

Health, Nutrition and WASH (HNWASH) are major determinants impacting the quality of life. In many developing countries, access to quality and affordable health care, balanced diet, safe water and basic sanitation is a challenge for the poor and disadvantaged, especially for women and children. IPE Global works with a wide range of stakeholders - national and state governments, development partners, civil society organisations and the private sector to design, manage, facilitate sustainable change in lives of millions of people.

# HEALTH, NUTRITION AND WASH (HNWASH)

We realise that investments in HNWASH, focusing on the underserved, would have large impact on the well-being of the communities and transform their lives. It was initially included in the erstwhile Millennium Development Goals (MDGs) and are now contained within Sustainable Development Goals (SDGs). To maximise health impact, we have integrated, multi-sectoral approaches to strengthen health systems, policy design, planning, service delivery, hospital management, demand generation and social & behaviour change communication (SBCC), human resources in health, health financing and health, nutrition, water, sanitation and hygiene services improvement.



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## FOCUS AREAS

Reproductive, Maternal, New-born, Child and Adolescent Health

Neglected Tropical Diseases (like Malaria, Kala Azar, etc.)

Communicable Diseases (HIV, TB, COVID) including areas of Antimicrobial Resistance, Epidemic Control and Disease Surveillance

COVID-19 Management and Relief

Non-Communicable Diseases (like Hypertension, Diabetes and Mental Health)

Health Systems Strengthening  
Innovative Financing Solutions

Water, Sanitation and Hygiene (WASH)

Innovations, Technology and AI based Solutions

Nutrition

## SERVICES

Programme Design and Implementation Support

Policy Briefs, White Papers and Diagnostics/Landscape Reviews

Health Innovations - Proof of Concept/ Piloting and Scale-up Design Support

Capacity Development and Institutional Strengthening

Community Mobilisation and SBCC Strategy

Development of Technical Guidelines and SOPs

Health Information Management Systems

PPP Strategy, Design and Implementation Support

Structuring and Managing Impact Bonds and Insurance Products

Strategy and Frameworks

Social Audits

Blended Finance Solutions

Contract Procurement and Management

Emergency and Humanitarian Services

# PROJECTS

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## **USAID || SAMVEG: Systems Approach for MNCH focusing on Vulnerable Geographies, India (2021-2025)**

The project seeks to accelerate India's efforts to reduce maternal, neonatal and infant mortality by providing a series of catalytic interventions to improve access, quality and accountability of MNCH services. It focuses on the 3 states of Jharkhand, Uttarakhand and Madhya Pradesh and 25 Aspirational Districts and is being implemented by a consortium of IPE Global, JSI, Dimagi and World health partners.

IPE Global is providing techno-managerial support at national, and state level for enhancing the quality and uptake of MNCH services in 3 states of Jharkhand, Uttarakhand and Madhya Pradesh and 25 Aspirational Districts in Jharkhand (19), Uttarakhand (2), Punjab (2), Haryana (1) and Himachal Pradesh (1). It will focus on engaging with the private sector, introducing innovations, promoting evidence-based good practices and leveraging technology using a 'continuum of care' approach.

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## **USAID || Partnerships for Affordable Healthcare Access and Longevity (PAHAL), India (2015-2023)**

Implemented with an assistance from U.S Agency for International Development (USAID), PAHAL is USAID/India and IPE Global's flagship project to catalyze innovative financing mechanisms to improve access to affordable and quality healthcare for India's most vulnerable populations. The project leverages private sector resources and innovative financial models to enable governments and donors to supplement traditional grant-based financing with new forms of conditional and catalytic support, as well as provide opportunities for private capital to generate social impact.

In keeping with this approach, the project has established a blended financing facility - SAMRIDH, supported by USAID, Indian Institute of Technology-Delhi (IIT-D), Principal Scientific Advisor to the Government of India, NATHEALTH, and in technical collaboration with the National Health Authority. SAMRIDH has mobilised a capital pool of over \$100 million from private sector and development funders. It leverages this fund to offer both grant and debt financing provision to healthcare enterprises, enabling them to scale high impact solutions that can; a) expand the availability of COVID-19 health solutions; b) support vaccine storage and distribution; c) improve the health infrastructure; and d) strengthen the skills of healthcare providers.

In addition, through PAHAL, we have collaborated with USAID and ChildFund to structure world's first pay-for-performance instrument - Mukti, focused on improving TB and nutrition outcomes in the state of Madhya Pradesh. The initiative is supported by the National Health Mission (NHM), the Government of Madhya Pradesh, and the Central TB Division, Government of India. Mukti addresses the bi-directional relationship between TB and under-nutrition, with an aim to contribute to the Government of India's target of eliminating TB by 2025.

PAHAL through its health financing models provides a unique platform for diverse stakeholders to come together and collectively advance action towards the national healthcare priorities.

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## **WHO || Family Planning Logistics Management Information System: Strengthening Family Planning Supply Chain, India (2020-2021)**

The SAMARTH initiative 'Sustain-Accelerate-Mainstream Access to Reproductive Health Through Health-systems' supported by World Health Organization (WHO) Country Office for India, together with Ministry of Health and Family Welfare (MoHFW), aims to achieve universal access to RH as per Government of India (GoI's) priorities on ending preventable maternal mortality. In 2017, MoHFW developed an innovative unified management information system – Family Planning Logistic Management Information System (FP LMIS) with an aim to manage supply chain from national level till ASHA level, reduce the supply disparities and regulate the flow of family planning supplies to the end users.

IPE Global has been assigned to provide support and relevant information to strengthen supply chain and improve commodity availability at all levels within and outside the facilities (community distribution) with the following objectives:

- Support the implementation and roll out of FPLMIS, including the establishment of a comprehensive data collection and reporting system by providing one state level consultant,
- Institutionalisation of FPLMIS data for decision making by encouraging state and district reviews on same by concerned authorities,
- Ensure access to FP commodities at facility and community level by strengthening FP supplies and its reporting.

**USAID II VRIDDHI - Scaling Up Interventions in Reproductive, Maternal, Neonatal, Child and Adolescent Health (RMNCH+A) Project (Jharkhand, Uttarakhand, Chhattisgarh, Punjab, Haryana, Odisha, Himachal Pradesh, Assam, Arunachal Pradesh, Madhya Pradesh, Manipur, Meghalaya, Mizoram, Nagaland and Tripura) India (2014-2021)**

Building on the gains of the National Health Mission, Ministry of Health and Family Welfare (MoHFW), Government of India (GoI) launched Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCH+A) strategy in the year 2013. The strategy laid a renewed emphasis on high-impact health interventions and addressed strengthening of healthcare services especially in the poor-performing geographies of the country. The scaling up RMNCH+A interventions project, also known as "Vridhhi," is a flagship project of USAID. The project supports the scale-up of high impact RMNCH+A interventions based on innovative approaches and management reforms with the goal of reducing morbidity and mortality among women and children in 15 states of India.

We are providing techno-managerial support to bridge the gap between policy and implementation through training and capacity building of health service providers, evidence sharing for informed decision making and effective dissemination strategies. Besides giving inputs to the state counterparts to prepare state-specific implementation guidelines, Vridhhi is supporting MoHFW, GoI through dedicated programme management units for national programmes Labour Room Quality Improvement (LaQshya) and Aspirational Districts. These units embedded within MoHFW provide implementation guidance, monitoring and support for the respective programmes. Other systemic support includes strengthening First Referral Units (FRU), roll out of Family Planning Logistics Management Information Systems (FPLMIS), and Public Financial Management (PFM).

**WHO II Management of Rapid Response Team members (RRTs) to support COVID-19 vaccine introduction, Pan India (2021)**

The project is aimed to support WHO in carrying out recruitment, pay-rolling, management and administration of fifty rapid response team members to support the Government of India in COVID vaccination programme.

IPE Global is engaged in the following:

- Support district with preparedness, implementation and monitoring of COVID-19 vaccine introduction,
- Interagency coordination for COVID-19 vaccine introduction and accountability mechanism of task forces,
- Support district with planning, capacity-building, implementation and monitoring of COVID-19 vaccine introduction,
- Document lessons learnt during the COVID-19 vaccine introduction, and
- Support planning and implementation of other immunization strengthening activities including routine immunization micro-planning strengthening and capacity-building of government medical officers on immunization.

The purpose of this project is to support the Government of India is scaling-up the COVID-19 vaccine drive and it gives IPE Global an opportunity to be part of the COVID vaccination efforts of the country.

**Children's Investment Fund Foundation (CIFF) II | UDAAN-A 360 Degree Approach to Prevent Teenage Pregnancy in Rajasthan (2016-2021)**

Udaan is an integrated intervention which seeks to prevent adolescent pregnancies in Rajasthan by leveraging existing government programmes and platforms for realising girl's potential and reducing the number of low birth weight babies born from teenage mothers. It adopts a multi-sectoral approach, layering interventions that go beyond sexual reproductive health education to fundamentally change the way adolescent programming is delivered. The project is being implemented with Department of Medical, Health and Family Welfare and Department of Education, Government of Rajasthan with a focus on pan-state reforms with demonstration of integrated approach in Udaipur and Dholpur districts.

We are providing technical assistance to the Government of Rajasthan for preventing adolescent pregnancy through a combined approach – that keeps girls in school, increases their knowledge of and access to sexual and reproductive health, and changes social practices that perpetuate early marriage and pregnancy. In addition, through project Udaan, we are indirectly reaching out to the adolescent girls across Rajasthan with information and services on pre-matric scholarships, thereby improving retention of adolescent girls in secondary schools. Project Udaan is expected to reach out to over 3 million married women of reproductive age with information on various methods of contraception and family planning services.

**FCDO II Project Design: FCDO India component of The Personal Protective Equipment and Medical Supplies Production (PPEP), India (2021)**

The overall objective of Personal Protective Equipment and Medical Supplies Production programme (PPEP) is to support Official Development Assistance (ODA) eligible countries to boost the production and diversify the supply of high-quality PPE and other medical products, capable of meeting local, regional and global demand specifications. The project also aims to ensure the high quality of the product, the programme will also work to improve labour standards, protect workers' health and safety in production, and ensure ethical and sustainable manufacture.

IPE Global, as the consortium partner will provide Technical Assistance (TA) to manufacturers of PPE in India. The team will also support in the following:

- Design an integrated MEL plan (including log framework, indicators),
- Development and finalization of an MIS system as per the agreed indicators in the M&E plan and standardized data collection formats.

**DASRA II Strengthening Youth and Adolescent Participation in Health Programmes through RKSK Platforms – Jharkhand, India (2021)**

The objective of the assignment is to strengthen the participation of youth and adolescents within the engagement platforms devised under the RKSK programme. The project will support in standardizing and codifying best practices and institutionalizing within the NHM system in the state. The pilot will be conducted in one block of Simdega district and will utilize the existing platforms such as Adolescent Health Days (AHDs), School Health Programmes (SHP), community mobilization for engaging with adolescents and youth. Adolescents especially over the age of 16 years transition into adult roles and responsibilities.

IPE Global is providing techno-managerial support to Dasra and its implementation agency in piloting Adolescent Health Days (AHDs) in select locations and support in institutionalizing/scale-up of the tested innovations. The team is further engaged in the following key activities:

- Developing comprehensive QA & monitoring plan and ensure oversight and quality assurance of the field level activities,
- Supporting in development of the technical project design and strategies for engagement of adolescents,
- Providing technical inputs as required for program documents – SOPs, manuals etc.,
- Co-facilitating and supporting NGO field staff in its engagement with block level supervisors to conduct review meetings,
- Developing block and sub-centre level report cards,
- Facilitating with government partners to ensure approvals for the implementation work,
- Supporting implementation agency in On-the-job coaching and mentoring of FLWs and supervisors,
- Undertaking comprehensive documentation – development of advocacy video, process documentation report.

**Vital Strategies II Project Management Support to Vital Strategies in Support for a Hypertension Prevention and Control Project in Collaboration with the Ethiopian Federal Ministry of Health, Ethiopia (2019-2020)**

Vital Strategies partners global expertise with local leadership to make progress against some of the world's most difficult health challenges. The Ministry of Health (MoH), Government of Federal Republic of Ethiopia in collaboration with World Health Organization and Resolve to Save Lives, an initiative of Vital Strategies, is conducting a Hypertension Prevention and Control Project in five regions & two city administrations of Ethiopia. The project includes hypertension prevention through screening, treatment, care and health education at the point of care, on service uptake and treatment adherence, and salt reduction campaigns at community and schools.

We provided project management support to Vital Strategies project - Support for a Hypertension Prevention and Control in Ethiopia. The team was responsible for payroll management if project staff in compliance with the laws of Ethiopia; issuing contracts to project staff using defined template; ensuring timely disbursement of payments to project staff and timely payment of taxes (as applicable) and other required compliances with Ethiopian authorities; providing adequate travel safety and security for the project staff, including pre-trip briefings and emergency medical and security assistance while they are on the project related travel.

**BMGF/FHI 360 || Alive & Thrive  
- Implementation Research on  
Integrating Maternal Nutrition  
Interventions in Existing MNCH  
Services in two Districts of Uttar  
Pradesh, India (2018-2020)**

Alive & Thrive (A&T) is a global initiative that supports scaling up of nutrition interventions with an aim to save lives, prevent illness, and ensure healthy growth by promoting optimal maternal, infant, and young child nutrition. To address the challenges of maternal under-nutrition in Uttar Pradesh, A&T demonstrated that innovative approaches to improving nutrition could be strengthened by leveraging existing service delivery platforms to deliver maternal nutrition interventions at scale.

We worked with the government systems to implement multi-pronged strategies to strengthen service delivery, focusing on capacity building of frontline workers and their supervisors, generating demand for maternal nutrition services through community engagement and interpersonal counselling (IPC) leading to behaviour change not only for the pregnant women but also for their immediate family members.

**Pathfinder International ||  
Facility Assessment of Family  
Planning Focusing Adolescent  
and Youth-Friendly Services  
(AYFS), PFP, PACFP, Post MR-FP  
and Gender Responsiveness,  
Bangladesh (2019)**

In partnership with the Ministry of Health and Family Welfare, Government of Bangladesh, Pathfinder International provided adaptive, needs-driven technical assistance and systems strengthening at national, divisional, district, and upazila levels. This project reached those most in need of family planning services and information - districts and divisions with lower modern contraceptive prevalence and populations facing the greatest barriers.

We conducted facility assessment to present a snapshot of family planning programming with a focus on AYFS, PFP, PACFP, Post MR-FP and gender responsiveness across the 32 districts in the 4 divisions of Dhaka, Mymensingh, Sylhet and Chittagong where use of family planning methods is relatively lower. The assessment covered three main components – adolescent reproductive health services; integration of family planning into post-partum, post-abortion care, post-MR services and gender responsiveness. The assessment looked at the status of adolescent and youth reproductive health and the Government of Bangladesh's response to adolescent and youth family planning needs, including gender considerations.

**UNICEF || Conduct Child  
Protection System Mapping and  
Assessment, Bangladesh  
(2018-2019)**

The project aimed to obtain a common understanding of the current system, its strengths and weaknesses, agreement on a division of labour among ministries, and agencies and their roles in redefining and strengthening the system. The primary objective of this assignment was to undertake a thorough mapping and assessment of country-level comprehensive child protection systems, laws, policies, services and procedures and capacities in place and to identify obstacles and opportunities in enforcing these laws and policies, especially in reaching vulnerable and excluded groups in Bangladesh.

We assisted UNICEF in providing an update on the key components of the child protection systems in Bangladesh. We identified and analysed major strengths, weaknesses, gaps and opportunities in the current system; developed an analysis of information on the quality of services, coordination, measures and monitoring systems; assessed the government agency's perception, capacity and ownership to enforce the children's act which if properly resourced would contribute to strengthening of the child protection systems; provided recommendations for further UNICEF programmatic support for system strengthening.

**The World Bank || Capacity  
Building of State, District and  
Block Convergence Committees  
on Multi-sectoral Planning and  
Monitoring of Nutrition Actions,  
Bihar, India (2018-2019)**

Government of India's National Nutrition Mission (NNM) brought about convergence of various nutrition related schemes by bringing under one framework key nutrition related interventions, indicators and targets to be monitored and achieved by relevant line departments implementing these schemes. For this, the convergence committees were constituted to facilitate the operationalization of this framework.

We supported the Convergence Committees in two districts of Bihar - Sitamarhi and Gaya, by building their capacity to provide an unparalleled opportunity to facilitate a lasting and shared understanding amongst key ministries and stakeholders on the importance of nutrition and its centrality in determining overall human development. This included identification of gaps and potential interventions to address these gaps, supporting the development, implementation and monitoring of concrete action plans by the convergence committees at different levels, defining multi-sector nutrition convergence actions and assisting the committees in implementation and monitoring of the action plans.

**DFID II Implementation of Active Case Detection (ACD) Strategy for Visceral Leishmaniasis (VL) and Post Kala-Azar Dermal Leishmaniasis (PKDL) under the KalaCore Tackling Visceral Leishmaniasis Programme, India (2016-2019)**

DFID supported the Government of India for eliminating Visceral Leishmaniasis (VL) and Post Kala-Azar Dermal Leishmaniasis (PKDL) as a public health problem. The project supported Government of India's National Vector Borne Disease Control Programme (NVBDCP) initiatives.

IPE Global supported enhanced disease surveillance and building capacity for early detection of disease outbreaks and minimising their spread and impact. Major activities included identification and geo-tagging of high incidence villages; training of ASHA workers, community mobilisers and volunteers on identification of VL and PKDL cases. The team also supported the health departments in Bihar and Jharkhand to roll-out liposomal Amphotericin B (AmBisome) for effective Kala-Azar treatment in district hospitals and PHCs across endemic districts.

**UNICEF II Skill based Assessment of Service Providers who received Nutrition Specific Competency based Training in 26 Districts of Bangladesh (2016-2018)**

In a multi-year Government of Bangladesh-UNICEF Joint Work Plan for Maternal and Child Nutrition, UNICEF committed to strengthening human resource capacity in nutrition at district level and below, with a specific focus on the competencies required to deliver quality nutrition services. Approx. 30,000 frontline service providers were trained on delivering nutrition interventions in 26 districts of Bangladesh to address critical skill gaps among health care providers.

We conducted third party evaluation of these trainings, to identify gaps and challenges in the adoption of skills amongst the cadre of health and family planning service providers. The evaluation helped the Government of Bangladesh and UNICEF to introduce performance-based incentive programmes for training institutions and get insights into gaps and improvement areas.

**DFID II Ethiopia Safe Space Programme (ESSP), Ethiopia (2016-2017)**

ESSP contributed to improved personal, social, health, safety, education and financial outcomes for 2,000 adolescent girls in Amhara and Oromia regions of Ethiopia – building girls' confidence, skills and knowledge as they progress through adolescence. ESSP was a pilot programme designed to test an approach for national scale-up. ESSP contributes to the achievement of SDG-5 'Achieve gender equality and empower all women and girls.'

IPE Global completed design of the programme, with Federal Government of Ethiopia (GoE), (MoH, MoE, MoWCA) and other stakeholders, and developed an implementation plan for a nationwide Safe Spaces programme. In addition, we implemented Phase 1 of the programme in Amhara and Oromia regions and helped build capacity of stakeholders to implement and manage Phase 2 of the programme.

**KfW II Accreditation and Quality Assurance Services for the Output Based Approach (OBA) in Kenya (2014-2016)**

The Government of Kenya (GoK) with support from KfW implemented an OBA voucher programme to subsidize priority reproductive health services in Kenya. A flagship Vision 2030 project of GoK, the project aimed to reduce maternal and infant mortality through improved delivery of reproductive health services - for safe deliveries, long-term family planning methods and victims of gender violence.

We designed a web enabled system for real time digital data collection, analysis & management and trained health workers in Kiambu, Kitui, Kisumu, Kilifi and informal settlements of Korogocho and Viwandani in Nairobi County. Specifically, we:

- assessed, identified and issued scores for improvement of health facilities based on minimum ISO/WHO standards of operations,
- conducted 6 monthly assessments for a total of 442 health facilities across 2 years,
- implemented capacity building and certification of health workers providing services to patients for Clinical Family Planning, Laboratory, Pharmacy, Maternal Wards, Psychosocial Support aimed at enhancing knowledge on acceptance of Family Planning

**DFID II Design and Implementation of Sector Wide Approach to Strengthen Health (SWASTH), Technical Assistance Support Team (TAST) (Bihar, India), (Phase I: 2009-2010); (Phase II: 2010-2014); (Phase III: 2014-2016)**

SWASTH aimed to design and implement cutting-edge reforms for the health, nutrition and WASH sector in Bihar, to bring about lasting changes in the health and nutritional status of the people, particularly the poorest and socio-economically marginalised.

As Technical Assistance Support Team (TAST), we worked with the departments of Public Health & Family Welfare, Women & Child Development, Social Welfare and Public Health Engineering to assist the government in providing preventive and curative health services to the people of Bihar and improving its procurement systems and implementation arrangements. We helped build skills and strengthen capacity of these departments by focusing on improving equitable access to quality healthcare services, accountability of staff, organisational development and human resource development.