



Society for International Development
Washington Chapter



FY 2019

ANNUAL REPORT

Health & Nutrition Workgroup

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HEALTH & NUTRITION WORKGROUP

The SID-Washington (SID-W) Health and Nutrition Workgroup is a group of individuals actively engaged in the issues of improving health around the globe. With events ranging from mitigating the effects of poverty to training packages for family planning, this workgroup aims to inform on the practices and strategies that will lead to a healthier world.



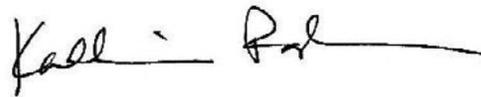
Dear Members of the Health & Nutrition Workgroup,

We are happy to report that we had another exciting year! As we reflect on last year, the workgroup produced several great events, ranging from [Machine Learning in Global Health](#) to [Innovative Approaches Across the Nutrition Landscape](#). We are currently working on events for FY2020, so stayed tuned for more information! We look forward to providing SID-Washington's spin on international development issues pertaining to health and nutrition.

Lastly, we would like to thank outgoing Co-Chair Natasha Sakolsky. She helped us put on many fantastic events during her tenure. We wish her the best in her future endeavors.

Thank you for your continued interest and support of the workgroups. We hope to see you at future SID-Washington events! If you have any questions, please feel free to send an email to events@sidw.org.

Best regards,



Katherine Raphaelson



Paul A. Sherman





**Natasha
Sakolsky**

Executive Director,
Pact Institute

Ms. Sakolsky has spent the past 25 years in public health and development, providing corporate level leadership in strategic planning, organizational design and performance, operations management, change management, and as a technical generalist both domestically and abroad. Ms. Sakolsky currently serves as the Executive Director of Pact Institute, a wholly owned subsidiary of Pact. Previously, Ms. Sakolsky led the design of FHI 360 following the acquisition of AED by FHI, and worked to advance the FHI 360 organizational approach to country-centered delivery.

Her international work has focused largely on HIV/AIDS in Africa and the Caribbean, although she has also managed HIV and non-communicable disease programs in Brazil, India, and the Middle East. Through Pact Institute, Ms. Sakolsky supports shared value initiatives such as those in the mining sector. Ms. Sakolsky has served as the US Country Director for a UK-based charity, lived in Cote d'Ivoire while working on a regional USAID funded family health and AIDS program, and was a Peace Corps volunteer in the Central African Republic in the early 1990s. In addition to her role with SID-W, Ms. Sakolsky sits on the NASTAD Global AIDS Program Advisory Committee and is a member of the Research Ethics Board for Population Services International. Ms. Sakolsky earned her MPH from Tulane University.



**Roseanne
Schuster**

Director
MEL Practice and Innovation,
Global Impact Collaboratory
ASU International Development

Roseanne Schuster is both the Director of Monitoring, Evaluation, and Learning (MEL) Practice and Innovation for the Global Impact Collaboratory at Arizona State University International Development and Assistant Research Scientist at the Center for Global Health, Arizona State University. She is a global nutrition and public health professional dedicated to increasing the impact of research and programming through innovative, cost-effective, and culturally responsive monitoring, evaluation, and learning. She has a decade of experience in the design, implementation, and evaluation of programs seeking to improve health and environmental and social wellbeing. As the Director of MEL for the Global Impact Collaboratory, Dr. Schuster engages community-based, participatory, and implementation science approaches in interventions and evaluations to ensure programs are ultimately responsive to target populations and adaptive to the complex systems in which they operate.

Dr. Schuster's research focuses on how to improve delivery of critical health services in low-resource settings, uptake of health care among vulnerable populations, and understanding of how food and water insecurity shape infant and young child feeding and growth. She has led interventions, evaluations, and indicator development activities in multiple countries, with long-term expertise in Mozambique and sub-Saharan Africa. Her research has been sponsored by USAID, US State Department, and DFID.

EVENT CALENDAR

Wednesday, September 19, 2018

4:00PM - 5:30PM | SID-Washington

Machine Learning in Global Health

Monday, October 29, 2018

12:00PM - 1:30PM | SID-Washington

Innovative Approaches Across the Nutrition Landscape

Wednesday, November 7, 2018

3:00PM - 4:30PM | SID-Washington

Voices from the Field -- Health Systems and Capacity Building to Address the SDGs

Wednesday, February 12, 2019

4:00PM - 5:30PM | SID-Washington

Health & Nutrition Workgroup Planning Meeting

Wednesday, April 10, 2019

12:00PM - 1:30PM | SID-Washington

Private Capital and Global Health



Machine Learning in Global Health

Moderator: **Pamela Riley**, Senior Digital Health Advisor, Abt Associates

Speakers: **Leslie Heyer**, Founder, Cycle Technologies
Gabriel Krieshok, Information and Communication Technologies for Development (ICT4D) Specialist, Abt Associates
Ambika Samarthya-Howard, Head of Communications, Praekelt Foundation

Event Description: The explosion of data available from social media and digital platforms presents big challenges and big opportunities. This session featured three speakers who discussed how machine learning can mine public health data to improve health outcomes. The event included:

- A demo on scraping social media to track health topics from Abt Associates
- An analysis of how WhatsApp data can shape health messaging from Praekelt Foundation
- Insight on how Cycle Technologies created a fertility tracker app to help avoid unplanned pregnancy

This was a joint event with the Health and Nutrition Workgroup.

Key Takeaways

1) Ask the right questions: Let the problem drive the technology, not the reverse

All the panelists agreed that one's mindset while using ICT for development must recognize technology as a method of addressing a specific, well-identified problem. Practitioners, according to **Ambika Samarthya-Howard (Praekelt Foundation)**, "need to think about how the technology can suit the problem, not how the problem can be suited to the technology." Accordingly, there is a need to re-iterate the role of technology as a means to an end and always assess it in context of that end. Machine learning can provide new and innovative solutions to longstanding problems, but not always. When deciding whether machine learning is best solution to a problem, one should consider the following issues: cost-effectiveness, risk, available data, assumptions, and impact. Samarthya-Howard noted that at the end of the day, we are trying to improve lives, not technology, so we must adopt technology that has the best results for our programs. Machine learning can be one of many new and exciting avenues of doing so.

2) Behind the scenes of designing machine learning technology

Compared to other types of technology, machine learning is unique in its ability to gather a variety of data to determine an algorithm that otherwise cannot be produced manually. Even data scientists do not know exactly how the system determines the relationship between the input and output variables. When trying to solve a problem, data scientists make many assumptions about different aspects of the problem, most notably evident in the type of data they choose to input. **Gabriel Krieshok (Abt Associates)** suggested that practitioners take on an exploratory role, constantly assessing where one might be wrong and what data can do to improve results. Since machine learning is based on many assumptions, constantly assessing

the robustness of said assumptions is crucial for the delivery of efficient outcomes.

3) Look at the ecosystem of data collection & analyze relationships between & among datasets

The real value of machine learning comes in with how the data is collected, organized and categorized from traditional sources, such as government agencies and unconventional sources, such as social media. More important than just collecting the relevant data is getting creative about what these input data could include, particularly when combining multiple datasets can provide the necessary information. Krieshok noted the benefit of pooling different datasets together and making use of readily available data.

4) Challenge in machine learning: Bias

Samarthya-Howard stated, "Machine learning is not a wizard, it is just as smart as the questions we ask and what we train it be...it is not a substitute for smart, inclusive, diverse behavior." Krieshok also expressed his concerns about bias in machine learning, which unlike bias in traditional technology cannot be retraced via reverse engineering. On a cautionary note, Krieshok noted that many datasets can contain inherent biases due to real-world discrimination. He highlighted the importance of using rigorous, diverse datasets, since often times, the problem lies not with the code, but with the dataset and the underlying bias within. Additionally, Krieshok emphasized the importance of including diverse perspectives when designing machine learning technology. He suggested that development and policy professionals should certainly partake in the processes, since they are trained to think differently from data scientists. Krieshok also spoke about how machine learning is becoming more and more accessible; opensourcing allows people to improve and create new, even superior, platforms. Leslie Heyer (Cycle Technologies) added that as long as one is acutely aware of the problem of bias

Innovative Approaches from Across the Nutrition Landscape

- Moderator:** **Suzanne Palmieri**, Director of Strategic Initiatives, Swette Center for Sustainable Food Systems, School of Sustainability, ASU
- Speakers:** **Shannon Doocy**, Associate Professor, Johns Hopkins Bloomberg School of Public Health
Mike Foley, Deputy Nutrition Team Lead, Save the Children
Djeinam Toure, Technical Specialist, Global Alliance for Improved Nutrition (GAIN)

Event Description: In order to improve nutrition globally, the development, research, and policy communities came together to address challenges across multiple levels of food and health systems - individuals (behavior and biomarkers), markets (purchasing choices), and higher level decisionmakers who are setting agendas and priorities, among other levels. We listened to our speakers speak across these integrated levels that are influencing human nutrition. The following subjects were discussed:

- How marketplace approaches to nutrition from the Global Alliance for Improved Nutrition
- How policy leaders and ministries are engaged to create multi-sectoral approaches to nutrition from Save the Children

This was a joint event with the Food Security & Agriculture Workgroup. Lunch was provided and sponsored by Arizona State University.

Key Takeaways

1) Addressing nutrition requires a multi-sectoral approach.

As **Mike Foley (Save the Children)** discussed, interrelated systems influence individuals' nutrition status, so interventions to improve nutrition must engage multiple sectors of development such as food, health, and care. At Save the Children, the SPRING program incorporated the "Framework for Systems Thinking," which recognized the direct and indirect factors that influence nutrition, to better coordinate with other organizations and sectors. Adding a perspective from the humanitarian space, **Shannon Doocy (Johns Hopkins Bloomberg School of Health)** argued that humanitarian response must move beyond the traditional siloes and recognize that aid workers in each sector must communicate with each other for effective aid delivery.

2) Using market-based approaches and engaging the private sector are necessary to address supply-side issues in nutrition.

Djeinam Toure (Global Alliance for Improved Nutrition (GAIN)) explained the importance of engaging the private sector to ensure access to and availability of diverse and nutritious foods. In Kenya, to increase the availability and affordability of safe, pasteurized milk, GAIN's Marketplace for Nutritious Foods program supported a farm cooperative's

efforts to sell pasteurized milk in automated machines that could be purchased in various quantities. Six months into the intervention, consumers perceived milk to be more available and more affordable than before, and the production and sales of pasteurized milk also increased, leading to a successful intervention.

3) Changing behaviors and increasing the desirability of nutritious foods improve nutrition outcomes in the long-run.

Part of GAIN's Marketplace for Nutritious Foods program included increasing the desirability and convenience of pasteurized milk because before the intervention, raw milk, which is more prone to causing foodborne illness, was more popular. The automated machines (ATMs) increased the desirability of pasteurized milk because the refrigeration and consistent availability of it improved its convenience in relation to raw milk. Furthermore, to complement the ATMs, GAIN implemented the "Community of Practice," which includes group training events on nutrition and food safety to further the impact of the material intervention. Similarly, Mr. Foley explained that Social and Behavior Change Communication undercut all the interventions in the SPRING program, as changing social behaviors and norms is vital to long-term change.

EVENT SUMMARIES

4) More research and program evaluations are needed to better understand the most effective interventions to prevent malnutrition.

As international development donors and practitioners continue to emphasize the importance of evidence-based decision-making, Ms. Doocy advocated forward-thinking nutrition interventions that embed evaluation mechanisms at the beginning. For example, in partnership with World Vision, Johns Hopkins Center for Humanitarian Health collected baseline and post-intervention data to determine the effectiveness of food vouchers versus mixed transfers, which included food vouchers and unconditional cash transfers. Because the implementers defined three different groups (food voucher, mixed

transfer, non-assistance) at the beginning of the experiment, they were able to follow the same groups of individuals throughout the intervention. Using advanced statistical models, they could compare the differences in nutrition outcomes among the three groups. However, Ms. Doocy explained that more research and program evaluation is needed to deepen the understanding of the most effective forms of nutrition aid, as this quasi-experiment lacked finding statistical significance in some areas because of a short time period and small sample size.



Voices from the Field -- Health Systems and Capacity Building to Address the SDGs

Speakers: **Siddhi Aryal**, Director, Health Systems and Capacity Building, The QED Group, LLC
Dmytro Mykhaylenko, Global Capacity Development Team, Pact

Event Description: SID hosted Siddhi Aryal, who is based in Myanmar for The QED Group, LLC, and Dmytro Mykhaylenko, who is part of Pact’s Global Capacity Development team in Ukraine, to speak about their experiences in the field. Mr. Aryal has worked in Asia, the Greater Mekong Subregion (GMS), and South Asia. He addressed the health information systems and health workforce of the World Health Organization’s (WHO) Health Systems building blocks. He drew on his public health work (HIV, TB, Malaria, and tropical diseases) in the GMS and South Asia regions over the last 16 years with different organizations such as UNDP, ADB, Pact, and FHI 360 and with funders, such as USAID, DFID, DFAT, UN, and SIDA. Dmytro Mykhaylenko discussed the USAID RESPOND project Pact was implementing in Ukraine. This project supported the development of sustainable country-led programs aimed at the reduction of HIV transmission among key populations and their sexual partners. He covered three key components from the capacity development perspective:

- Pact’s systems approach to capacity development in terms of improving the HIV continuum of care
- Technical assistance and support; both strengthening organizational, technical, adaptive, and influencing capacities of partners

Key Takeaways

1) Going Beyond the Silo - The Role of Information and the Health Workforce

Siddhi Aryal, PhD. (QED Group) stressed the importance of the role of information and health workforce development to improve health systems (HS) and capacity building. Noting the targets of SDG 3, Aryal highlighted the burden for signatories to provide quality and equitable health care. To do so, he suggested “thinking beyond the silo,” and understanding health in the context of the many crucial and interconnected facets of a high-quality life by asking, “what does it take to send a 9-year-old to school?” This holistic perspective will allow practitioners to better address the needs of the SDGs. Highlighting the role of capacity building and data in effective decision-making, Aryal recommends starting with universal health coverage for delivering better quality while expanding coverage and financial protection.

2) Health Systems: Metrics and Design

Aryal noted the importance of choosing thoughtful metrics when assessing health systems. Policymakers should strive to create health systems that lead to better health; a more equitable distribution to include marginalized populations; higher economic benefit; consumer confidence in health systems; and quality processes of competent care and positive user experience. These metrics align with the SDG targets. As such, the core values of a strong health system would include resilience, efficiency, equity, and a people-centered design. These would require an understanding of population health needs and expectations; governance of the health sector and cross-sectoral partnerships; care delivery platforms; workforce numbers and skills; tools and resources from medicine to data.

3) The Role of Data

In terms of measurement and reporting, Aryal recommended collecting actionable and real-time data; creating value for data ownership by increasing accessibility; capacity building for inputs and exploring data in-depth; engaging in targeted interventions enabling local community-level action; and synergizing small and big data approaches to generate a complete picture of well-being. Practitioners can support the development of data ecosystems by bridging collection, processing, and communication of SDG indicator data; integrating the use of accurate small data with mainstream avenues to support the SDG monitoring efforts; and supporting official statistics by engaging communities in the production of data and community-level action.

4) Capacity Building: A Shared Process of Co-creation and Collaboration, Not a Set of Tools

Dmytro Mykhaylenko (Pact) recounted learnings from his field experience working on the USAID-funded RESPOND project for AIDS relief in Ukraine. The objectives of this project included increasing the quality of HIV/AIDS services, targeting key populations and their partners, and strengthening the capacity of Ukrainian institutions to deliver quality HIV/AIDS programs. Pact’s comprehensive capacity development approach focused on a mastery of technical, organizational, adaptive, and influencing capabilities on a system, organization, and individual level. During this five-year project, implementors prioritized changing local attitudes and demanding for data collection and evidence-based decision-making to ensure sustainability of their work in the long run.

Health & Nutrition Workgroup Planning Meeting

Event Description: The Health & Nutrition Workgroup met on Tuesday, February 12th at 4:00 PM to plan events for the group in the next year. In recent months, the group organized events on topics such as Corporate Sector Contributions to Health and Machine Learning in Global Health. All members were encouraged to join and to bring ideas for event formats and topics.

Meeting Agenda

- I. Welcome and Introductions*
- II. Survey Report*
- III. Possible Event Topics*
- IV. Possible Workgroups for Collaboration*
- V. Consensus for Upcoming Events*

Discussion

I. Welcome & Introductions

II. Survey Report

- Top Response – Capacity Building
 - Panel Formats – Co-host with other Workgroups
 - ICT for Development and Health & Nutrition Workgroup
- Event was successful
- More people and interesting discussion questions
 - Cross-listing topics

III. Possible Event Topics

1. The Brain Drain

- How do you create the conditions and opportunities so that qualified individuals can stay in their respective countries?

2. Health Systems and Workforce Strengthening:

- Capacity Development and Sustainability
- Possible Speaker: Mark Schuller Killing with Kindness: Haiti, International Aid, and NGOs

3. Incubators and Accelerators for Social Entrepreneurships

- Home kits and inputs to help social entrepreneurs get started
- Who are the businesses that need help? How do we sustain service delivery?

- » What is it like for the minister of health for low income nations? Is there an income ranking for development?

4. Impact Investing

- Connecting NGOs with financial consulting institutions
- Find institutions that provide services to help other organizations

5. Major Development in Global Health Donors

- Any trends?

- USAID, Gates Foundation

IV. Possible Workgroups for Collaboration

- Corporate Role & Development Workgroup
- Development Finance Workgroup

V. Consensus for Upcoming Events

- Health Systems and Workforce Strengthening
- Incubators and Accelerators for Social Entrepreneurships



Private Capital and Global Health

Moderator: **Nitin Vaswani**, Manager, Social Investment and Alternative Finance, Pact Ventures

Speakers: **Ignacio Estévez**, Principal Associate, Banyan Global
Amy Lin, Acting Deputy Director and Market Access Team Lead, Center for Innovation and Impact (CII), USAID
Robin Young, Senior Principal Development Specialist, Finance and Development, DAI

Event Description: This session looked at the evolving role of private capital in global health. We heard about the new USAID Blended Finance Roadmap for Global Health and had a discussion that highlighted current examples of health financing, what we are learning, and what works.

This was a joint event with the Development Finance Workgroup.

Key Takeaways

1) Blended Finance: Doing Things the Way We are Today Will Not Get Us Where We Need to Be

Amy Lin (USAID) began the discussion with an introduction to the Center for Innovation and Impact (CII), which provides resources for organizations, stakeholders, and the public to learn about USAID's commitment to support health enterprises with financial services in twenty-five countries. Lin explained that the goal of the commitment is to evaluate and remove various financial challenges with blended finance and other monetary tools. USAID has worked to use the blended finance framework for the local health industry in partner countries. Blended finance has raised the visibility of local partners and bridged them with the private sector to build investment for sustainable projects. Lin added that there was a significant funding gap between conventional investment and blended finance, which was resolved through the mobilization of private capital to local businesses.

Using her experiences in the field, **Robin Young (DAI)** stated that current conventional investment in public health sector is not favorable to medicine advancement, medical equipment development, and the changing overall landscape of global health epidemics. **Ignacio Estévez (Banyan Global)** added by discussing his experience in assessing the differences in health sector investment in Tanzania and Ghana. He acknowledged that blended finance could improve this model by creating flexible finance structures.

2) Technology and Medical Advancement: Harnessing the Best of Two Sectors

Lin explained that the increased use of digital technology in artificial intelligence and financial service have helped manage

global health problems. Digital tools have helped define health issues using data and effective spatial targets so that the project framework can prioritize which financing challenges to tackle. Further, analysts would be able to correctly apply accurate blended finance instruments, including digital marketing strategies and technical guidance.

3) Taking the Risk of Investing in Health Sector Means Trusting the Tangible Impact

Nitin Vaswani (Pact Ventures) discussed with the panelists the private capital perspective on taking risks when investing in the health business. Lin agreed with private capital's concern in achieving the optimum utility between profit and social impact. She stated that the private sector considered health industry investment as risky. However, if they maintain the status quo, the goal would not be achieved either. Blended finance has been a framework to boost the communal target with a long-term tangible impact for the society.

4) The Role of Local Government

Estévez mentioned that the support of local governments in partner countries is also the key to implementing blended finance tools. Governments can create a positive environment for the investment through policies, micro data, instruments, and platforms to work with the small businesses. Local governments would also support financial service to ease the business process such as restructuring the financing cycle when needed. Since businesses are driven by profit, Young and Lin agreed that implementing blended finance tools would not only be equipped with policies and framework but also transformative law designed to protect grants and contracts.



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