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INVESTMENTS FOR  
**EVERY WOMAN,  
EVERY CHILD.**

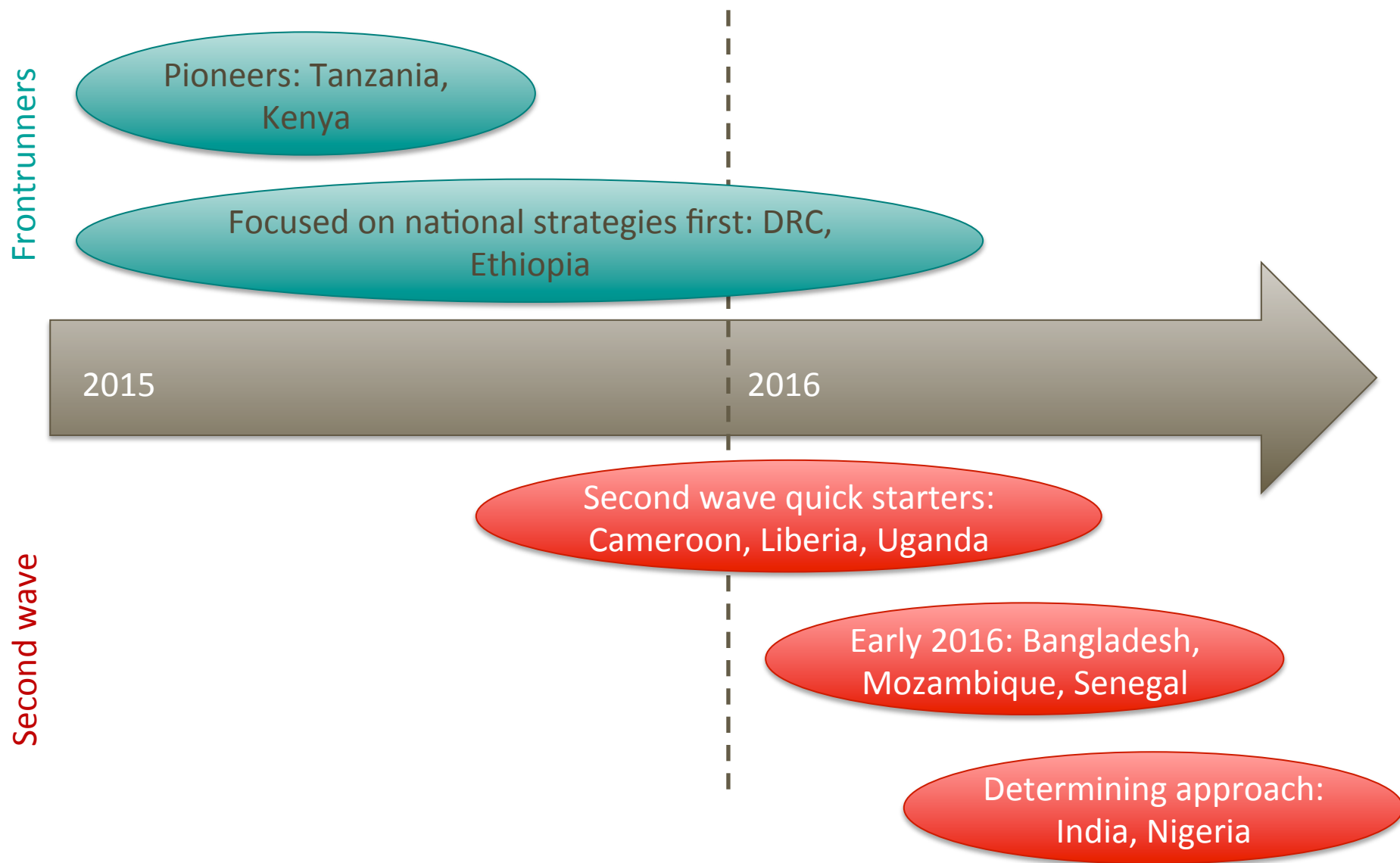


## **GFF Portfolio Update**



GLOBAL  
**FINANCING**  
FACILITY

# Country status at a glance



# Cameroon: recent developments

## ■ Latest updates

- Draft logical framework for Investment Case being discussed
- Full draft of Investment Case expected by mid-July
- Ministry of Health seeking to hire consultant to support complementary financing and health financing strategy

## ■ Main challenges

- Limited data on adolescent health
- Health financing process moving slowly

## ■ Key opportunities

- Strong government willingness to leadership by the government
- Very inclusive process, including involvement of key financiers

## ■ Next steps

- First draft of the Investment Case expected by mid-July, with complementary financing to be worked out over the subsequent months (by September)
- Analytical work for health financing strategy

# Cameroon: background information

## ■ Country platform

- Health sector strategy steering committee, supported by two technical working groups
- Multiple partners supporting different elements of the process
- Continued strong collaboration between partners, particularly among UNFPA, UNICEF, Gavi, and the Global Fund

## ■ Investment Case

- Agreement reached on geographical areas of focus (3 northern regions and eastern region) and broad programmatic priorities (maternal health, neonatal health, adolescent health, nutrition, and CRVS)

## ■ Complementary financing of the Investment Case

- Discussions underway, including with France, Germany, Gavi, Global Fund, and the U.S. Government (PEPFAR)
- World Bank/GFF Trust Fund financing: US\$100m IDA, US\$27m trust fund
  - Approved by World Bank Executive Directors

## ■ Health financing strategy

- Limited materials to draw upon (no existing strategy)
- Agreement about analytical work reached at kickoff workshop in February 2016
- Strategy expected June 2017

# DRC: recent developments

## ■ Latest updates

- Revised draft of the Investment Case presented to the Minister of Health and partners on 3 June
- Revision to the being prepared based on feedback

## ■ Main challenges

- Balancing between having a focused document and one that addresses all of the interests of key stakeholders
- Progress has been slow on health financing (MOH awaiting consultant support)

## ■ Key opportunities

- Strong ownership by minister and strong ongoing collaboration between key financiers and technical partners is strong and growing (includes Global Fund, UNFPA, UNICEF, USAID, and World Bank)

## ■ Next steps

- Document to be finalized by 15 June

# DRC: background information

- **Country platform**
  - Draws on an existing multi-stakeholder platform
  - Supported by a technical team led by the Office of the Prime Minister
- **Investment Case**
  - Built on national health sector strategy
  - Focused around service delivery platforms (community delivery, strategic purchasing) and health systems strengthening (HRH, supply chain, financing, info systems)
- **Complementary financing of the Investment Case**
  - Strong existing collaboration and involvement from a range of key financiers, including Canada, the Global Fund, JICA, Norway, USAID, and World Bank
  - World Bank/GFF Trust Fund financing separated into two projects:
    - CRVS: US\$30m IDA (for info systems, not only CRVS), US\$10m trust fund: approved March 2016
    - Additional financing for current project: US\$100m IDA, US\$40m trust fund: Board date is February 2017
- **Health financing strategy**
  - Health financing assessment completed
  - Draft HFS prepared – ongoing work to develop important areas (e.g., pooling, purchasing)

# Ethiopia: recent developments

## ■ Latest updates

- Additional financing to the current P4R project agreed to by MOF; IDA funding is likely around US\$50-60 million
- Country Partnership Framework is being developed for IDA18, so possibility of additional IDA once that is agreed upon in second half of 2017
- Technical working group comprising MOH, MOF and WBG will be meeting to prepare for mission
- Discussions on health financing strategy were held to discuss TA and capacity building needs
  - Plans for expansion of CBHI and SHI roll-out were discussed with experts
  - USAID providing a TF to support health financing of about US\$10 million

## ■ Main challenges

- Discussions on inclusion of CRVS are on-going

## ■ Key opportunities

- Potential to use the upcoming World Bank technical assessment to further define the RMNCAH elements of the HSTP

## ■ Next steps

- World Bank conducting an identification mission last week of June (27 June – 1 July); H6 and JCCC will be informed of mission dates and agenda
- Concept note to launch World Bank project preparation tentatively scheduled to be prepared by September 2016, with project to go to Board tentatively by March 2017

# Ethiopia: background information

- **Country platform**
  - Joint Consulting Forum for sector policy and reform issues
  - Joint Core Coordinating Committee for technical work
  - TWG for health financing
  - TWG for RMNCAH
- **Investment Case**
  - Health Sector Transformation Plan (HSTP) serves as the Investment Case
  - Focus on demand-side, supply-side and multisectoral interventions (i.e., CRVS, nutrition)
  - Strong equity and quality focus
- **Complementary financing of the Investment Case**
  - Pooled funding through SDG Performance Fund already exists
  - Interest in further aligning funding, including from DfID, GFATM, Gavi, Power of Nutrition Trust Fund, USAID and the World Bank
  - World Bank/GFF Trust Fund financing: US\$50-60m IDA likely to be available this year
- **Health financing strategy**
  - Draft is being reviewed by Cabinet
  - Health financing a key issue (both social health insurance for formal sector and community health insurance for non-formal sector)



# Kenya: recent developments

## ■ Latest updates

- Updated concept note for the MDTF to provide TA to priority counties and national government is being reviewed by DFID and USAID
- GFF Trust Fund providing support for the hiring of GFF country focal point supporting MOH and the Executive Office of the President

## ■ Main challenges

- Extent of alignment by counties with national framework is unclear in light of devolution and capacity challenges

## ■ Key opportunities

- Trust fund for TA paired with results-focused financing → strong incentive for improving quality of implementation

## ■ Next steps

- Continue supporting county annual work plan development in alignment with RMNCAH Investment Framework
- Continued consultations on the health financing strategy, with government in lead

# Kenya: background information

- **Country platform**
  - Inclusive coordination platform with RMNCAH TWG & Health Financing TWG
- **Investment Case**
  - National RMNCAH Investment Framework finalized and approved
  - Focus on supply-side performance incentives, vouchers and CCTs to boost demand
  - Geographic prioritization on 20 counties
  - Technical assistance provided by DfID, JICA, UNAIDS, UNFPA, UNICEF, UN Women, USAID, WHO, and the World Bank
- **Complementary financing of the Investment Case**
  - Commitment from Governments of Denmark, Japan, the United Kingdom, and the United States as well as the World Bank, with resources from IDA and the GFF Trust Fund
  - World Bank/GFF Trust Fund financing: US\$150m IDA, US\$40m trust fund
    - Board decision expected June 2016
- **Health financing strategy**
  - Five key areas: resource mobilization; purchasing; benefits definition; accreditation and licensing; and governance

# Liberia: recent developments

## ■ Latest updates

- No significant developments since May:
  - Government still discussing implementation of health financing strategy with key partners (USAID, WHO, World Bank)
  - Discussions underway about aligning and financing the Investment Case with various financiers (including Global Fund, USAID, and the World Bank)

## ■ Main challenges

- Finalizing the scope of the Investment Case

## ■ Key opportunities

- Momentum on the health financing strategy following UHC Forum
- Opportunity to support country with further developing strategy on adolescents

## ■ Next steps

- A follow up mission planned in June/July to:
  - Support finalization of the Investment Case (including scenario 3 in current draft)
  - Identify activities linked to adolescents to be prioritized in the different scenarios of the investment case
  - Support the resource mapping exercise to be carried out with support from main financiers

# Liberia: background information

## ■ Country platform

- TWG on RMNCAH and TWG on health financing overseen by a health sector committee

## ■ Investment Case

- Updated costed Investment Case shared for consultation
- Four priorities:
  - Quality EmONC and adolescent/youth-friendly RMNCAH services
  - Emergency preparedness, surveillance, and response (esp. maternal and newborn death surveillance and response)
  - Sustainable community engagement
  - Enabling environment: leadership, governance, and management

## ■ Complementary financing for the Investment Case

- Discussions underway with Gavi, Global Fund, USAID, and the World Bank
  - Global Fund HSS application in process and Gavi HSS funding request due September 2016
- World Bank/GFF Trust Fund financing under discussion (likely US\$16 million allocation from GFF Trust Fund)

## ■ Health financing strategy

- Key areas: Health Equity Fund, use of resource allocation formula between counties, improved alignment and on-budget donor funding

# Mozambique: recent developments

## ■ Latest updates

- joint World Bank and health partners (HPs) scoping mission 6-17 June: MOH has taken the lead to develop an ambitious agenda for the mission that has been shared with HPs
- Objectives:
  - Start the process of developing the Investment Case
  - Take stock of the status of the development of a health financing strategy
  - Develop a pre-concept note for the proposed new health project to be supported by Government, Development Partners, including a GFF grant and IDA
  - Outline a working agenda for strengthening the Health Sector Public Financial Management and Fiduciary Functions
- Mission will discuss and agree with MOH and HPs on a realistic time frame for the completion of the Investment Case and health financing strategy as well as for the design of the new project
- Ongoing discussions with MOH and HPs about the possibility of setting up MDTF to pool external financing as a compliment to the existing pooling mechanisms (PROSAUDE)

## ■ Main challenges

- The GFF process is just starting: needed technical assistance and a GFF coordinator are not yet in place

## ■ Key opportunities

- There is momentum around the GFF process and it seems to be on the right track

## ■ Next steps

- Mission report will outline key issues to be addressed under the GFF funded project, including the Investment Case, the health financing strategy, and the PPFM and fiduciary program of work

# Mozambique: background information

- **Country platform**
  - A task force has been appointed to lead the GFF process in MOH under the National Director of Public Health
- **Investment Case**
  - The Investment Case process is starting and the structure of the document has been discussed by MOH and HPs
- **Complementary financing for the Investment Case**
  - HPs are engaged in the process, resource mapping is under way
  - There are ongoing discussions about the opportunity for partnership around the common health fund (PROSAUDE) and strengthening public financial management
- **Health financing strategy**
  - Over the past 2 years, MOH has worked on a health financing strategy, and the existing draft will be updated in the GFF process
    - The technical working group on health financing (GTF) will support the elaboration of the HFS
  - Consultations with various stakeholders including MOF, local governments, the National Social Security Institute, etc., are planned

# Tanzania: recent developments

## ■ Latest updates

- Interest in moving forward the CRVS agenda – budget is currently being revised
  - Pilot (UNICEF/Canada) is moving out to 2 more regions in August 2016, but pilot is only on birth registrations while CRVS strategy is broader
- Health financing strategy still awaiting Parliamentary approval
  - MOF has asked for financial envelope and MOH is preparing to do an actuarial costing
  - Expect to complete in 3-4 months (funding still not fully secured)

## ■ Main challenges

- Moving forward CRVS agenda

## ■ Next steps

- Mission planned in week of 18 July to follow up on implementation status, country platform and CRVS

# Tanzania: background information

- **Country platform**
  - SWAp coordination mechanism acts as country platform
  - Supported by technical sub-groups focusing on RMNCAH and health financing
  - Wide stakeholder engagement
- **Investment Case**
  - One Plan II used as Investment Case
- **Complementary financing of the Investment Case**
  - HSSP IV – in which the One Plan II is nested – is supported by Canada, DANIDA, DfID, GIZ, the GFTAM, Irish Aid, UNDP, UNFPA, UNICEF, USAID, the World Bank, and WHO
  - World Bank/GFF Trust Fund financing: US\$200m IDA, US\$40m trust fund approved in May 2015
- **Health financing strategy**
  - Draft is currently in parliament
  - Emphasis on: creation of a fiscal space through efficiency gains; partner alignment around prioritized investments; leveraging private sector resources; and expansion of performance-based financing to enhance quality, cost-effectiveness and sustainability



# Uganda: recent developments

## ■ Latest updates

- No significant developments since May: near-final version of Investment Case prepared but challenges with links between costing and resource mapping

## ■ Main challenges

- Costing and resource mapping are not well aligned
- Full potential of the GFF to improve coordination not being realized yet

## ■ Key opportunities

- Strong interest on the part of several key financiers to be more fully engaged in the process

## ■ Next steps

- Addressing of issues around costing
- World Bank project to be presented to Board in July 2016
- Further discussions around complementary financing

# Uganda: background information

- **Country platform**
  - Using the existing health sector coordination mechanism
- **Investment Case**
  - Sharpened RMNCAH Plan has five strategic shifts:
    - Emphasising evidence-based high-impact solutions
    - Increasing access for high-burden populations by promoting a set of service delivery mechanisms that operate synergistically
    - Geographical focusing/sequencing
    - Addressing the broader multisectoral context (focus on adolescent health)
    - Ensuring mutual accountability for RMNCAH outcomes
  - Includes health systems strengthening and capacity building required to deliver successfully
- **Complementary financing of the Investment Case**
  - Discussions now underway, including with DfID, Gavi, SIDA, and USAID
  - World Bank/GFF Trust Fund financing: US\$110m IDA, US\$30m trust fund
    - Board decision expected early in FY2016 (likely August-September)
- **Health financing strategy**
  - Approved by MOH senior management, awaiting review by Cabinet
  - Six objectives, including around resource mobilization, pooling, and strategic purchasing

# Other countries (1/2)

## ■ Bangladesh

- Discussion on next health sector SWAp to begin in coming months
- Additional Financing for ongoing health sector SWAp presented to World Bank Board

## ■ Nigeria

- Financing for 5 conflict affected northern Nigerian States presented to the World Bank Board: US\$125 m IDA, US\$20 m GFF Trust Fund
- MOH to lead development of a roadmap for the broader GFF process
  - Meeting to be led by MOH with all partners (including civil society and private sector) around margins of NSHDP-2; discussion on Investment Case likely to follow this

# Other countries (2/2)

## ■ Senegal

- A World Bank team is currently in country (until 10 June) to work with the technical groups what are leading the preparation of the Investment Case Case and health financing strategy
  - Needed analytical work will be identified during the mission
- Country platform will build on existing coordination structures: RNMCAH platform was installed end of April and country platform will likely be formally launched in June
- The government expressed interest in appointing a GFF focal point in the MOH in the near future
- Investment Case will build on existing strategies such as the emergency plan on Maternal, Newborn, Child and Adolescent Health
- The health financing strategy will integrate the universal health insurance program (Couverture Maladie Universelle) that is currently under development
  - Draft expected to be completed by June 2017
- To build capacity for the health financing strategy process, a training workshop in financial protection and equity analysis targeting staff from MOH/UHC Agency, researchers and statistical agency was recently conducted