Change: June 8, 2016 | Online

CCIH Annual Conference: June 17 - 19, 2016 | Baltimore, MD

Vaccines Against Shigella and ETEC (VASE) Conference: June 28 - 30, 2016 | Washington, DC

RESULTS International Conference: June 25 - 28, 2016 | Washington, DC

World Population Day: July 12, 2016

Cracking the Nut Health Conference: July 18 - 19, 2016 | Washington, DC

International AIDS Conference: July 18 - 22, 2016 | Durban, South Africa

World Breastfeeding Week: August 1 - 7, 2016

MORE EVENTS: coregroup.org/events



2016 Fall Conference: October 13 - 14, 2016 | Washington, DC

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