45th Session of the TDR Joint Coordinating Board Online, 15-16 June 2022

Update from UNICEF, TDR co-sponsor

Robert Scherpbier,
Senior Health Specialist, UNICEF



Strategic objectives:

1) Accelerate uptake of innovations into

2) Enhance equitable and sustainable

intervention coverage at scale

PHC policies, programmes and practice

Soumya Swaminathan, 1 Kabir Sheikh , 2 Robert Marten , 2 Martin Taylor, 3

ckground The private health sector is an important source of

Manoj Jhalani, 4 Ogochukwu Chukwujekwu, 3 Luwei Pearson, 5 Pascale Allotey , 6 Jean Gough, 7 Robert W Scherpbier, 8 Anuradha Gupta, 9 Marijke Wijnroks, 1 Muhammad Ali Pate, 11 Gaston Sorgho, 11 Orin Levine, 12 Felicity Goodyear-Smith 6, 13 Thiagarajan Sundararaman, 14 Hernan Montenegro, 15 Surava Dalil. 15 Abdul Ghaffar 10 2

> Electronic supplementary material ne online version of this article contains supplementary material

RESEARCH ARTICLE

Setting global research priorities for private sector child health service delivery: Results from a CHNRI exercise

PLOS MEDICINE

Carrying out embedded implementation research in humanitarian settings: A qualitative study in Cox's Bazar, Bangladesh

A. S. M. Shahabuddin 61*, Alyssa B. Sharkey 61, Debra Jackso Andreas Hasman², Malabika Sarker



An embedded implementation research initiative to tackle service delivery bottlenecks in the expanded programme on immunisation in Pakistan: Overview and reflections

Focus:

- Primary Health Care
- Private sector
- Humanitarian settings
- Settings with large inequities ("zero dose communities")

UNICEF-TDR Collaboration on Implementation Science and Research Progress to date

"Socialising" IR within UNICEF and across partners

- Virtual workshop (24-26 and 31 January 2022). Director TDR shared TDR's IR experience and talked about the importance and potential of IR partnerships in the closing session.
- Development of case compendium examples of successful IR projects across sectors.

Towards greater uniformity in IR reporting across projects and partners

- Standardised reporting format to enhance learning
- Website Gavi-GFF-TDR-UNICEF: IR knowledge management repository of IR projects

Enhancing IR capacity building in partnership

 Funding proposal (UNICEF-TDR-LSHTM) to MRC aiming to enhance IR capacity including for maternal newborn and child health through TDR training centres in Ghana and Indonesia

Strengthening community referral and follow up for possible severe bacterial infection (PSBI) in Kenya

What are the barriers and facilitators to adherence to community referral pathways?

Context

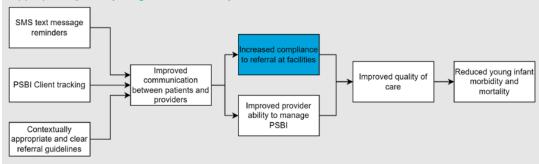
- High neonatal mortality rate: 22 deaths per 1000 live births in Kenya¹
- Sepsis causes 20% of these deaths²
- Compliance to community referral is a major impediment to quality care
- Tools for follow-up are not consistently used in the country

Problem statement

Follow up and referral of sick young infants is lacking in Kenya, resulting in avoidable infant morbidity and mortality

Intervention Description

The WHO PSBI guidelines and IMNCI guidelines were adapted and scaled up for Kenya's population of infants. The follow up and referral of sick young infants was strengthened using a Client Tracking Form and provider-led short messaging services that facilitated community health volunteers to identify, conduct community reviews, link data with responsive facilities, and appropriately refer young infants to facility-based care.



Study Design

The study's objective is to identify barriers and facilitators of compliance to follow-up during community referral of PSBI and understand feasibility, adoption, and fidelity of integrated communication strategies in Turkana county. Mixed methods are employed, using focus group discussions with community health volunteers and key informant interviews with frontline providers. The Consolidated Framework on Implementation Research was used to classify barriers and facilitators. Quantitative data from records review and observation checklists provide information on the process measures of quality achieved by the intervention.

Findings

- The number of sick young infants reviewed on day 8 increased in health centers using strengthened community communication strategies
- Integrated communication strategies increased health provider confidence in the management of PSBI

".... One of the challenges we encounter is when the child is given the first dose of medicine and the parent presumes that the child is cured." [Ngitakiito_CHV_FGD]

- Primary barriers for enhanced compliance to follow up occurred at several levels:
 - Household: financial instability and insufficient knowledge
 - Community: socio-cultural practices which are associated with delayed care-seeking and decreased demand for facility births
 - Health facility: stock-outs of essential commodities
 - External environment:: COVID-19 pandemic changed care-seeking

Key Takeaways

- Supply- and demand-side interventions are necessary to strengthen PSBI community referral and follow up
- Community health volunteers are key referral agents who can sensitize communities and identify PSBI early in young infants
- Health shocks, like COVID-19, can affect demand for routine services and the ability of health workers to provide services

Recommendations

- . Empower community health volunteers to identify PSBI and sensitize communities with appropriate renumeration and motivation
- Develop community resources (e.g. ambulances and supply chains)
- 3. Strengthen care-seeking dynamics through active community dialogue, education, and sensitization

Future Research Questions

- How can the acceptability of care-seeking be improved among communities?
- What is the impact of the community referral strategy on the completion of PSBI treatment?

References:

- KDHS, Kenya National Bureau of Statistics, M.o.H., National AIDS Control Council, KEMRI, NCPAD, DHS Program, ICF International, Kenya Demographic and Health Survey 2014. 2015.
- Le Geyt, J., & Hauck, S. (2016). G272 Epidemiological trends of neonatal sepsis in a county referral hospital in central Kenva.
- Strengthening Possible Severe Bacterial Infection (PSBI) Community Referral and Follow Up in



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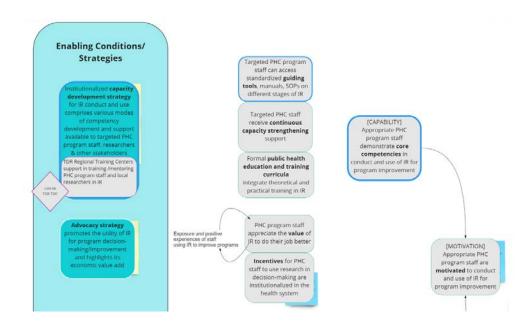
UNICEF-TDR Collaboration on Implementation Science and Research Progress to date

Primary Health Care

 TDR-UNICEF: handbook for IR decision makers and theory of change

Private sector

 TDR-UNDP-UNICEF: "Big Think" challenge; build on SIHI and ADP collaboration; landscape analysis of private sector initiatives, regulation and delivery models in Ghana & Tanzania



Humanitarian settings

Evidence informed redesign of PHC in Lebanon supported by IR

Settings with large inequities ("zero dose" communities)

• Development of global and in-country learning hubs with Gavi

