

GFF Portfolio Update



GFF Countries

Bangladesh
Cameroon
DRC
Ethiopia
Guatemala

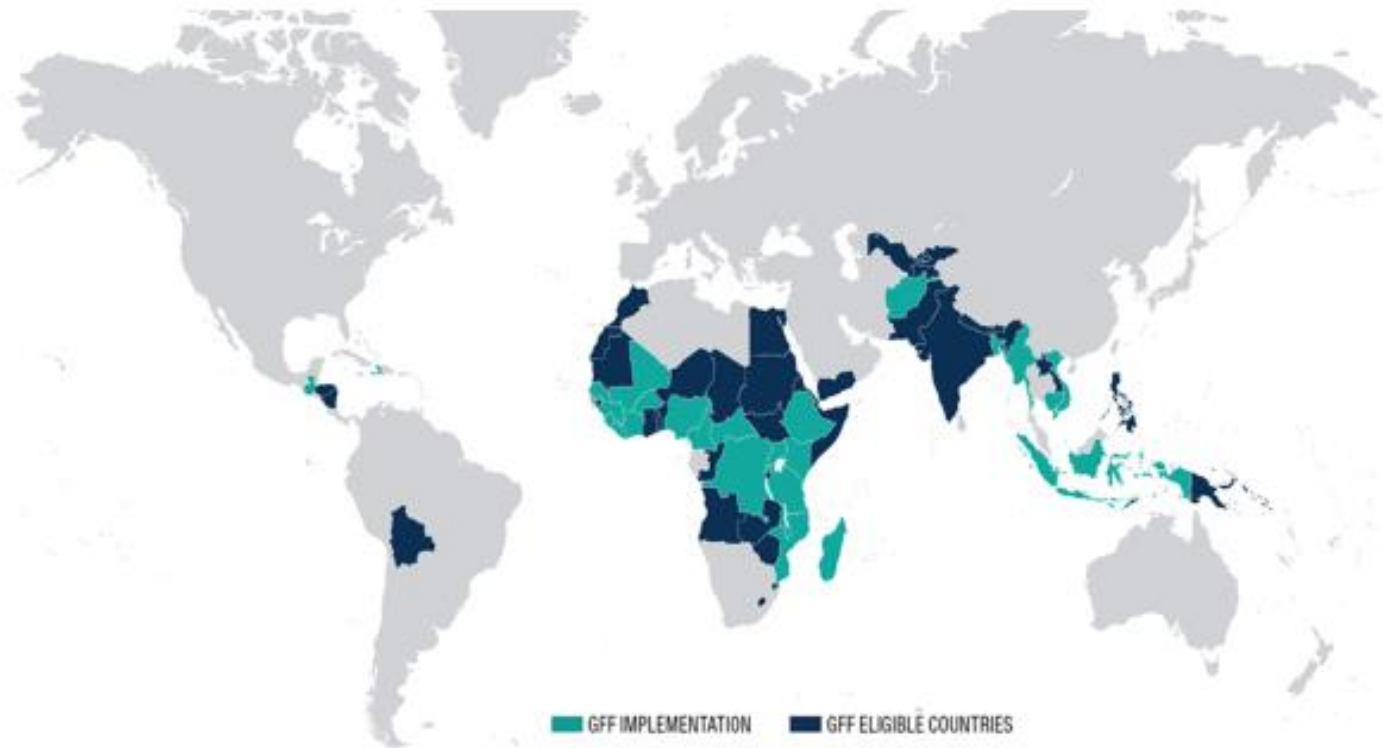
Guinea
Kenya
Liberia
Mozambique
Myanmar

Nigeria
Senegal
Sierra Leone
Tanzania
Uganda

Vietnam
Cote d'Ivoire
Afghanistan
Burkina Faso
Cambodia

Central African
Republic
Haiti
Indonesia
Madagascar

Malawi
Mali
Rwanda



Good progress on several fronts

- Strong country leadership, including health, finance, education and social protection
- Continued strengthening of the ICs
 - Mid-term reviews, theory of change, results frameworks
- Still a young portfolio, but more countries are producing and reviewing results
 - 30% disbursement (IDA/GFF) in projects > 24 months
- More systematic roll-out in the 11 new countries
 - Liaison Officers, roadmaps
 - Initiation missions, some joint missions with partners
 - Country Implementation Guidelines
- Engagement of technical and financial partners, growing interest in the private sector

Some highlights

- **Health Systems Strengthening:** strong emphasis on strengthening the system to deliver on an integrated package of services for which the most common health system bottlenecks will need to be addressed: supply chain, human resources for health and data systems
- **MNCH:** ICs have generally prioritized investments in line with globally-recommended practices and priorities. Several countries have focused on community health platform, facility-level interventions, immunization, effective connection of the MNCH continuum, innovations
- **SRHR:** strategic purchasing reforms, contraceptive security and other SRH supplies, multi-sectoral strategies to address individual and social determinants of SRH outcomes

Some highlights

- **Nutrition:** i) nutrition-specific interventions and maternal nutrition, ii) adolescent nutrition; iii) integrated and multi-sectoral approaches; iv) double-duty actions; v) growth monitoring and promotion; vi) private sector
- **CRVS:** i) expansion of civil registration services, ii) computerization and development of integrated systems, iii) recording causes of deaths, iv) advocacy, v) capacity building in registration process and supervision

Some challenges remain

- Continued need to strengthen government leadership capacity, reducing fragmentation
- Country platforms will need continued attention, particularly during IC implementation
 - Independent reviews, self-assessments, Liaison Officers
 - Variable representation of CSOs, private sector and youth on country platforms
- Even more aligned complementary financing
 - Regular resource mapping and tracking
 - Coordination of 3Gs, engaging RDBs
- Ensuring countries are well equipped to use data for decision-making and accountability
- Mobilizing people and instruments to scale-up domestic resource mobilization agenda

Country expansion: opportunity to further strengthen GFF approach

- Ensure inclusive and strong country platforms
 - Liaison Officer
 - Introductory workshop, Initiation missions, with partners
 - Roadmaps
 - Resource mapping and tracking
 - Special measures to include partners who do not have a country presence
- Prioritized investment case with aligned financing
 - Revised IC Preparation Guidelines
 - Special focus on DRM
 - Engagement with International Finance Corporation (IFC)
- Increased focus on data driven monitoring and implementation support
 - Strengthened capacity within the Secretariat and in partnership with others



THE FEDERAL DEMOCRATIC REPUBLIC OF ETHIOPIA

Federal Ministry of Health

GFF PROGRESS IN ETHIOPIA

OVER THE LAST 6 MONTHS



GFF ADDED VALUE:

Reducing financing gaps to improve RMNCAH outcomes through implementation of high impact interventions in equitable, quality and sustainable ways as stipulated in the Health Sector Transformation Plan (HSTP) (which is the Investment Case)

RMNCAH

- **The postnatal care** service directive and equity strategy were endorsed;
- **86% of health centers** reported their Health Management Information System (HMIS) data on time.

HEALTH FINANCING

Support Federal Ministry of Health (FMOH) in:

- Finalizing the Public Expenditure Review;
- Assessing whether HSTP priorities are codified in the budget;
- Political feasibility of Result Based Financing; and
- Preparation for evidence based policy dialogue on Domestic Resource Mobilization

PRIVATE SECTOR

Support to FMOH is currently through TA and capacity building efforts:

- First private sector health assessment for Ethiopia conducted;
- Build capacity of FMOH to select and manage private sector initiatives and PPPs (first training workshop conducted Feb 2019, follow up workshop May 2019);
- Support FMOH to lead development of Ethiopia's first ever private sector strategy for health, integrated into development of next HSTP (May 2019)

CHALLENGES



HEALTH FINANCING



BETTER TRACKING

domestic and external resources
behind HSTP priorities



PRIORITIZING HEALTH

in the government budget
given Public Financial
Management bottlenecks and
limited fiscal revenues

PRIVATE SECTOR



MANY PPP OPTIONS

and types of private sector partnership



PPP STRATEGY NEEDED

for prioritization and alignment
with HSTP



REGULATORY/POLICY CONSTRAINTS

for private sector participation in health



THANK YOU

Liberia portfolio update: key challenges & actions



Country platform

Challenge: It has been difficult to maintain adequate focus on monitoring implementation of the RMNCAH Investment case when working through existing governance structures.

Action: We have established a high-level RMNCAH Task Force to critically assess the bottlenecks to improved RMNCAH outcomes and develop feasible & timely solutions for addressing the identified issues.



Resource mapping & tracking

Challenge: Participation by partners in our resource mapping exercise is below 100% & there is no mechanism to track how funds were actually spent.

Action: We are working with a firm to improve our ability to monitor how money is being invested in RMNCAH by making the resource mapping process more user-friendly and building in a system for tracking actual expenditures.



Sub-national capacity

Challenge: There has been low capacity at the county-level to implement and monitor activities related to the RMNCAH Investment Case.

Action: A technical assistance agency is now receiving performance-based pay to improve the management capacity of 3 county health teams, with plans to expand to additional counties & conduct implementation research to document lessons.

8th GFF Investors Group Meeting

Washington DC, April 15th 2019



Republic of Senegal
One people – one goal – one faith

Ministry of Health
and Social Action



IMPLEMENTATION STATUS OF THE GFF IN SENEGAL

OVER THE PAST SIX MONTHS

INVESTMENT CASE ENDORSED BY THE MOHSA

Highly inclusive process, consensus on prioritization, resource mapping, IC budgeted

June 2018

IC DISSEMINATION

in regions covered under scenario # 1

December 2018

M&E FRAMEWORK UPDATED FOR ALIGNMENT

with national strategies' M&E frameworks. M&E framework then disseminated at regional level

January 2019

STUDY ON HOW TO CODIFY IC PRIORISATION

considering MoHSA's and national's budgets

March 2019

IMPLEMENTATION

Via domestic and external financing (i.e., community health insurance and reforms, strengthening the availability of maternal and child healthcare furniture, adolescent health strategy...)

CHALLENGES

- PLATFORMS OPERATION
- IC FINANCING FOR SCENARIO #1
- SCALING UP TO REGIONS COVERED UNDER SCENARIO #2



Thank you

for your attention



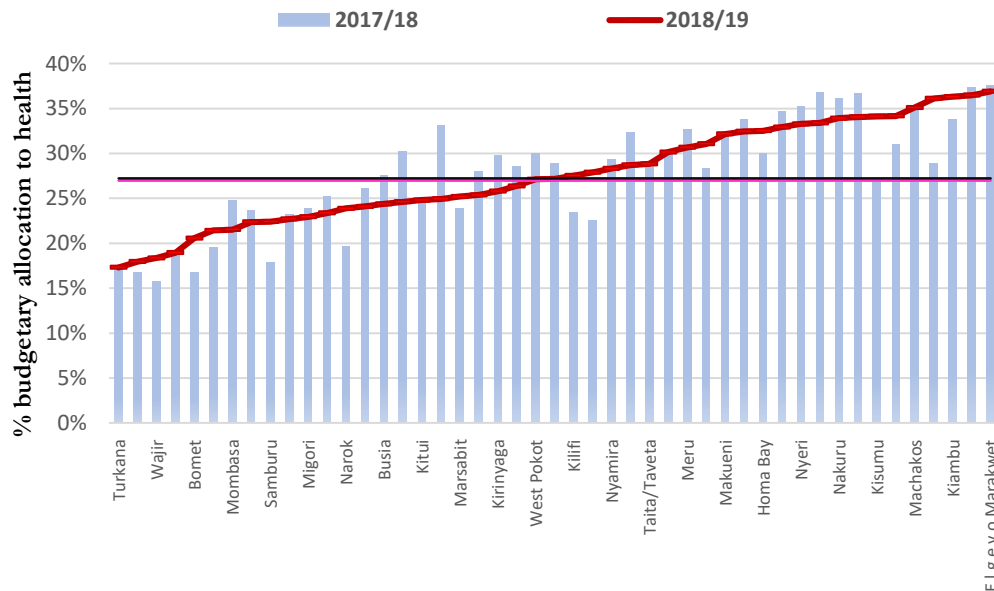
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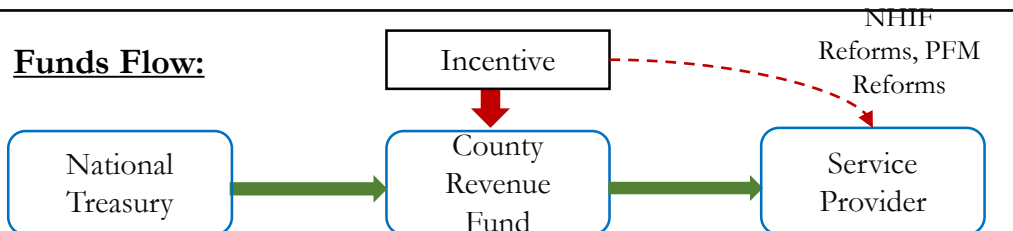


KENYA COUNTRY PROFILE: HIGHLIGHTS

County budgetary allocation to health against total county budget.



Funds Flow:



UHC Reforms:

- Confidence in the UHC reforms in pilot built by the GFF co-financed THS project.
 - Funds towards preventive health services:
 - Individual level services: community health strategy
 - Population level services: public health services
 - Funds towards curative services:
 - ~ 70% for essential medicines
 - Operations and maintenance
- Funds flow follows THS model.

Challenges:

- Efficiency of allocation
 - Counties have increased budget allocations to health.
 - 79% of budget towards recurrent expenditure
 - 75% of recurrent towards personnel emoluments
- Ring fencing versus **effective** ring-fencing
 - THS funds ring fenced at county level BUT not reaching the frontline
 - Therefore, incentives of the performance based financing component applied at the wrong touchpoint

QUESTIONS AND DISCUSSION



GFF Supported Country Expansion Criteria



Country selection process based on approved GFF business plan

- Assessment of objective metrics:
 - Approach to assessing need in GFF originally considered in Business Plan process → agreement reached on a resource allocation formula
 - $\text{Allocation} = \text{Need}^2 * \text{Population}^{0.5} * \text{Income}^{-0.125}$
 - Need = composite index of eight RMNCAH indicators
 - Prioritizing bottom 30 countries in HCI ranking, special consideration for “feasible” fragile states
 - Comparison of financing vs. need: development assistance per maternal/child death
- Country commitment: letters from MoF
- Outreach to IG members
- Review of IDA/IBRD opportunities

Proposed expanded criteria for country selection

- Criteria for selecting new countries agreed at IG3 (June 2016):
 - Country criteria:
 - Disease burden
 - Unmet need related to sexual and reproductive health and rights
 - Income status
 - Comparison of financing vs. need
 - Commitment to increase domestic financing for RMNCAH
 - Commitment to use IDA/IBRD financing for RMNCAH
 - Commitment to mobilize additional complementary financing and/or leverage existing financing
 - Commitment to engage private sector resources to improve RMNCAH outcomes
 - Commitment to the Global Strategy
 - Existence of/or plan for an effective, broadly representative country platform
 - Portfolio balance:
 - Geographical diversity
 - Ability to contribute to learning agenda
- **Proposed additional criteria:**
 - **Bottom 30 countries on the Human Capital Index**
 - **Fragility: Harmonized List of Fragile Situations FY19**
- Trust Fund Committee makes decision about new countries

Components of the Human Capital Index

HUMAN CAPITAL INDEX & SUSTAINABLE DEVELOPMENT GOALS



SURVIVAL

Under-5 mortality
links to SDG target

3.2



SCHOOL

Quality adjusted
school years links
to SDG target

4.1



HEALTH

Improving adult
survival rate by
reducing causes of
premature mortality
links to SDG target

3.4

Stunting links to
SDG target

2.2

The components
of the Human
Capital Index
have close links
with the SDGs



Harmonized list of fragile situations

(released annually by the World Bank)

Countries in FY 19 List

• Afghanistan	Gambia	Mozambique	Yemen
Burundi	Guinea-Bissau	Myanmar	West Bank and Gaza
CAR	Haiti	Solomon Islands	Papua New Guinea
Chad	Kiribati	Somalia	Timor-Leste
Comoros	Kosovo	South Sudan	Zimbabwe
DRC	Liberia	Sudan	Iraq
Cote d'Ivoire	Mali	Syria	Lebanon
Djibouti	Marshall Islands	Togo	Libya
Eritrea	Micronesia	Tuvalu	Republic of Congo

For more information:

<http://pubdocs.worldbank.org/en/892921532529834051/FCSList-FY19-Final.pdf>

Commitment Letters from Countries

- Letters received
- Interest expressed, but letter not received yet

▪ Angola (32.5)	▪ Eritrea (7.9)	▪ Morocco (4.6)	▪ S Sudan (40.1)
▪ Benin (9.1)	▪ Gambia (6.1)	▪ Nepal (8.8)	▪ Sudan (19.5)
▪ Bhutan (0)	▪ Ghana (13.1)	▪ Nicaragua (0.7)	▪ Eswatini (1.2)
▪ Bolivia (4.9)	▪ Guinea-Bissau (6.5)	▪ Niger (22.4)	▪ Tajikistan (1.9)
▪ Burundi (4.6)	▪ Honduras (2.0)	▪ Pakistan (55.3)	▪ Timor Leste (2.1)
▪ Chad (42.9)	▪ India (26.0)	▪ Papua New Guinea (7.4)	▪ Togo (8.8)
▪ Comoros (1.9)	▪ Kyrgyzstan (1.6)	▪ Philippines (15.3)	▪ Uzbekistan (1.3)
▪ Congo (7.7)	▪ Laos (4.5)	▪ Sao Tomé and Príncipe (0.25)	▪ Yemen (24.8)
▪ Djibouti (1.9)	▪ Lesotho (3.2)	▪ Sol Islands (0.33)	▪ Zambia (8.8)
▪ Egypt (8.3)	▪ Mauritania (9.4)	▪ Somalia (55.8)	▪ Zimbabwe (8.1)

GFF Investors Group Partners



BOLD
THINKERS
DRIVING
REAL-WORLD
IMPACT

BILL & MELINDA
GATES foundation

Canada



MINISTRY OF FOREIGN AFFAIRS
OF DENMARK
Danida



EVERY WOMAN
EVERY CHILD
FOR HEALTHY AND EMPOWERED WOMEN,
CHILDREN AND ADOLESCENTS



The Global Fund
To Fight AIDS, Tuberculosis and Malaria



MSD for mothers



NORWEGIAN MINISTRY
OF FOREIGN AFFAIRS



Ministry of Foreign Affairs of the
Netherlands

PAI
pai.org

PATH
D O :: A O :: D :: A O

The Partnership
for Maternal, Newborn
& Child Health



RA
Réseau Africain pour le Développement Durable



UKaid
from the British people

unicef



USAID
FROM THE AMERICAN PEOPLE



WORLD BANK GROUP



World Health
Organization