

## Engaging the Private Sector to Support Immunization

Day 1 – Overview of the private sector and immunization

# Engaging the Private Sector to Support Immunization

Welcome! Bienvenue! Bem-vinda! Добро пожаловать!

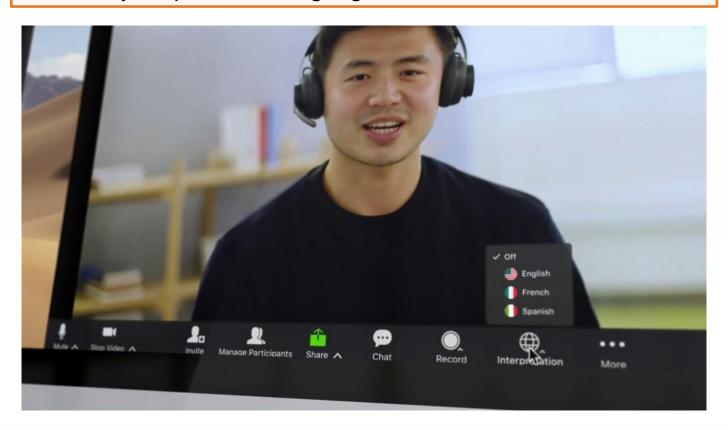


October 27-29 and November 3

Countries in Transition

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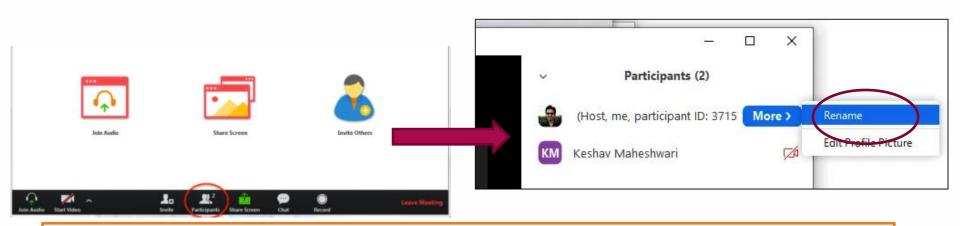


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Name, Country

"Leah List, US"

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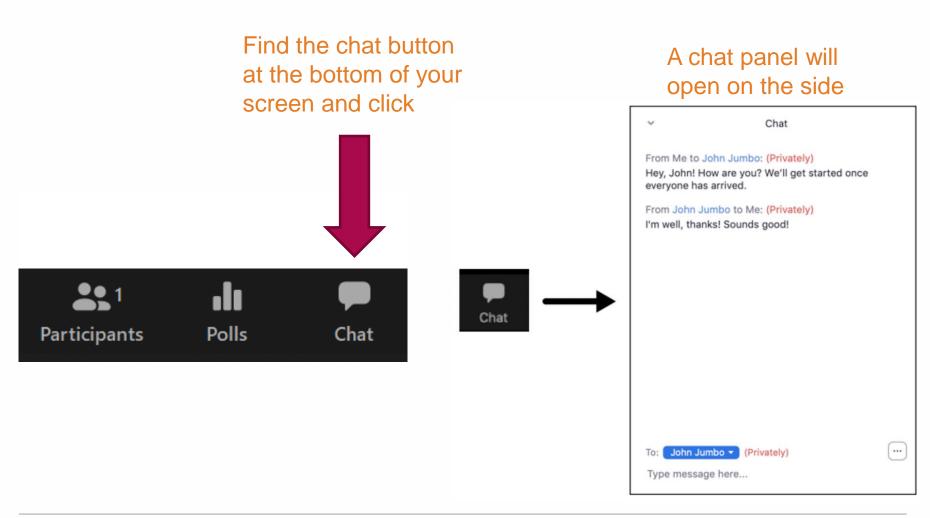


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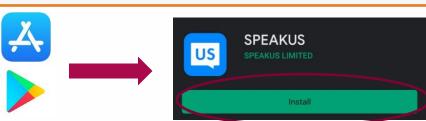


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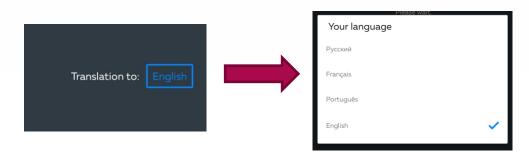
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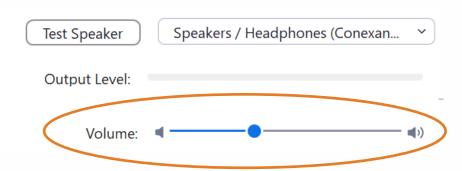
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Speaker

In the menu, decrease the volume under "Speaker"



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### Who to contact:

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Elizabeth Ohadi



**Leah Ewald** 



**Leah List** 

If you have problems with SPEAKUS, the interpretation platform, please let us know via the chat. The SPEAKUS technician will help troubleshoot.







### **COVID-19** health procedures

- You do not have any **COVID-19 symptoms** today, including an elevated temperature (100.6 Fahrenheit/38.1 Celsius or more).
- You will wash your hands for at least 20 seconds or use alcohol-based hand sanitizer upon entering the venue and frequently during the day.
- You will adhere to **safe distancing** precautions. For example, you won't move chairs or sit less than 6 feet apart, you will avoid physical contact (e.g. shaking hands) with colleagues or other participants.
- You will wear a **face mask** during the workshop.
- You will try not to touch your face or eyes with your hands. If you do, you will immediately wash or sanitize your hands.
- If a resident of your home or you test positive for the infection anytime during the next 14 days, you will immediately notify the LNCT Network Coordinators at <a href="mailto:info@lnct.global">info@lnct.global</a>.

### **Meeting norms**

LNCT meetings are intended to be a safe space for participants to share their experiences, challenges and best practices.

Please help us make this meeting space the most welcoming possible by:

Recognizing this is a confidential space

Sharing your experiences

**Appreciating** when questions are asked

Limiting time spent on tasks unrelated to the workshop

Honoring time limits

Being Respectful



### **Country Introductions**

### Congo





Dr. Alexis
MOUROU
MOYOKA
Director, EPI



Dr. Paul
OYERE MOKE
Director General of
the population,
MoH



Mr. Hilaire
MAVOUNGOU
Budget advisor,
MoF



Mr. Emeriand
Dieu Merci
KIBANGOU
Director of Studies
and planning, MoH

### Côte d'Ivoire





Dr. Jean-Marc
Bertrand
KORANDJI
Health economist



**Dr. Fanta DOSSO**Vaccination focal
point



Dr. Diabiga Octave COULIBALY
M&E specialist, MoH

### Georgia





Ekaterine Adamia
Director, Head of
Health Care Policy
Unit, MoH



Irine Javakhadze
Chief Specialist, State
and Consolidated
Budget Formulation
Division MoH/MoF



Vladimer Getia
Head of Health
Program Unit, NCDC



Gia Kobalia
Head of Financial Unit,
NCDC



Beka Jakeli Head of Financialbudgetary Unit, MoH

### Kenya





Christopher Malala Senior Accountant, MoH



Lucy Mecca
Deputy EPI Manager,
National Vaccines and
Immunization Program



Collins Tabu
Head, National
Vaccines and
Immunization Program



Moleen Cheptoo Senior Finance Officer, MoH

# São Tomé and Príncipe





Leonel Carvalho
General Secretary
CCM



Feliciana Sousa
Pontes
Director of Health Care



Ednilza Solange
Barros
EPI coordinator



Carlos Alberto
Costa
Department Chief, MoF



Jorge Cravid
Director, Administrative and
Financial Department



Neurice Ramos
Director, National
Medicines Fund



Vladimir Costa e Sousa EPI logistics

### Sudan





Abdalla
Hassan
Deputy National
EPI Manager



Hagira Ali Gapralla
Hamid
Head of Supplementary
Immunization Activities
Unit



Asrar
FaduleIsied
PMU Deputy
Manager



Khalid Mahjoob
Head of Routine
Immunization Unit

**Overview of the Private Sector** 



### Welcome and Overview of the Private Sector

Engaging the Private Sector to Support Immunization October 2020

# WELCOME BIENVENUE BEM-VINDO приветствие



Congo



Kenya



Cote d'Ivoire



São Tomé e Príncipe



Georgia

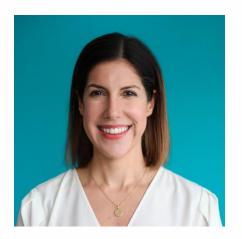


Sudan

### LNCT Coordinator Team (Results for Development)



**Grace Chee,**Senior Program
Director



Elizabeth Ohadi, Senior Program Officer



Leah Ewald, Program Officer



Christina Shaw, Senior Program Associate



Leah List, Program Associate



### Day 1 Agenda

No.	Length	Session Title	Presenter(s)
1	30 mins	Welcome & Introduction	Leah List & Grace Chee
2	30 mins	Overview of Private Sector	Grace Chee
3	10 mins	Break	
4	45 mins	Private Sector Assessment	Catherine Clarence & Tess Shiras
5	40 mins	Country Group Work	Country Facilitators
6	10 mins	Break	
7	10 mins	Workshop Reflections	Country Teams
8	5 mins	Closing	Grace Chee



### What You Hope to Learn

I hope to learn from the experience of countries that transitioned, specifically the challenges they faced in resource mobilization

I hope to learn more about how best to engage private sector in Immunization program

My hopes... to be able to set up a system of private health structures for immunization to reduce dropouts and increase coverage by reaching populations more than 10 km from the public health center

My expectations for the workshop... to mobilize resources from the private sector

I hope that from this
Workshop I can draw on the
experience of other countries
that already have this practice



### Workshop Objectives

- Define the private sector and how they can support immunization programming
- Discuss common challenges and understand the risks associated with engaging the private sector
- Discuss best practices for engaging the private sector
- Understand how to make good use of private sector expertise
- Discuss practical ways to start engaging the private sector



### Overview of Workshop Agenda

Day 1	Overview of the Private Sector and Immunization	
	Overview of private sector	
	Conducting a private sector assessment	
Day 2	Social Mobilization and Service Delivery from the Private Sector	
	Social mobilization to generate demand	
	Provision of services	
Day 3	Innovative solutions and other support from the private sector	
	Innovative solutions from the private sector	
Day 4	Exchange of Country Plans and Reflections	
	Peer exchange of country group work	



### Workshop Resource Page

#### **AGENDA**

Click on '+' sign below to see each day's agenda.

- Day 1: Overview of the private sector and immunization
- Day 2: Social mobilization and service delivery from the private sector
- Day 3: Innovative solutions and other support from the private sector to strengthen immunization
- Day 4: Exchange of country action plans and mitigating challenges

#### WORKSHOP MATERIALS

Materials from the workshop, including presentations, worksheets, country posters, and recordings, will be made available on this page.

#### WORKSHOP PARTICIPANTS

Congo Côte d'Ivoire Georgia Kenya São Tomé and Príncipe Sudan



Alexis Mourou Moyoka, Directeur, Programme Elargi de vaccination (PEV) de la République du Congo
(Director of the Expanded Immunization Program (EPI))

Mes attentes pour l'atelier : disposer des meilleurs outils pour mieux intégrer les formations sanitaires privées(secteur privé de la santé) dans la vaccination de routine et les campagnes de vaccination du PEV mais aussi pour mobiliser les ressources du secteur privé (secteur privé économique) dans le financement des activités du PEV

(What I hope to learn during this workshop: have the best tools to better integrate private health facilities (private health sector) in routine immunization and EPI vaccination campaigns but also to mobilize resources from the private sector (private economic sector) in the financing of EPI activities)



Hilaire Mavoungou, Conseiller au budget du Ministre des finances et du budget (Budget advisor to the Minister of Finance and Budget)

Mes attentes pour l'atelier: Mon intérêt pour ce séminaire est de voir si le secteur privé dans d'autres pays intervient dans le financement de la vaccination et comment cela se fait. Le cas des pays ayant un niveau de développement similaire au notre (avec un secteur privé pas très développé) serait idéal.

(My interest in this seminar is to see if and how the private sector in other countries is involved in immunization financing. The case of countries with a similar level of development to ours (with a not very developed private sector) would be ideal.)



Paul Oyere Moke, Directeur Général de la Population au Ministère de la santé, de la population, de la promotion de la femme et de l'intégration de la femme

(Director General of Population at the Ministry of Health, Population, Promotion of Women and Integration of Women)

Mes attentes pour l'atelier: Quel était l'apport du secteur privé dans le financement de la vaccination pour maintenir la couverture vaccinale dans le contexte de la pandémie à coronavirus dans d'autres pays. Comment les autres pays ont-ils affronté les fausses rumeurs sur la vaccination liées à l'expérimentation des vaccins contre la COVID-19 dans certains pays. L'importance du partenariat public-privé dans les pays en développement.

(What was the contribution of the private sector in the financing of vaccination to maintain vaccination coverage in the context of the coronavirus pandemic in other countries? How did other countries deal with false rumors about vaccination related to the

testing of COVID-19 vaccines? The importance of public-private partnership in developing countries)

Emeriand Dieu Merci Kibangou, Directeur des études et de la planification du Ministère en charge de la santé (Director of Studies and planning of the Ministry in charge of health)

Mes attentes pour l'atelier :

- Workshop materials can be found at <u>https://lnct.global/resources/lnct-workshop-resources-engaging-the-private-sector-to-support-immunization</u>
  - Agenda
  - Country posters
  - Participants, facilitators, panelists
- Presentations will be made available each evening for the next day
- You must be logged in to your LNCT account to access these materials
  - If you do not have a LNCT account, you can create one by going to <a href="https://lnct.global/get-involved/">https://lnct.global/get-involved/</a>
  - If you have issues accessing your account, please email Christina Shaw at <u>cshaw@r4d.org</u>

### Session Objectives

- Define the range of private sector actors
- Consider the ways that private sector actors can support immunization
- Understand potential advantages for the private sector
- Consider the regulatory and policy context



### Wide Range of Private Sector Actors

- NGOs/CSOs international humanitarian groups, women's groups
- FBOs religious-based providers, religious-based community groups, churches, mosques, temples
- Professional associations
- Providers individuals, maternity homes, hospitals
- Health insurers
- Other commercial companies mobile service providers, pharmaceutical and consumer goods distributors, technology providers, large employers



### Potential Inputs from Private Sector

Immunization Function	Potential Input
Leadership and governance	Management expertise
Health workforce	Training for HWs
Finance	<ul> <li>Advocacy for financing</li> <li>Commercial sector financing</li> <li>Financing through health insurance</li> </ul>
Medical products	<ul><li>Vaccines</li><li>Logistics</li><li>Cold chain</li></ul>
Service delivery	Service provision
Information	<ul><li>Data from providers</li><li>Information systems technology</li></ul>
Community	<ul><li>Demand generation</li><li>Feedback and accountability</li></ul>



### Potential Advantages in the Private Sector

Immunization Function	Potential Input	Potential Advantages?
Leadership and governance	Management expertise	Focus on efficiency
Health workforce	Training for HWs	Access to private providers
Finance	<ul><li>Advocacy for financing</li><li>Commercial sector financing</li><li>Health insurance</li></ul>	<ul><li>Public advocacy more effective</li><li>More resources</li></ul>
Medical products	<ul><li>Vaccines</li><li>Logistics</li><li>Cold chain</li></ul>	<ul><li>Efficient logistics management</li><li>Technical expertise</li><li>Efficiency from shared resources</li></ul>
Service delivery	Service provision	<ul><li>Proximity and access to target population</li><li>Patient preference</li></ul>
Information	<ul><li>Data from providers</li><li>Information systems technology</li></ul>	Ease of use
Community	<ul><li>Demand generation</li><li>Feedback and accountability</li></ul>	<ul><li>Personal trust</li><li>Proximity to target population</li></ul>



### Potential Advantages in the Private Sector

Immunization Function	Potential Input	Potential Advantages?
Leadership and governance	Management expertise	
Health workforce	Training for HWs	
Finance	<ul><li>Advocacy for financing</li><li>Commercial sector financing</li><li>Health insurance</li></ul>	-
Medical products	<ul><li>Vaccines</li><li>Logistics</li><li>Cold chain</li></ul>	
Service delivery	Service provision	
Information	<ul><li>Data from providers</li><li>Information systems technology</li></ul>	
Community	<ul><li>Demand generation</li><li>Feedback and accountability</li></ul>	



### Private Sector as Providers and in Other Roles

	Providers	Other Roles
Not for profit	<ul><li>FBOs</li><li>NGOs</li></ul>	<ul><li>FBOs</li><li>NGOs</li><li>Professional associations</li></ul>
For profit	<ul><li>Individual clinicians</li><li>Hospitals, clinics</li><li>Pharmacies</li></ul>	<ul> <li>Health insurers</li> <li>Mobile service providers</li> <li>Pharma distributors</li> <li>Consumer goods distributors</li> <li>Technology providers</li> <li>Large employers</li> </ul>



### Policy and Other Context Considerations (Providers)

- Who specifically licenses private health facilities?
- Who supervises the quality of services?
- What is the role of professional associations?
- How are private providers organized? Are there provider networks?
- Is there cross-referral between public and private providers?
- Where are private providers located? Who uses them?
- What is the history of MOH collaboration with private providers? Can the MOH contract private providers?
- Can the MOH provide vaccines? Refrigerators?
- What are mechanisms to hold providers accountable?



#### Learnings from Experience with Provider Networks

### Create an enabling environment for engagement between the public and private sectors:

- Develop a capacity building and system strengthening agenda for public-private sector engagement
- Engage in strategic communication with private providers
- Build and support health market facilitation processes

Tanzania (2015)	<b>Uganda (2015)</b>
Service contracts with Council & Regional Health Mgmt Teams	Maternal Health PPP with the Kampala Capital City Authority
Nigeria (2016)	Cambodia (2017)
111861111 (2020)	Camboula (2017)

### Conduct deliberative processes to enable better leveraging of private sector providers

- Define what kinds of support the private sector can provide to fill gaps in public sector delivery
- Position, develop, and leverage provider aggregators to support easier public-private engagement
- Reform public financial management practices with consideration of the realities of working with private sector providers
- Expand public oversight to better integrate FP/RH private providers into routine systems



#### Policy and Other Context Considerations (Other)

- Do NGOs/CSOs operate freely?
- Do NGOs/CSOs contribute to government planning processes? At what levels?
- What are regulations on pharmaceutical distribution?
- Does government policy generally support publicprivate partnership?
- What are relevant procurement regulations? Does the MOH have experience contracting commercial entities?



#### **Key Takeaways**

- There is a wide range of private sector actors, capable of a variety of roles
- Private sector actors may have advantages that can help improve immunization services
- Even where private sector is already involved, there may be ways to strengthen engagement
- It is important to start with the gaps/challenges, and define how to the private sector can fill those gaps
- Existing policies and structures need to be considered in assessing the feasibility of new partnership roles



**Questions?** 

### 10 MINUTE BREAK

# Private Sector Assessment for Immunization



# Conducting a Private Health Sector Assessment for Immunization

Catherine Clarence, Child Health Advisor Tess Shiras, Research Specialist SHOPS Plus, Abt Associates

LNCT Workshop October 27, 2020







#### **SHOPS Plus**

Sustaining Health Outcomes through the Private Sector (SHOPS) Plus is USAID's flagship initiative in private sector health. The project seeks to harness the full potential of the private sector and catalyze public-private engagement to improve health outcomes. SHOPS Plus supports the achievement of US government health priorities and improves the equity and quality of the total health system.



### Overview

- What is a private health sector assessment (PSA)?
- SHOPS Plus experience with PSA
- The PSA approach
- Case study review: How is the private sector involved in immunization?
- Q&A and questions for discussion



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#### What is a private health sector assessment?

- PSAs provide a new body of knowledge on the size, scope, and activities of the private health sector
  - Private health sector can include for-profit and not-for profit actors
- They offer recommendations on needed policy reforms and highlight areas for improved coordination and partnership between public and private sectors
- Ultimately, a PSA answers the question: "How can the private health sector contribute to improved health status?"



#### **PSA Objectives**

- Better understand the size and scope of the private health sector
- Inform the development of a donor-funded private sector program
- Identify and mobilize untapped private sector resources
- Foster dialogue between government and nonstate actors on how to maximize the private sector's role to address health priorities



### SHOPS Plus's experience with PSAs

- SHOPS Plus and its predecessor projects have conducted 33 assessments since 2009
- SHOPS Plus standardized its PSA approach in an online tool:
   Assessment to Action

www.assessmentaction.net



### The PSA Approach



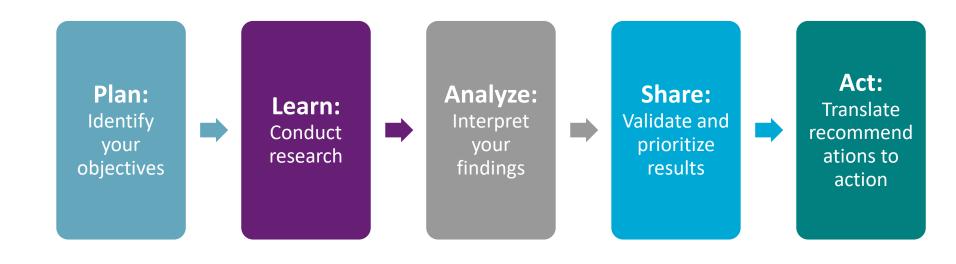
#### The PSA approach has several interrelated elements

- Policy environment
- Health financing opportunities and constraints
- Supply and demand of health products and services





#### And five phases





#### Phase 1: Plan

- The planning phase is often the first opportunity to engage private stakeholders and build relationships
- In this phase, you develop a scope for the PSA
  - What do you hope to learn and what are your end goals?
- Identify and engage stakeholders
  - Typical stakeholders: NGOs, private practitioners, professional associations, donors, government agencies
  - In addition to providing information, stakeholders can validate findings and help prioritize recommendations



#### Phase 2: Learn - Desk Review

- Scan the literature and conduct secondary analysis
- Common information sources include:
  - Business environment data
  - Population and health data
  - Health expenditures
  - National health plans and policies
- See Assessment-Action.net for links to common resources



#### Phase 2: Learn – Key Informant Interviews







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		Nonprofit Sector		
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Overview		Public Sector		
Assessment to Action is a guide activities of the private sector, the	• .	nealth Consumers	countries. By providing key data decisions, and design programs	
contributions to health, and facilitate greater public-private coop		Donor Community		
The Assessment to Action guide	has four objectives:			



#### Phase 2: Learn – illustrative fieldwork questions

The fieldwork component of a PSA on immunization could help you understand:

#### Policy Environment

- Is the government supportive of private sector provision of immunization? Are private providers included in government training on immunization?
- Are there barriers to private sector expansion in immunization? What are they?

### Health Financing

- Does the government provide vaccines to private providers? If so, are private providers permitted to charge service fees?
- Are private sector immunization initiatives sustainable? Could sustainability be strengthened through partnership with the public sector?

#### Supply and Demand of Products and Services

- Who are the private actors supporting immunization including demand creation, supply chain, monitoring, and service delivery? What are strategies to broaden engagement with these types of private sector actors?
- Is there a coordinated immunization supply chain for the public and private sectors?
- Where are there gaps in vaccine coverage or uptake?



#### Phase 3: Analyze

- This phase includes analyzing and interpreting data from the "learn" phase to draft a report and inform key policy recommendations
- It is important to triangulate multiple data sources to ensure findings are valid
- When developing recommendations, balance opportunities for increased private sector engagement with the realities of the social, political, and financial context



#### Phase 4: Share

- This step involves validating the report among local stakeholders, including those who participated in fieldwork
- Sharing the PSA before it is finalized is critical to prioritize and generate buy-in to recommendations
  - Best practice: Hold an in-country consultation to elicit feedback and develop consensus
- Once the report is final, the PSA should be widely disseminated



#### Phase 5: Act

- The purpose of this phase is to translate recommendations into practice
  - Encourage private actors to follow-through on plans discussed at the in-country validation meeting
  - Set regular check-ins to enhance public-private communication
  - Develop public-private partnerships
- In this phase, a best practice to ensure accountability is to develop an action plan to determine who will do what by when, with what resources



# Phase 5: Act – illustrative action items to facilitate public private partnership

- Identify other ongoing initiatives with the private sector in other health areas or ministries
  - Reach out to relevant public sector contacts to learn about their experiences
- 2. Determine a public sector champion to nurture and encourage this initiative
- Contact key stakeholders that can help shape the PPP concept, develop the business case, and provide informal TA
- Convene a meeting to initiate public-private dialogue-include a wide variety of private health providers, NGOs, and key public sector representatives

# Case studies: Private sector involvement in immunization



# Literature review on the private sector's role in immunization service provision

- Relatively few studies have researched this, mostly in Asian countries (Making PSAs even more important!)
- Private NGOs play a larger role than for-profit providers or corporate actors
- Private providers primarily increase access to traditional EPI vaccines, particularly in hard-to-reach areas (e.g., urban slums, rural), through government contracting mechanisms
- Private vaccine consumers may prefer the private sector due to accessibility or higher perceived quality
- Additional research is needed on quality of private sector immunization delivery



## Indonesia – Improving public and private sector coordination in immunization service delivery

- Private sector plays a large role in immunizations, but there was no coordinated immunization supply chain
- The private sector imported vaccines, some of which were counterfeit
- The Indonesian Pediatric Society (IPS) led a crosssectoral effort to improve coordination
  - Advocacy training to ensure accountability of coordination across sectors, districts, and health system levels
  - Development and implementation of electronic immunization reporting and quality assurance system
  - Coordinated messaging across public and private immunization providers



# Nigeria: Implementing a PPP to enhance private sector immunization services

- The MOH signed an MOU with private health facilities to provide free immunization services
  - Conducted situation analysis
  - Sensitized stakeholders across sectors, including media
  - Jointly developed an MOU
  - Formed a core group to oversee implementation
- Private providers trained by government
- Media utilized to generate demand



#### Nigeria: Lessons learned

- A jointly agreed MOU is central to success
- Public and private providers have differences in work ethic and mindset; understanding these differences is essential
- Generating evidence through a pilot can accelerate additional action & replication
- With appropriate strategies and funding, a PPP can create better health and service delivery for Nigerian citizens



## WHO recommendations on engaging the private sector in national immunization programs

- 1. Conduct an assessment of the current role of NGO providers in immunization service delivery
- 2. Determine the optimal model of public-private engagement and optimization of service delivery
- 3. Facilitate dialogue and establish collaborative activities, agreements, and contracts
- 4. Ensure data management and reporting
- 5. Provide adequate training and capacity building
- 6. Facilitate accountability and performance oversight

### Q&A



#### Questions for discussion

- 1. What do you know about the private sector's involvement in immunization?
- 2. Where are there gaps in knowledge?
- 3. Could the private sector play a larger role in immunization demand creation, supply chain, or service delivery? How so?
- 4. Could immunization health priorities be advanced through enhanced collaboration and communication between public and private sectors?

#### Catherine Clarence and Tess Shiras

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Tess\_Shiras@abtassoc.com



### **DAY 1 COUNTRY GROUP WORK**

#### Brainstorming Private Sector Actors and Roles

- Think about the various immunization functions, and identify 4-6 current challenges, and the inputs needed to address those challenges.
- Consider the private sector organizations in your country. Identify potential private sector organizations and the ways they could potentially contribute to addressing your noted challenges.
- You may identify more than one organization per challenge. You may also leave some immunization functions blank if there are no high priority challenges

Challenges may be COVID-related

)	Immunization Function	Current Challenge/ Potential Input	Potential Private Actors and Role	Are these actors currently engaged in immunization or other health activities? If so, what activities, with whom?
	Leadership and governance	•	•	•
	Health workforce	•	•	•
	Finance	•	•	•
	Medical products	•	•	•
	Service delivery	•	•	•
	Information	•	•	•
	Community	•	•	•



#### Participant Reflections on Day 1

As you considered new private sector actors that could support immunization, are there some actors that might be more difficult to engage? What are potential obstacles?



Congo



Cote d'Ivoire



### **Country Team Facilitators**

Country	Facilitators
Congo	Edouard Ndinga (WHO) Hermann Ngossaki (UNICEF) Leah Ewald (LNCT)
Côte d'Ivoire	Miloud Kaddar (LNCT)
Georgia	Ivditi Chikovani (Curatio/LNCT) Eka Paatashvili (Curatio/LNCT)
Kenya	Anthony Ngatia (CHAI) Grace Chee (LNCT)
São Tomé and Príncipe	Cristiana Toscano (LNCT)
Sudan	Hanan Elhag Abdo Mukhtar (WHO) Helen Saxenian (LNCT)



### 10 MINUTE BREAK

**Workshop Reflections & Closing** 

#### Participant Reflections on Day 1

As you considered new private sector actors that could support immunization, are there some actors that might be more difficult to engage? What are potential obstacles?



Congo



Cote d'Ivoire



### Help us improve LNCT activities!

Before you go, please fill out a short feedback survey!

We will use this to improve future LNCT activities.

The link is in the chat.



