GLOBAL FINANCING FACILITY

SUPPORTED BY WORLD BANK GROUP

Portfolio Update

24 April 2017, Washington DC

FIFTH INVESTORS GROUP MEETING

The shift from design to implementation

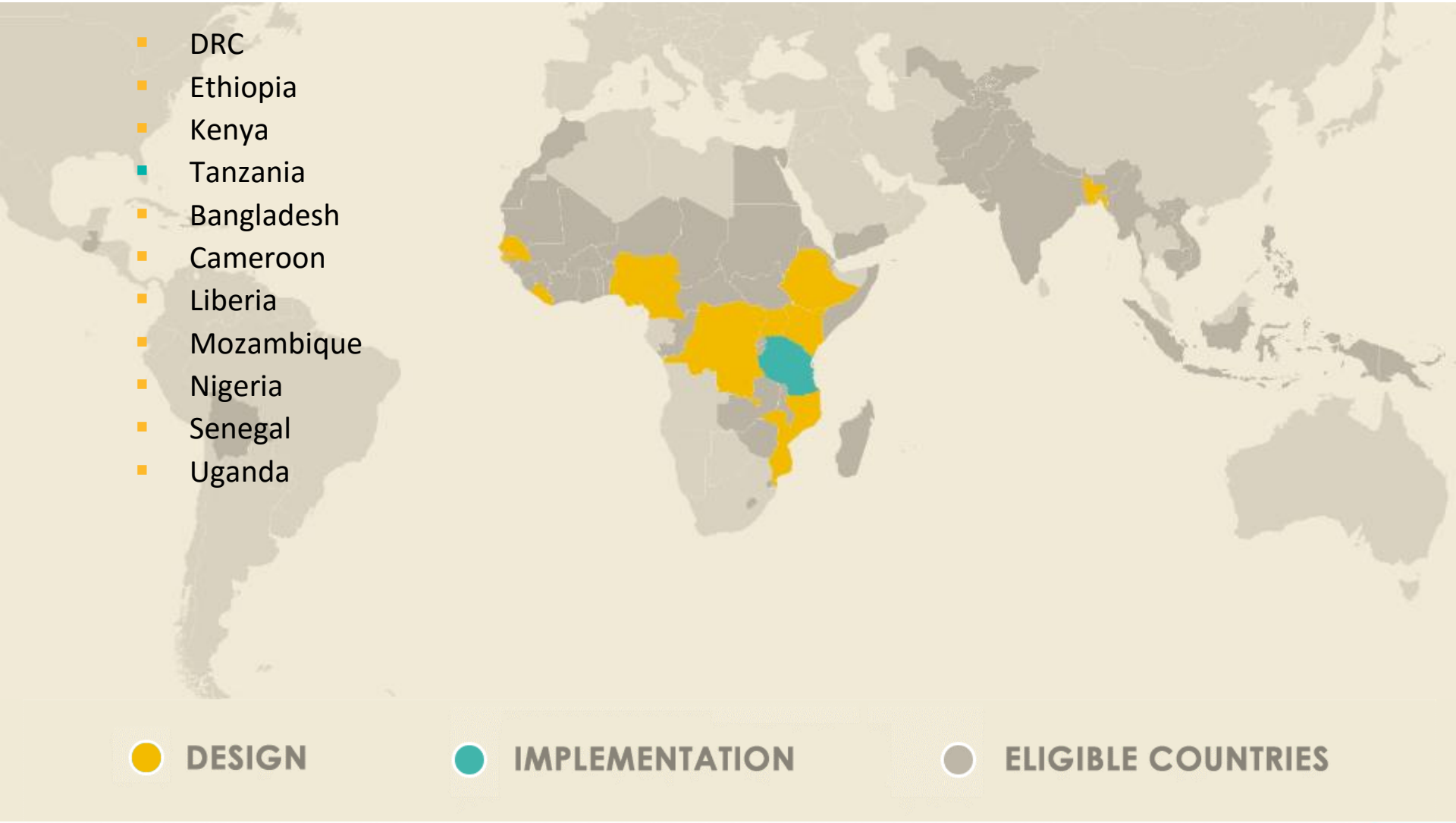
beginning of **2015**

- DRC
- Ethiopia
- Kenya
- Tanzania

The shift from design to implementation

beginning of **2016**

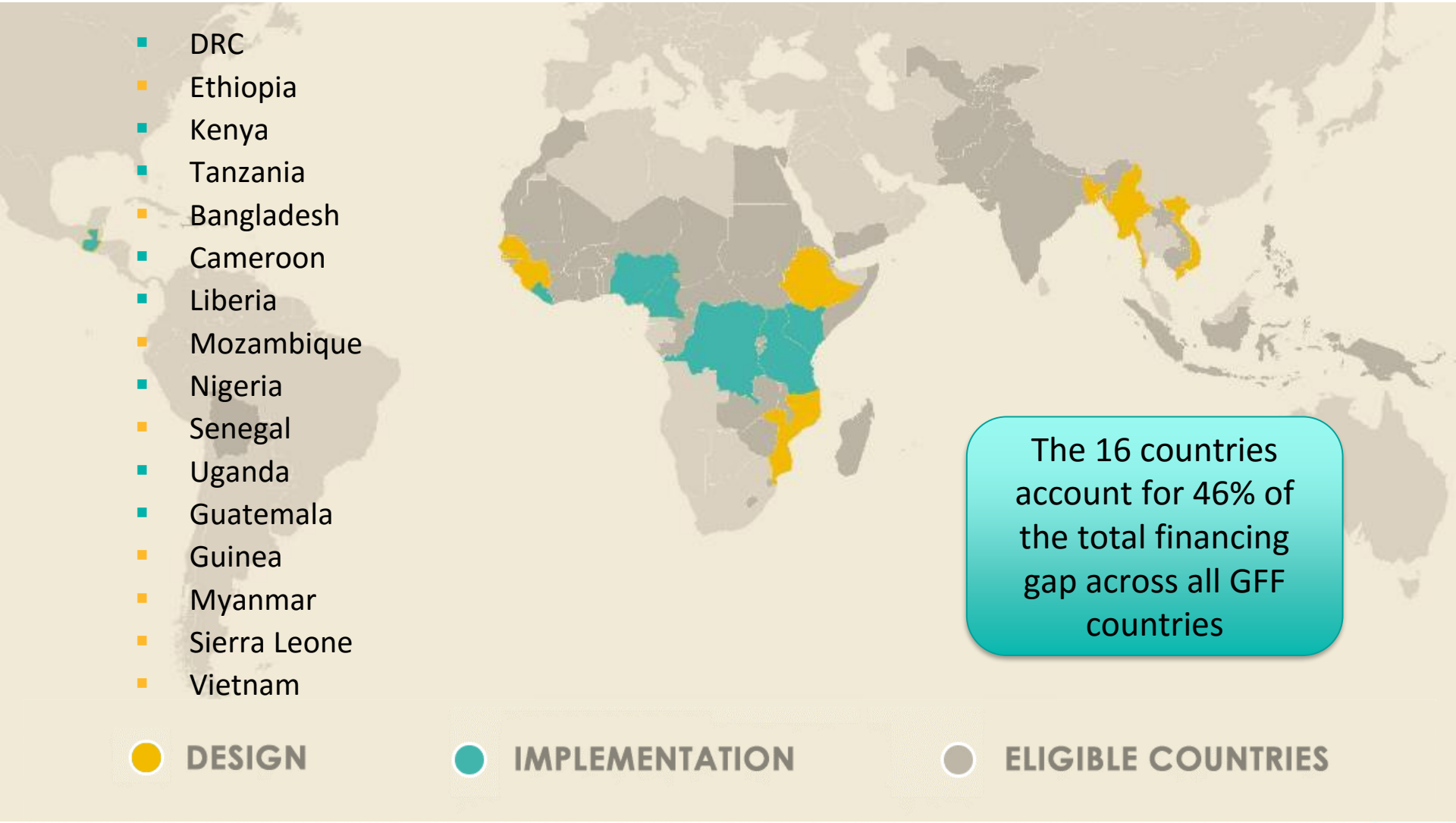
- DRC
- Ethiopia
- Kenya
- Tanzania
- Bangladesh
- Cameroon
- Liberia
- Mozambique
- Nigeria
- Senegal
- Uganda



The shift from design to implementation

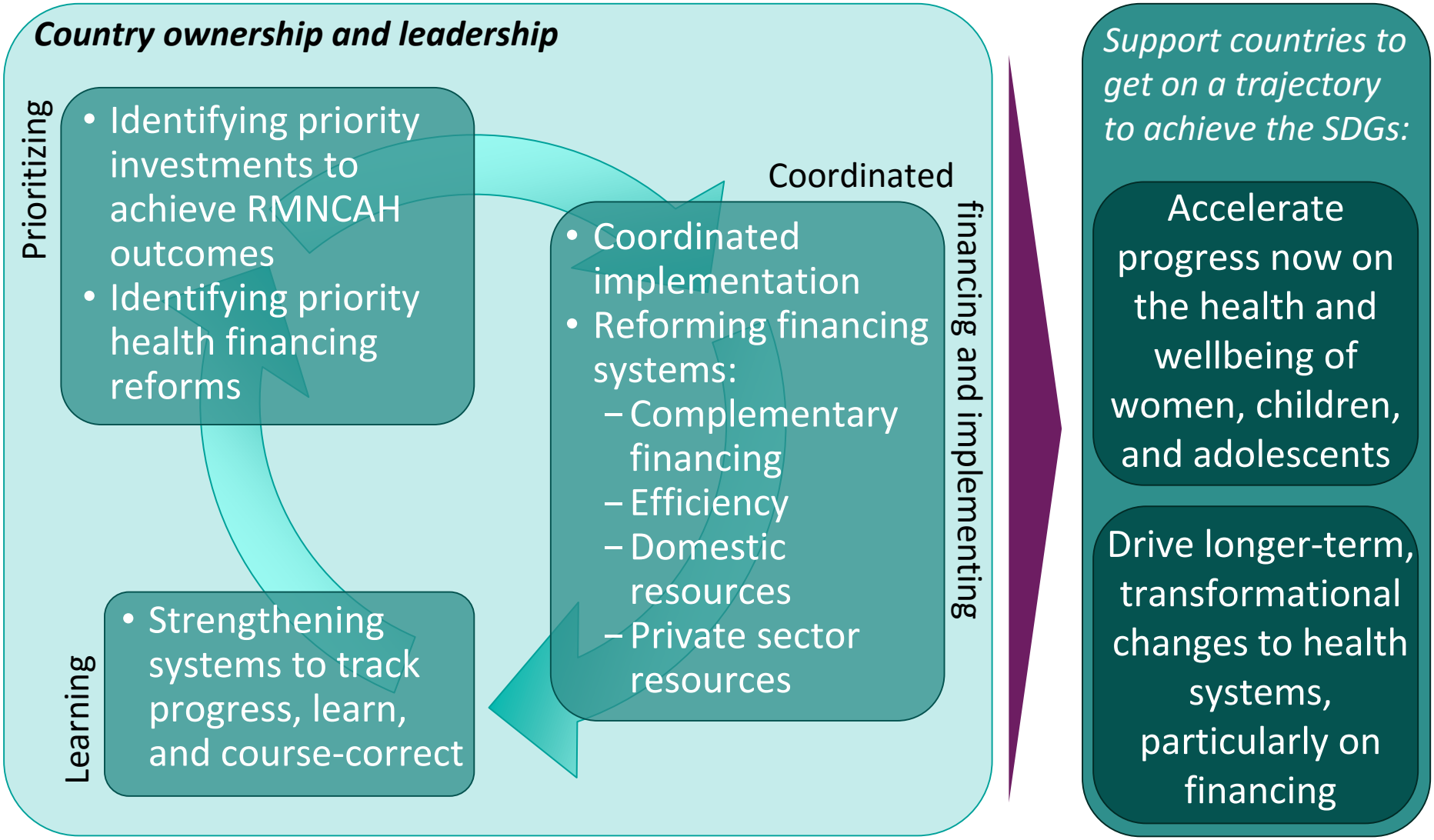
today

- DRC
- Ethiopia
- Kenya
- Tanzania
- Bangladesh
- Cameroon
- Liberia
- Mozambique
- Nigeria
- Senegal
- Uganda
- Guatemala
- Guinea
- Myanmar
- Sierra Leone
- Vietnam



The 16 countries account for 46% of the total financing gap across all GFF countries

How the GFF drives results



Highlights across the GFF value proposition

Prioritizing

- Setting evidence-based, **equitable** and affordable priorities (RMNCAH interventions including overlooked technical areas such as **nutrition**, health systems strengthening, and **multisectoral approaches**) to achieve RMNCAH outcomes
- Identifying priority health financing reforms

Coordinated financing and implementing

- Financing and implementing programmatic priorities in coordinated manner;
- Reforming financing systems:
  - ✓ Improving efficiency;
  - ✓ Mobilizing domestic resources;
  - ✓ Increasing and better aligning **complementary financing**;
  - ✓ Leveraging **private sector** resources;

Learning

- Strengthening systems to track progress, learn, and course-correct
- Joint learning across countries

Taking a multisectoral approach

Social protection

- **Cameroon**: targeting adolescent girls with cash transfers, linked to education outcomes and outreach from nutrition services as well as life skills coaching

Education

- **Liberia**: reaching adolescents through both community campaigns and in-school actions to increase acceptability of RMNCAH interventions; change social norms condoning GBV
- **Bangladesh**: health activities in schools to delay girls' age at marriage, timing of first birth, and improve readiness for healthy pregnancy and parenthood

WASH

- **Guatemala**: incorporating SBCC on hygiene; small water and sanitation systems, water filters for households and strengthened water quality monitoring systems; targets rural areas with indigenous populations

Nutrition across GFF portfolio

Nutrition Interventions
(Direct and indirect)

- SBCC for improved infant, young child, adolescent and maternal nutrition care practices
- Treatment of moderate and severe acute malnutrition
- Micronutrient supplementation (through ANC, PNC, VA campaigns, etc.)
- Increased dietary diversity
- Kangaroo Mother Care for LBW infants
- Deworming
- FP for improved birth spacing
- Sanitation; hygiene; potable water

Guatemala: Strengthened PHC system for nutrition/health service delivery; CCT program with health co-responsibility

Tanzania: Complementary financing with Power of Nutrition and USAID Trust Fund; addressing bottlenecks related to HR and nutrition/health commodities procurement

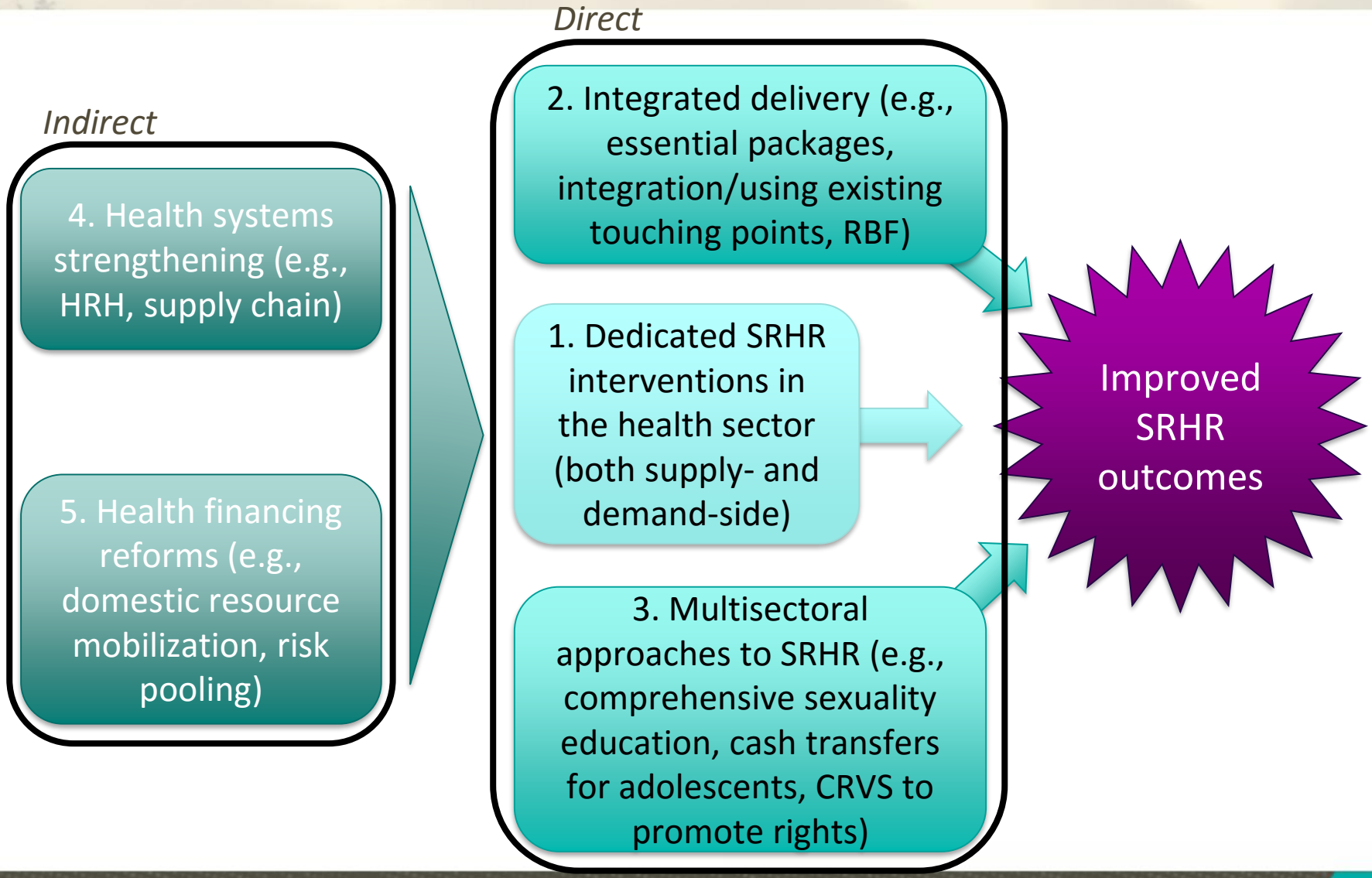
Focus on maternal, infant, child, and adolescent nutrition in all Investment Cases

DRC: FP/SRHR to reduce adolescent pregnancy & decrease LBW; maternal nutrition; promotion of diversified diets; WASH

Cameroon: KMC for preterm/LBW infants; scale-up of PBF for community-based nutrition service delivery in conflict-affected areas

Access to health services

Pathways to impact: how the GFF improves SRHR outcomes



Equity and complementary financing

Equity: Driving principle and defining lens

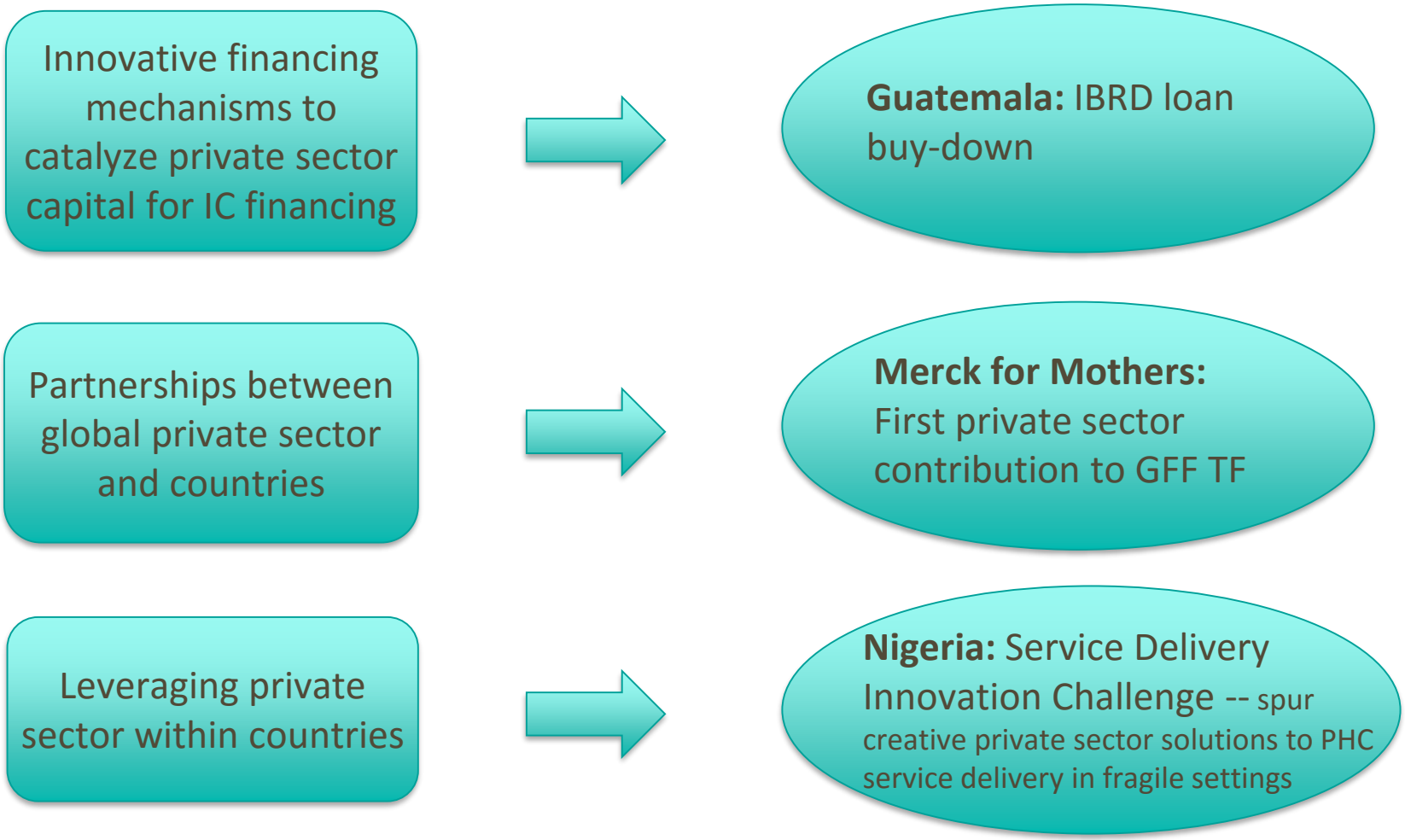
- **Cameroon**: Focus on most vulnerable populations led to geographic prioritization (four northern regions); higher subsidies for services provided at free/reduced cost to refugee populations, and means-tested vouchers to increase demand
- **Nigeria**: Equity-directed investments to specific RMNCAH needs of rural poor in states experiencing conflict: mental health services for victims of GBV; PHC strengthening due to greater destruction of clinics compared to hospitals

Complementary financing: Robust engagement across GFF countries

- **Bangladesh**: Sector-wide approach for health (SWAp) for aligned funding and TA; strong coordination around national health priorities
- **Ethiopia**: Pooled funding through *Sustainable Development Goals Performance Fund* + Power of Nutrition + Bill & Melinda Gates Foundation
- **Liberia**: Resource mapping yielded both large financing ask and gap – strong engagement with multiple financiers (EC, Gavi, USAID, Germany Global Fund, JICA and WBG) going long way toward meeting the gap

Private sector engagement

Three main pathways to leverage private sector resources for RMNCAH



Learn more

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Gavi
The Vaccine Alliance
The Global Fund
To Fight AIDS, Tuberculosis and Malaria
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