One Health & Pandemic PPR Financing

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The One Health approach

- Is an integrated approach that aims to sustainably balance the health of people, animals and ecosystems
- It recognizes the health of humans, domestic and wild animals, plants, and the wider environment (including ecosystems) are closely linked and inter-dependent.
- Tackles health threats, climate change and sustains resources for holistic well-being.





Quadripartite Joint Plan of Action on One Health (2022-2026) – JPA

- Developed by Quadripartite and OHHLEP
- Non-binding technical document
- Framework for action to strengthen cooperation, communication, capacity building, coordination across all relevant sectors
- Six Action Tracks

ONE HEALTH JOINT PLAN OF ACTION (2022-2026)

WORKING TOGETHER FOR THE HEALTH OF HUMANS, ANIMALS, PLANTS AND THE ENVIRONMENT



Pandemic Prevention, Preparedness, and Response

Five Core Elements for Pandemic PPR:

- 1. Surveillance, intelligence, early warning
- 2. Research and equitable access to medical countermeasures
- 3. Public health and social measures
- 4. Resilient health systems, and safe and scalable health interventions
- 5. Preparedness and response strategy, coordination, and emergency operations



Lessons learnt:

- Increasing occurrence of pandemic prone pathogens shows the need for a strong, resilient, and structured PPR framework and multi-sectoral collaboration (One Health approach) and financing.
- Deficiencies in our current PPR system have led to suboptimal prevention, preparedness and responses to pandemics

Pandemic Prevention, Preparedness, and Response Donor Landscape

System needs



Surveillance, collaborative intelligence, & early warning





Prioritized research, equitable access to medical countermeasures & essential supplies

& emergency operations



Other major contributors to R&D and manufacturing: pharmaceutical companies, academia, manufacturing associations, WTO

G77



 tother Regional CDCs & Regional Health Organizations
Other major contributors: regional development banks to provide financing

ACT-A has played a leading role in this space for COVID-19

HERA

BILL#MELINDA

One Health and Pandemic PPR financing Landscape (examples)



One Health and Pandemic PPR financing need

Figure 6:WHO, <u>WB: Analysis of Pandemic</u> <u>PPR architecture</u>, 2022

- Estimated annual global investments for PPR ranges from USD 1.6 bn to USD 43bn
- Estimated additional PPR financing required 10.5 bn

	PPR framework buckets	Estimated PPR financing needs (US\$ billion)	Minimum priority PPR financing gaps ¹¹ (US\$ billion)
1)	Surveillance, collaborative intelligence and early warning	13.3	4.1
2)	Prioritized research and equitable access to medical countermeasures and essential supplies	3.7	1.8
3)	Public health and social measures and engaged, resilient communities	5.5	1.8
4)	Lifesaving, safe and scalable health interventions and resilient health systems	6.1	1.9
5)	PPR strategy, coordination and emergency operations	2.5	0.9
	Total	31.1	10.5

Return on investment (US as an example):

1 US Dollar invested yields a health gain of 1703 US Dollar and an economic gain of 1102 USD (WB / WHO 2022)

3. Mini "deep dives" into different multilateral funding instruments

The AMR Multi-Partner Trust Fund – an overview

- A joint One Health approach between the Quadripartite organizations (FAO, UNEP, WHO and WOAH) on all three levels (country, regional, global), together with national governments and other relevant stakeholders.
- The current resource partners (Netherlands, United Kingdom/ Fleming Fund, Sweden, Germany, European Commission) have committed over 26m to the fund to date.
- The AMR MPTF supports collaborative working between the Quadripartite to maximize impact, accelerate progress and looking for sustainable solutions in addressing AMR.



The AMR Multi-Partner Trust Fund – an overview

- Currently, **14 countries** are implementing the AMR MPTF project
- Bangladesh, Madagascar, Mongolia, Tunisia, Morocco, Kenya, Zimbabwe, Ghana, Senegal, Ethiopia, Cambodia, Indonesia, Peru, Tajikistan)









World Organisation for Animal Health Founded as OIE

The Pandemic Fund

- To bolster PPR in LICs & MICs, WBG & WHO project a yearly need of \$30.1bn USD, with a 2:1 domestic to external financing ratio.
- The Pandemic Fund, aimed at supplementing external PPR financing for LICs and MICs, is a pivotal
 part of the solution.
- PPR proposals are expected to include a One Health approach



30 June 2022:

 The World Bank's Board approves the proposal to establish The Pandemic Fund as a FIF.

Current Pledges & Contributions:

 US\$ 1.66bn in pledges to date from 25 donors



Today:

- First Call for Proposals received 179 applications covering 133 countries.
- 19 projects from 37 countries were selected (USD 338 mio)
- 2nd Call for Proposals End of December 2023

Pandemic Fund Areas of Focus:

The Pandemic Fund's Board has identified five critical areas for support from the Pandemic Fund :



Disease Surveillance



Critical Health Workforce

Capacities: Developing resilient and sustainable health systems through public health workforce capacity development



Community Engagement: Public health, social measures, and resilient populations



Laboratory Systems & Testing Capacity



Emergency Communications, Coordination & Management: Pandemic preparedness strategies and emergency operations

Nature for Health Multi-Partner Trust Fund

- Leading environmental and health organizations have partnered with N4H to enhance environmental aspects of preventative One Health and are committed to expanding the fund.
- Germany has contributed an initial sum of €50 million from Germany (BMUV through IKI)



Nature for Health Multi-Partner Trust Fund

- N4H acts to reduce the risk of zoonotic spillover upstream
- It promotes participatory systemic approaches
- Focuses on the environmental dimensions of One Health



4. Conclusions and points for discussion

Reflections / observations:

- The COVID-19 pandemic highlighted the need for sustainable financing of health systems and health security, including international engagement for (new) multilateral financing facilities for pandemics and cross-sectoral approaches such as One Health.
- Huge additional funds to fight the pandemic and to foster better preparedness and One Health were mobilized. However, most of this financing was short-term and the "panic and neglect cycle" still exists.
- New actors add complexity to the **multi-faceted financing landscape**, causing **fragmentation** and **duplication**.
- No systemic review on bilateral PPR funding & results, nor on successful linking of multilateral & bilateral instruments (technical advisory, south-south, accountability and backup functions)
- Crisis driven short-term decisions overshadowed Public Financial Management (PFM), neglecting sustainable domestic resource mobilization and good financial governance

Questions for discussion:

- How can P4H and partners guide through funding complexities and advise policymakers to minimize fragmentation?
- Can cross-sectoral approaches such as One Health foster coordination and synergies?
- How to prioritze sustainable system approaches in PFM financing?
- What role should bilateral entities like GIZ, AFD / Expertise France, Universities play?

Thank you for your attention!

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Funding for PPR – Modalities and Links to Health Systems Strengthening (HSS)

Dr. Peter Cowley, Senior Finance and Service Delivery Expert, WHO

"Funding Gap" for PPR

Estimated financial need to advance country-level health security

- US\$16 billion per year (not including vaccine research and development)
- \$9 billion to be raised from domestic sources
- \$7 billion "shortfall" for national needs (mainly lower and lower middle-income countries)
- \$3.5 billion "shortfall" for regional and international PPR requirements
- \$10.5 billion annual "shortfall" for PPR to be met by international efforts



Constraints around domestic revenue mobilization for PPR

Outlook for domestic fiscal space for PPR

- Very difficult to ascertain PPR related domestic spending
- Partly because there is no agreed upon framework and multi-sectoral nature of PPR
- World Bank estimates that in 41 countries, government spending until 2027 is projected to remain lower than before COVID-19 and in 69 countries, government spending is expected to exceed 2019 levels, but the increases will be weak.
- The allocation for health within government budgets increased during COVID-19 but has now fallen to pre-COVID-19 trends.
- Difficult to imagine in current environment that domestic revenue will reach anywhere near US\$9 billion modeled coming from domestic governmental sources.



International financing for PPR

Multi-lateral efforts

- No database for bi-lateral, foundation and multi-lateral bank (non-Pandemic Fund) spending on PPR
- Pandemic Fund with \$2.0 billion in commitments, currently dispersing \$335 million as part of first round
- Global Fund with \$5.3 billion in C19RM funding with \$1 billion of that being reprogrammed
- IMF Resilience and Sustainability Trust (loan money not grant money) have secured \$20+ billion for climate change and PPR focused programs, but no PPR focused programs have begun.
- Summary is that approximately \$2-3 billion being committed every year for PPR from Pandemic Fund, Global Fund and IMF/RSF but "shortfall " is \$10.5 billion annually.



Multi-lateral funding for PPR and Health Systems Strengthening

Global Fund C19RM grant portfolio optimization and reprogramming areas of focus:

- surveillance system strengthening
- laboratory and diagnostics
- human resources for health and community systems strengthening
- medical oxygen and respiratory care
- health product and waste management

Pandemic Fund grant priority areas

- As above except not medical oxygen and respiratory care or health product and waste management
- Priorities may change in subsequent rounds

World Bank and Regional Bank loan areas of PPR and HSS focus

 Some loans will have health systems strengthening and PPR components, but difficult to know in aggregate what focus areas are

IMF/RST loans areas of PPR and HSS focus

- Budget support for balance of payment improvement with pandemic preparedness conditionalities
- Conditionalities likely to focus heavily on public financial management related issues



Leveraging further HSS with PPR Funding

Multi-lateral efforts

- Pandemic Fund estimates that it will leverage co-financing at 6:1 ratio
- Further opportunities to better align PPR resources and their tracking among these "new" funding modalities
- These needs to be tempered by better alignment causing too much "drift" from institutional mandate, but health systems strengthening is in most large multi-lateral institutional mandates
- Probable scope for more co-financing requirements from domestic revenue sources as these "new" PPR funding platforms mature.

