Introduction to the Global Financing Facility (GFF)

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GFF objective: bridging the funding gap for women’s, adolescents’, and children’s health
What results do we want to achieve?

**Overall objective:**
End preventable maternal, newborn, child and adolescent deaths and improve the health and quality of life of women, adolescents and children

**SDG targets**
- MMR <70/100,000
- U5MR <25/1,000
- NMR <12/1,000
- Universal access to SRHR services
- Universal health coverage
- Internationally agreed targets for stunting and wasting

Closing the financing gap would prevent 24-38 million deaths by 2030
Countries leading the way

The 26 countries account for 59% of the total financing gap across all GFF countries.
GFF supports countries to get on a trajectory to reach the SDGs through three related approaches

- **Country ownership and leadership**
  - Identifying priority investments to achieve RMNCAH outcomes
  - Identifying priority health financing reforms
  - Strengthening systems to track progress, learn, and course-correct

- **Getting more results from existing resources and increasing financing from**:
  - Domestic government resources
  - IDA/IBRD financing
  - Aligned external financing
  - Private sector resources
1. Driving improved results through prioritization

- **Short-term:** *key investments* (prioritized within resource constraints) needed to achieve RMNCAH results (Investment Cases):
  - Health systems strengthening and multisectoral approaches alongside high-impact RMNCAH interventions
  - Focusing on equity
- **Long-term:** *key reforms* to health financing systems (health financing strategies/implementation plans)

**Objective:** identify what needs to happen to get on a trajectory to reach the SDGs
2. Mobilizing resources

- Mobilizing domestic resources for RMNCAH
  By increasing government revenue
  By increasing government allocations to RMNCAH in the budget

- Financing from IDA and IBRD
  So far, US$1.8 billion IDA/IBRD financing ➔ every $1 grant financing linked to $5.8 IDA/IBRD financing

- Aligned external financing
  Strong engagement by a range of bilateral and multilateral financiers to increase efficiency and effectiveness

- Leveraging private resources for RMNCAH
3. Strengthening systems to track progress, learn, and course-correct

- **Core and optional indicators:**
  - Programmatic, health financing, health systems strengthening, and M&E capacity
  - Taken largely from Global Strategy, SDGs, and WHO Core 100

- **Capacity building central:** initial rapid assessment of gaps in M&E systems enables inclusion of priorities in Investment Cases

- **Dedicated resources for strengthening civil registration and vital statistics**

- **Cross-country sharing of experiences** (in-person and virtual)
Country Platform

- Government
- Civil society (not-for-profit)
- Private sector
- Multilateral and bilateral agencies
- Technical agencies (H6 and others)

- Not prescriptive about form ⇒ build on existing structures while ensuring that these embody two key principles: inclusiveness and transparency
Using the CIP to inform the GFF Investment Case

- CIP priorities can feed directly into the Investment Case.

- The costings in the CIP will directly feed into the finance mapping and funding gap identification.

- Targets of the CIP can also be transferred to the Investment case and be used for accountability in the GFF monitoring plan.
The GFF, the World Bank & support to FP in OP countries

- WB contributes about $600M to RH across the 9 OP countries
- In the region, thru IDA18, WB is increasing funding for RH/FP by 2-3 times
- GFF money seeks to leverage IDA/IBRD at 1:4 or 1:5 to bring more money to fill RMNCHA gaps
- GFF is contributing to 2 new WB operations in OP countries (RCI & Burkina Faso) & has 2 recent operations (Guinea & Senegal)
Learn more

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