The Deliver the Future campaign, co-hosted by Côte d’Ivoire, Germany, the Netherlands and the World Bank, aims to strengthen the health and rights of women, children and adolescents in some of the world’s poorest countries – unleashing their full potential and securing healthier, more prosperous futures.

Investing in the GFF will deliver more and better financing for health

A new $800M investment in the GFF in 2023 will mobilize a total of US$20.5B by 2025, including:

- **US$8B** in World Bank (IDA/IBRD) financing or country health plans, US$2bn of which is additional financing to target health interventions for women, children and adolescents unlocked through GFF engagement
- **US$5B** in financing from other global development partners
- **US$7.5B** in domestic resource mobilization from GFF partner governments

This will enable more than 250 million women, children and adolescents to access essential, lifesaving health services, rebound from the COVID-19 pandemic and build more resilient communities.

Why now?

Stalled progress and the multitude of global crises are jeopardizing the lives, rights and opportunities of women, children and adolescents.

- Many lower-income countries are struggling to return to pre-COVID economic growth and health investments are declining. Over the next five years, 41 governments are estimated to spend less on health than before the pandemic.
- More than 250 million women and adolescent girls cannot access modern contraceptives, and more than 4.5 million women and babies die every year from mostly preventable conditions.

Expanding affordable and equitable access to primary health care for women, children and adolescents will save lives and reignite progress toward the Sustainable Development Goals (SDGs).

- Building strong, resilient primary health care systems that provide for the needs of women, children and adolescents is one of the smartest investments any country—and the global community—can make. It will drive economic growth and help meet the SDGs, which will save at least 7.8 million lives.
- Two-thirds of all maternal deaths, stillbirths, newborn and child deaths in the world occur in the 36 GFF partner countries. Progress requires changing the health and development trajectory in those countries, as well as in GFF-eligible countries that have high mortality rates.
GFF grants will maximize available global WBG health financing and address fiscal space constraints at a time when the poorest countries in the world are facing severe debt distress.

- With the GFF’s direct link to World Bank country operations, the successful IDA20 replenishment creates a time-bound opportunity to pair GFF grants with the largest available global source of concessional financing to drive new health financing and policy reforms for advancing the rights and opportunities of women, children and adolescents.

- Every US$1 of additional GFF support in this campaign is expected to leverage as much as US$10 of World Bank financing for country health plans over the next three years.

- Linking new GFF grants to World Bank IDA operations will also enable partner governments to access targeted technical assistance, and policy support, providing them with the knowledge, skills, and resources necessary to implement their investment plans and reform agendas effectively.

Through the GFF’s position at the World Bank and partnership with the UN and CSOs, the GFF helps drive legal changes and targeted investment across other sectors.

- Some of the most persistent barriers to equitable and effective access to health services for women, children, and adolescents are rooted in systemic issues that will require: legal reforms to institutionalize changes; targeted social protection programs for the most vulnerable populations; and collaboration with the education sector for reaching adolescent girls.

- An important advantage of the GFF’s position is its ability to cofinance across sectors and identify policy triggers that can enable change at scale.

Why invest in the GFF?

More and better financing – and better health outcomes.

- Every $1 in GFF has led to US$7 in World Bank funds, US$6.3 from other global funders and US$9.3 from governments’ own domestic resources.

- The share of World Bank financing in GFF supported countries that has been allocated to this agenda has increased by 12%. In contrast, GFF-eligible countries that aren’t yet supported by the GFF have seen a decline of 2% in World Bank financing allocated to this agenda. By working with the GFF, more financing is being allocated to women, children, adolescent health.

Proven impact on system and legal reforms

All GFF partner countries are undertaking health system reforms, 22 of which are focusing on human resources for health and quality of care, 18 on public financial management and 16 on health information systems and civil registration and vital statistics (CRVS).

- Mozambique’s GFF supported program has linked the use of scorecards and community consultations to payments to improve facility performance and identify bottlenecks; this led to an increase in the number of trained community health workers by 30 percent.
Donor countries and World Bank Group commit financing for IDA based on the needs of partner countries and development priorities. Country allocations are set, based on a range of factors including development needs. The World Bank and partners work with governments and stakeholders to determine sectors for priority investments and related reforms.

GFF financing will help incentivize investment for women, children and adolescents, maximize concessional financing and deliver IDA 20 policy commitments.

Programs are defined to target key development challenges. This includes policy commitments to restore and expand access to sexual and reproductive, adolescent, maternal health and nutrition services in at least 30 IDA countries.

22 GFF partner countries are focusing on reducing geographical inequalities in accessing services as well as 18 that are prioritizing marginalized populations, and 18 looking at specific actions to promote gender equality.

- In Burkina Faso, GFF investments focus on strengthening the community health system for SRHR by training community health workers in family planning and reproductive health. In 2021, the regions that had the highest ratio of community health workers trained in family planning and reproductive health reported the highest contraceptive prevalence rates.

- In Cameroon, through the country investment case supported by the GFF, one priority policy amendment that was identified was a change to national regulations to allow pregnant girls to remain in primary and secondary school with the option of taking maternity leave.

The GFF’s approach to sustainable financing is working and ensures that health services for women, children and adolescents are prioritized and integrated at scale. In eight years, with GFF support, countries have made the following significant gains:

- **US$2bn** committed to the partnership since 2015
- **US$32bn** unlocked for women, children and adolescent health

2023 is an urgent and time-bound opportunity to pair GFF grants with the largest available global source of concessional financing to drive new health financing and policy reforms for advancing the rights and opportunities of women, children and adolescents.
The GFF engagement process: step by step

1. Government leadership confirms a) they have or plan to establish a country platform for RMNCAH-N, comprising stakeholders such as health and finance ministries, civil society, youth, and the private sector; b) their willingness to commit IDA resources to health and increase their own health budgets.

2. Development of a government-led, costed national plan that sets out a) prioritized, cost-effective interventions, b) implementation of necessary policy and system reforms, and c) aligns external support.

3. Through the plan, countries can enable greater coordination, alignment and pooling of resources, including from domestic budgets, bilateral and multilateral assistance, foundations, and the private sector – leading to greater efficiency and impact.

4. Once the plan is completed, countries access GFF grants as part of World Bank-financed projects for scaling up access to services, health system reforms, and boosting domestic resource mobilization and efficiency.

• Health system reform
• Scale up of high-impact interventions
• More and better financing for health

The GFF’s unique and key features include:

• **The Investment Case.** Each GFF partner country develops a costed plan that lays out its priorities and strategies for improving women, children, and adolescent health, and serves as a roadmap to target the most cost-effective interventions, implement the necessary policy and system reforms, and align external support on the pathway to sustainability. The GFF aims to increase the alignment and coordination around health investments in countries by encouraging joint donor and other stakeholder support for the investment case. Countries use pre-existing or new country platforms for this coordination that include civil society and private sector members as well as donors and multilaterals.

• **The unique partnership with the World Bank.** The GFF leverages the Bank’s country presence, expertise, financial resources and on-budget, whole-of-government footprint beyond health to support effective implementation of its Investment Cases. In turn, the Bank benefits from the GFF’s flexible financing and expertise on reproductive, maternal and child health and nutrition and its ability to coalesce funding and technical assistance from a diverse array of partners. As a result, more WB financing is targeted towards this agenda and countries achieved or slightly exceeded the target range of beneficiaries on nutrition services, routine vaccinations, and births attended by skilled delivery personnel.

• **Promoting country ownership and leadership.** By bringing together all development actors around the Investment Case, countries are in the driver’s seat and there is greater coordination, alignment and pooling of resources, including from domestic budgets, bilateral and multilateral assistance, foundations, and the private sector – leading to greater efficiency and impact.

• **Supporting engagement, voice and participation of civil society and youth.** Raising the voices and needs of communities that have previously been excluded in health programs, including on issues such as SRHR, is key for the model. GFF is working to enhance an improved culture of civic dialogue, transparency, mutual accountability and joint action between governments, external partners and non-state actors in GFF countries as well as financially supporting CSOs and youth to play their independent role in advocacy, policy shaping and accountability.

• **Linking financing to resilient systems and sustainable results.** GFF investments go above and beyond direct service provision to promote resiliency by upskilling the health workforce and driving the necessary improvements in public infrastructure, public financial management systems, data systems and monitoring. Further, because GFF support is on budget, it paves the way for countries to maximize and increase domestic financing for health as they grow – to reach the goal of Universal Health Coverage.

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