



Global Financing Facility Measurement Framework (2021-2025)



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1818 H Street NW
Washington DC 20433
Telephone: 202-473-1000
Internet: www.globalfinancingfacility.org

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Overview

The Global Financing Facility (GFF) Measurement Framework is the primary mechanism for monitoring and reporting on performance of the GFF's 2021-2025 Strategy¹, which was developed through a consultative and inclusive process led by the GFF Secretariat and endorsed by the GFF Trust Fund Committee and Investors Group (1). This document details the rationale, structure, and components of the GFF Measurement Framework.

The Measurement Framework reflects the country-orientation² of the GFF model and provides a structure for examining GFF's contribution to progress, recognizing that improvements achieved are led by and belong to the countries. It is grounded on the GFF Logic Model and the GFF Strategic Direction area on sustaining a relentless focus on results (Strategic Direction 5). Core to the GFF results strategy is a data-driven approach to

developing and implementing country investment cases including prioritized reforms to accelerate progress on strengthening primary health care systems and reproductive, maternal, newborn, child, and adolescent health and nutrition outcomes (RMNCAH-N). This approach also involves a focus on supporting countries to use data and learnings from rapid-cycle analytics and implementation research for planning, identifying solutions to health system challenges, improving the financial sustainability of health system investments, and for monitoring and accountability purposes.

Figure 1 presents the conceptual underpinnings of the GFF results strategy, centered on alignment with country systems, promotion of country leadership, and a recognition of the dynamic inter-relationships between data generation, analysis, data use, system strengthening, and country capacity building.

¹ The GFF Strategy (2021-2025) includes five Strategic Directions: 1) Bolster country leadership and partner alignment behind prioritized investments in health for women, children, and adolescents, 2) Prioritize efforts to advance equity, voice, and gender equality, 3) Protect and promote high-quality, essential health services by reimagining service delivery, 4) Build more resilient, equitable and sustainable health financing systems, and 5) Sustain a relentless focus on results. It is guided by principles of country leadership and ownership, equity and inclusion, efficiency and scale, results for impact, and complement and catalyze.

² The country-focus of the GFF approach helps promote sustainability of progress achieved during the investment case period. Keeping countries in the lead ensures country ownership over investment case development and implementation as well as responsibility for results.

FIGURE 1. | GFF Results Strategy: Strengthening country capacity for collecting, analyzing, and using evidence.

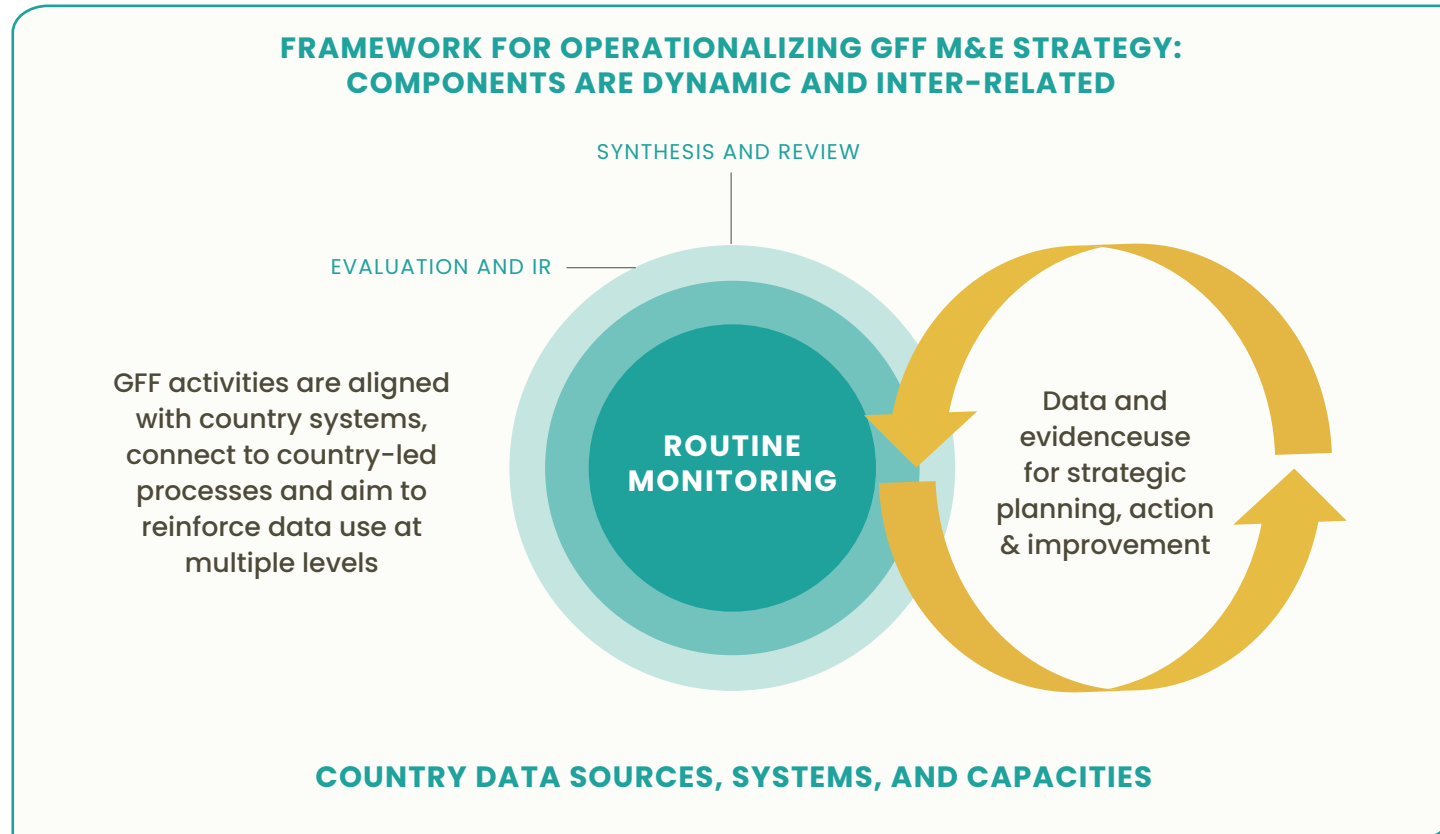
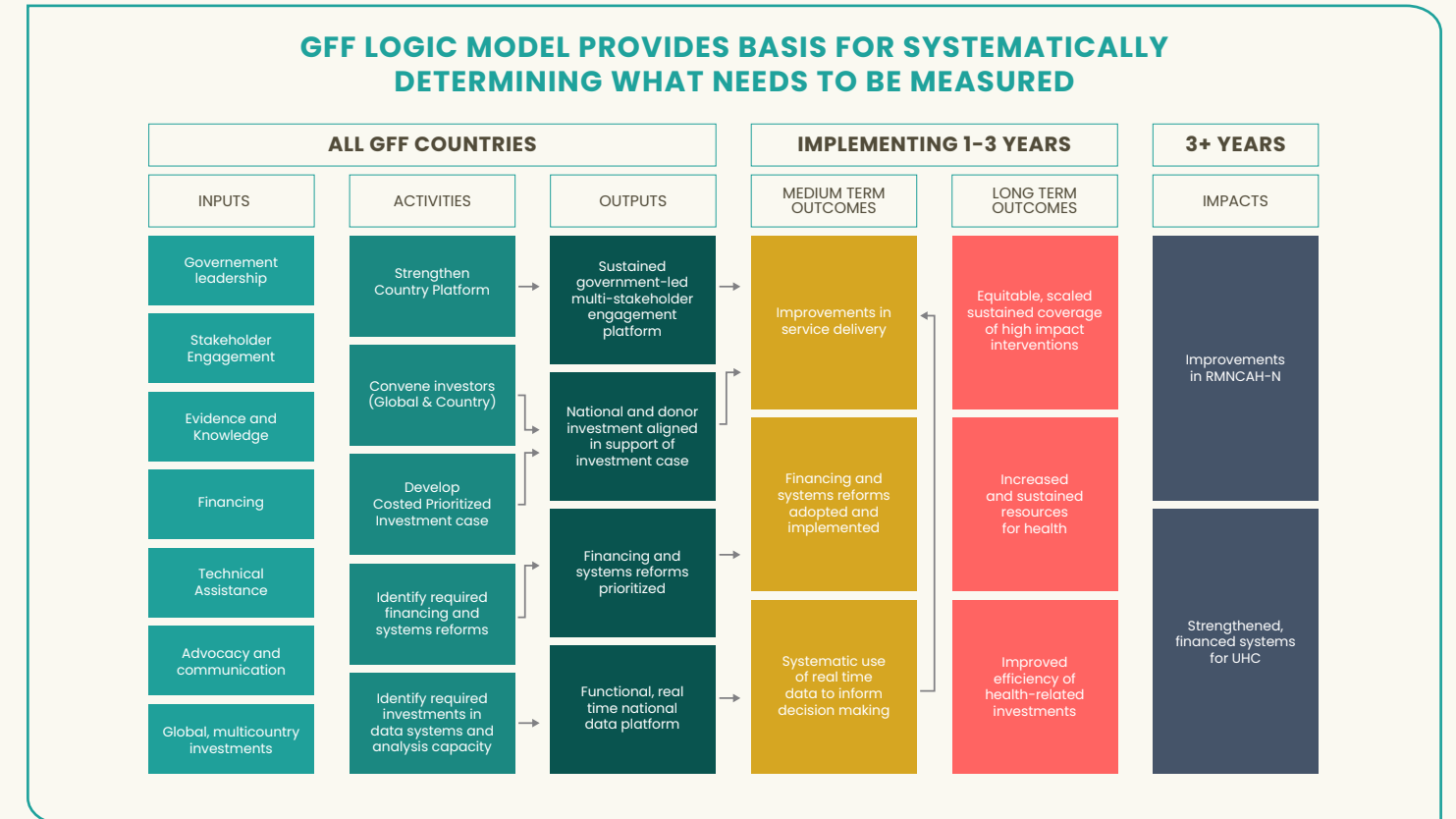


FIGURE 2. | GFF Logic Model



The GFF Logic Model (Figure 2) is based on the common evaluation framework³ (2) and identifies the inputs, activities, outputs, medium and long-term outcomes, and impacts of GFF-supported operations. It accounts for the duration of country investment case implementation and

provides a scaffolding for capturing how GFF-related activities translate into measurable improvements in country health and financial systems, and health outcomes for women, children, and adolescents. At its core is the country-led, prioritized, and costed country investment case.

The GFF Measurement Framework encompasses four interlinked levels allowing for a holistic and flexible monitoring approach given wide variation in the country investment cases and GFF supported activities. These four levels are:

- Overall performance assessment towards the GFF Strategy (2021-2025) based on the GFF logic model and supported by the GFF key performance indicators⁴,
- Country specific monitoring tailored to country investment cases and

country projects co-financed with the World Bank⁵,

- Activities to strengthen country data sources, systems, and capacities to improve planning, measurement, monitoring, and accountability⁶, and
- Analysis of cross-cutting thematic areas core to the GFF Strategy and relevant to all GFF partner countries (i.e., gender; maternal, newborn and child health; nutrition; sexual and reproductive health and rights; adolescent health).

³The common evaluation framework or general health sector monitoring framework was designed for monitoring and evaluating global progress as well as performance of country health systems and specific programs. It is premised on a theory of change that health sector inputs such as financing and human resources lead to measurable outputs such as services delivered and pooled financing schemes, which, in turn, result in improved outcomes such as higher intervention coverage levels, greater financial protection, and reductions in risk factors. These changes combined yield improvements in health impacts such as increased survival and well-being. Results at each step are influenced by policies as well as broader social, political, and environmental determinants of health. Boerma T, AbouZhar C, Evans D, Evans T (2014) Monitoring Intervention Coverage in the Context of Universal Health Coverage. PLOS Medicine 11(9): e1001728,

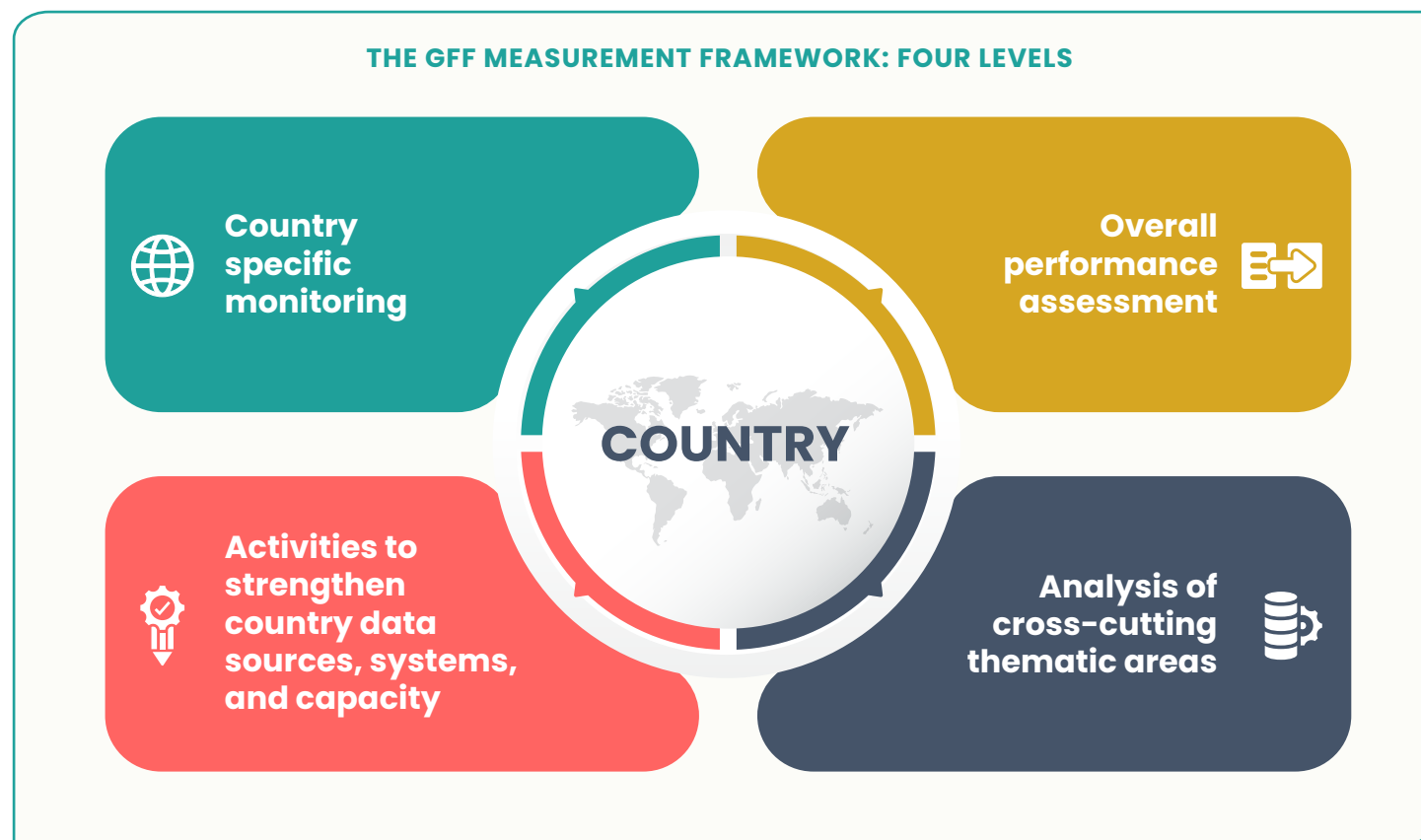
⁴The strategy key performance indicators provide information on the overall impact of investment case related activities and GFF support on women's, children's, and adolescents' health and financial systems for UHC. The indicators capture progress on each of the five GFF strategic directions and shed insight into conditions that facilitate and hinder progress in the GFF supported countries, which can inform decisions on how to bring successful activities to national scale and inform introduction of similar activities into other countries.

⁵GFF technical assistance and catalytic grants are operationally linked to World Bank International Bank of Reconstruction and Development (IBRD) and International Development Association (IDA) financing. Linking GFF grants in GFF supported countries with World Bank financing is an efficient way to leverage available financing to achieve more and better results.

⁶GFF also addresses data and measurement gaps for topics integral to the GFF strategy including gender, equity, adolescent health and meaningful participation, integration of private sector data into country health information systems, and the alignment, quality, and efficiency of financing for universal health coverage.

FIGURE 3. | The GFF Measurement Framework

Figure 3 shows how all four levels of the measurement framework interrelate to and complement each other. It also highlights the GFF’s country-centered approach.



Roadmap on the components of the GFF measurement framework

The remainder of this paper is organized into five main sections that describe the four complementary levels of the measurement framework plus the [GFF data portal](#). The data portal is the on-line dissemination platform for results of GFF monitoring efforts and assessments. Section 1 provides an overview of the GFF approach to overall assessments of progress towards the GFF Strategy. This section describes the three types of standardized metrics (impact, outcome, and key performance indicators linked to the five GFF strategic directions) collected and analyzed annually across all GFF

countries, enabling a high-level picture of progress towards the GFF twin goals of improved financing structures for universal health coverage and health outcomes for women, children, and adolescents. Section 2 explains the strategy for detailed country-specific monitoring based on country investment cases and associated co-financed projects. The results from this second level of monitoring inform country review processes, providing evidence on factors affecting implementation of country-tailored projects and where changes to investment cases might need to be made. Section 3 presents an overview of GFF activities to build

country systems and capacity to use data for decision making, including summaries of flagship projects (e.g., the MAGE, FASTR, and Countdown to 2030 projects and the GFF implementation and evaluation research portfolio). Section 4 presents a short description of cross-cutting analyses on thematic topics central to the GFF strategy. The last section summarizes the contents of the GFF data portal.

The GFF model is iterative and responsive to countries. The four components of the measurement framework mirror the GFF model and evolve as new monitoring and evaluation needs emerge. Although this type of approach introduces complexities to measurement and monitoring, it is grounded in the principles of nimbleness and country-centeredness (i.e., adapting to ever changing GFF-supported country realities and contexts). A stocktaking of the GFF model and accompanying

measurement framework will be completed as part of the development of the GFF Strategy (2026-2030).

The GFF measurement framework purposefully does not include a summary index of progress. Such indices are useful for country ranking and can provide a crude sense of trends over time towards a collective goal. However, composite summary measures are not helpful for identifying specific areas of progress or bottlenecks or for guiding country decision making on where resources should be directed. The aim of the GFF strategy is not to rank countries but to support countries to achieve feasible progress in areas they have identified as priorities for women’s, children’s, and adolescents’ health. Hence, the measurement framework is designed to maximize utility of GFF monitoring activities for the GFF countries and places country realities at the core.



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Overall performance assessment: How well is GFF progressing towards achievement of its 2021–2025 strategy?

This section is organized into three sub-sections. The first sub-section presents the interrelationships between the three types of core metrics used to support overall GFF performance monitoring (impact, outcome, and strategy key performance indicators). The second subsection describes the core impact and outcome metrics in the GFF logic framework that are

analyzed annually to assess progress towards GFF's ultimate goals of improved health financing and health outcomes across its portfolio of countries. The third sub-section reviews the strategy key performance indicators (KPIs) linked to each of the five GFF strategic directions, which have multiple components that track degree of country implementation of prioritized reforms and activities.

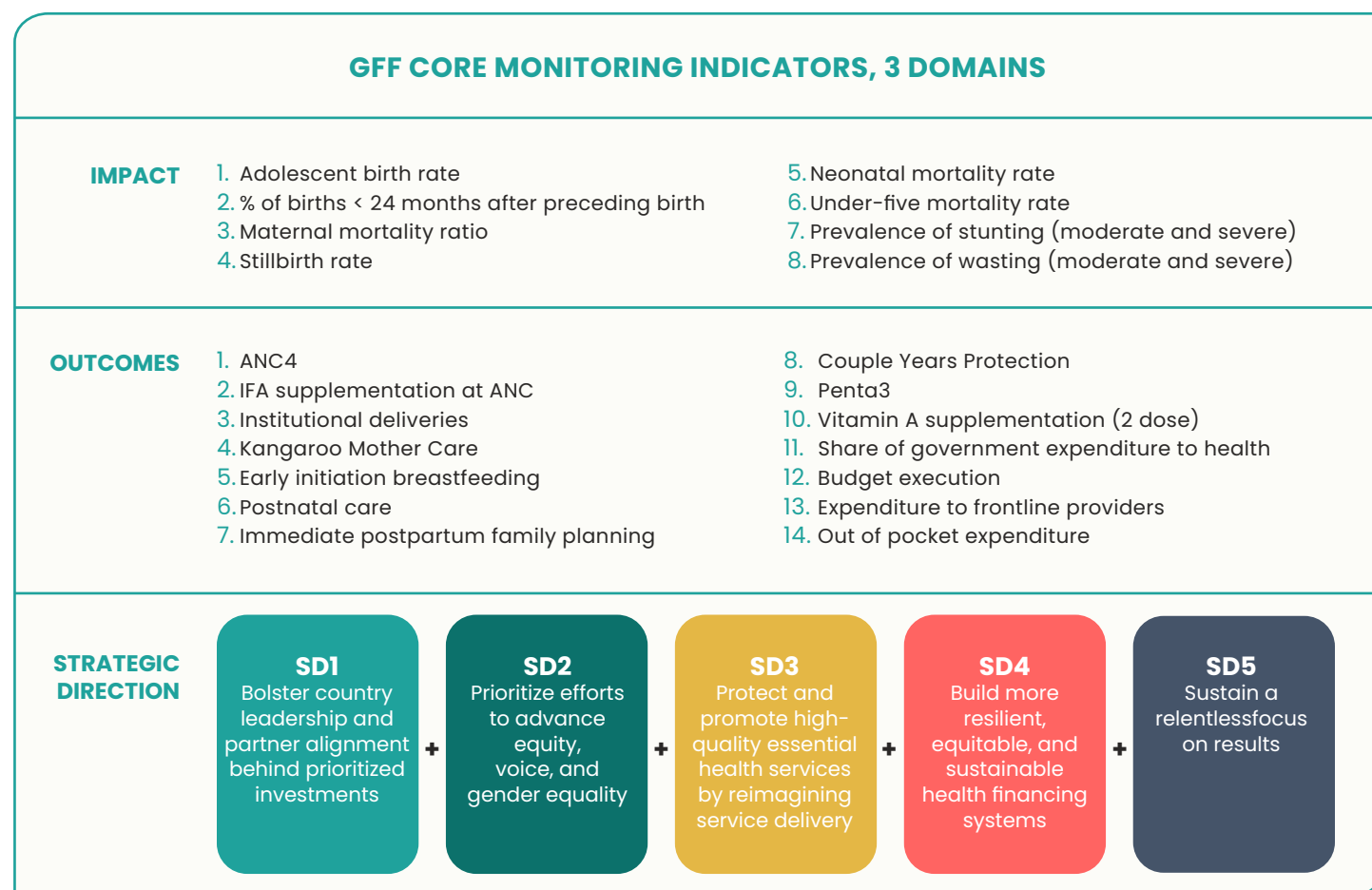
1.1 Core metrics for overall GFF performance monitoring – impact, outcome, and strategy key performance indicators

The GFF Measurement Framework includes a set of metrics collected and analyzed through a standardized approach across all countries (details on data collection procedures, data processing and data visualizations are described in Section 5 on the GFF data portal). This core set of metrics enables progress assessments for the full portfolio of GFF countries on an annual basis as well as comparisons between GFF countries. Although the GFF model places primacy on a country-led and owned process for developing and implementing investment cases, regular tracking of the core indicator set provides insights on the overall effectiveness of the GFF approach towards improving health outcomes for women, children, and adolescents and strengthening financial mechanisms for UHC in GFF-partner countries. The annual progress assessments take into consideration the number of years of implementation, considering the first

year of implementation as the baseline. More nuanced assessments of population groups targeted through prioritized reforms are carried out as part of the country-specific monitoring (described in Section 2).

The core set includes impact and outcome level indicators as well as process-related indicators for each of the five Strategic Directions in the GFF Strategy (2021–2025) (Figure 4). Annex 1 includes reference sheets for the impact and outcome level indicators. The reference sheets provide comprehensive metadata for each core indicator and are consistent with official [Sustainable Development Goal metadata](#) and online toolkits developed by World Health Organization technical advisory groups on measurement (specifically the [Mother and Newborn Information for Tracking Outcomes and Results](#), the [Child Health Accountability Tracking Group](#), and the [Global Action for Measurement of Adolescent Health](#)).

FIGURE 4. Domain areas for core indicators in the GFF Measurement Framework



Note: The specific indicators tracked within each of the three domains are updated periodically to reflect changes in the evidence base, measurement improvements, and country priorities. Changes to the GFF core indicator list are reflected on the GFF data portal.

1.2 Core GFF impact and outcome indicators: Selection rationale and monitoring

The GFF core health impact indicators (Table 1, figure 4) are aligned with major global health initiatives including the Sustainable Development Goal framework (SDG) (3), the Global Strategy for Women’s, Children’s, and Adolescents’ Health (2016–2030) (4), Ending Preventable Maternal Mortality (EPMM) (5), the Every Newborn Action

Plan (ENAP) (6), the Child Survival Action (7), and Family Planning 2030 (8). The core health outcome indicators (table 1) capture information on interventions recommended in global guidance and proven effective at addressing a leading cause of maternal, newborn, child, or adolescent mortality.

TABLE 1. Core GFF health indicators, by indicator type (impact, outcome) and by phase of the continuum of care (reproductive health, maternal and newborn health, child and adolescent health and nutrition) *, **, ^

HEALTH INDICATOR	CoC TO CONTINUUM OF CARE	GLOBAL GOAL OR TARGET
IMPACT INDICATORS		
Percentage of births less than 24 months after preceding birth	Reproductive health	Strong evidence linked to maternal, newborn, and child survival
Adolescent birth rate	Reproductive health, Adolescent health	SDG target 3.7, indicator 3.7.2; FP2030 core indicator
Maternal mortality ratio	Maternal health	SDG target 3.1, and indicator 3.1.1
Stillbirth rate	Newborn health	ENAP–EPMM target
Neonatal mortality rate	Newborn health	SDG target 3.2, indicator 3.2.2
Under-five mortality rate	Child health	SDG target 3.2, indicator 3.2.1
Prevalence of stunting among children under five years of age (moderate and severe)	Child Health, Nutrition	SDG target 2.2, indicator 2.2.1; World Health Assembly Global Nutrition target
Prevalence of wasting among children under five years of age (moderate and severe)	Child Health, Nutrition	SDG target 2.2, indicator 2.2.2 (wasting component); World Health Assembly Global Nutrition target
OUTCOME INDICATORS		
Immediate postpartum family planning	Reproductive health	
Couple-years of protection	Reproductive health	FP2030 core indicator
Demand for family planning satisfied	Reproductive health	FP2030 core indicator; Tracer indicator in the RMNCH component of the SDG 3.8.1 UHC index
Antenatal care (4 or more visits)	Maternal and newborn health	ENAP–EPMM target; Tracer indicator in the RMNCH component of the SDG 3.8.1 UHC index

TABLE 1. | Cont.

HEALTH INDICATOR	CoC TO CONTINUUM OF CARE	GLOBAL GOAL OR TARGET
OUTCOME INDICATORS		
IFA supplementation during ANC	Maternal and newborn health, Nutrition	
IPTp (SP/Fansidar 3+ doses)	Maternal and newborn health	Note: relevant for malaria endemic countries
Institutional deliveries	Maternal and newborn health	
Postnatal care for mother	Maternal and newborn health	ENAP-EPMM target
Postnatal care for babies	Maternal and newborn health	ENAP-EPMM target
Early initiation of breastfeeding	Maternal and newborn health, Nutrition	Tracer indicator for the ENAP indicator on essential newborn care
Kangaroo mother care	Maternal and newborn health	Core ENAP indicator for newborns at risk or with complications
Exclusive breastfeeding among children 0-5 months	Child health, Nutrition	World Health Assembly GlobalNutrition Target
Penta 3 immunization	Child health	IA2030 core indicator; DTP3 is included as a tracer indicator in the RMNCH component of the SDG 3.8.1 UHC index; DTP3 is tracked as one of four indicators for SDG 3.b.1
Vitamin A supplementation (full dose)	Child health, Nutrition	
Minimum acceptable diet***	Child health, Nutrition	
Careseeking for symptoms of acute respiratory infections	Child health	Tracer indicator in the RMNCH component on the SDG 3.8.1 UHC index
Oral rehydration solution and zinc	Child health	

* Reproductive and maternal health indicators can be disaggregated by age to capture information on the adolescent population. Indicators can also be disaggregated by sex/gender where relevant and sub-populations of interest.

** Full metadata available for all core impact and outcome indicators in Annex 1 including definition, methodology for computation, rationale for inclusion in the GFF framework, and resources.

*** Minimum acceptable diet is a composite indicator composed of two parts, minimum dietary diversity and minimum meal frequency. Data for the minimum dietary diversity indicator is easier to interpret and is the main driver for the value for the minimum acceptable diet indicator.

^ This is the list of indicators as of January 2024. Updates or changes to the indicator list made after this time are available on the GFF data portal.

The four core health financing indicators provide information about the medium- and long-term outcomes of investments and financial reforms and are critical milestones towards the achievement of the GFF aim of strengthened country financial systems. These four are:

1. Share of government expenditure to health, which captures information on government commitment;
2. Out of pocket expenditure, an important measure of catastrophic

household spending and impoverishment and consistent with SDG indicator 3.8.2;

3. Share of health expenditure going to frontline providers, critical for tracking investment in the health care workforce, and
4. Government health budget execution rate to monitor the degree to which approved financial, operational, and capital health plans are being implemented.

Monitoring activities for the core GFF impact and outcome indicators: overall assessment and achievement of milestones

The GFF core impact and outcome indicators are reported on through two mechanisms. The Countdown to 2030 for Women’s, Children’s, and Adolescents’ Health⁷ (Countdown) develops an annual report that provides a general assessment of the current situation and progress in the GFF-supported countries. It focuses on the core indicators on mortality, nutrition, intervention coverage, and inequalities from the GFF results framework. The analysis is primarily based on available household survey data and global estimates and is organized into three areas of maternal and newborn health, child health and nutrition, and fertility. The report accounts for the number of years each GFF country has been receiving support and compares progress across the GFF portfolio of countries to global trends.

The second reporting mechanism is a standardized set of bar charts displayed on the [GFF data portal](#) that present progress on implementation milestones related to the output, medium-term outcome, long-term outcome, and impact indicators in the GFF Logic model. These milestone-related, quantitative indicators track stepwise progression towards achievement of the GFF Strategy aims and are aligned with the length of time a GFF country has been implementing its investment case (table 2). Data on the implementation milestones are also synthesized and presented in the annual GFF progress report. The annual GFF report provides an overview of the contribution of the GFF partnership to country-led result and highlights concrete examples of how GFF supported countries are building resilient, equitable, high quality health systems.

⁷ Countdown, a global collaboration of academic institutions, international agencies, and civil society, aims to generate evidence to improve the health of women, children, and adolescents in low- and middle-income countries. In addition to its work on global and regional monitoring and measurement, Countdown focuses on working with country public health institutions and ministries of health in Global Financing Facility (GFF) supported countries to assess progress and performance of country programs and investment cases, and to strengthen country analytical capacity. Such Countdown country collaborations have been established in 24 countries. <https://www.countdown2030.org/>

TABLE 2. GFF implementation milestones used to assess progress across the portfolio of GFF supported countries, based on the output, medium-term outcome, long-term outcome, and impact indicators in the GFF logic model.*

INDICATOR DOMAIN & NAME	NUMERATOR	DENOMINATOR
OUTPUT		
Sustained government led multi-stakeholder engagement platform	Number of countries with a country platform that holds regular country meetings to discuss results arising from implementing the investment case (IC) and corrective action	All GFF countries with a complete IC
	Number of countries with a country-led multi stakeholder platform which document inclusion of civil society organizations (CSOs)	All GFF countries
National and donor investment aligned in support of investment case	Number of countries with a completed investment case	All GFF countries
	Number of countries with a completed measurable and feasible results framework	All GFF countries with a complete IC
	Number of countries with investment case prioritizing the most at-risk or underserved populations and/or geographic locations	All GFF countries with a complete IC
	Number of countries with IDA/IBRD/GFF World Bank projects co-financing the IC that are board approved	All GFF countries
	Number of countries with IDA/IBRD/GFF World Bank projects co-financing the IC that are disbursing	Total number of GFF countries with Board approval
	Number of countries with resource mapping and financial gap analysis conducted	All GFF countries

TABLE 2. Cont.

INDICATOR DOMAIN & NAME	NUMERATOR	DENOMINATOR
OUTPUT		
Financing and systems reforms prioritized	Number of countries with an implementation plan including initiatives to improve domestic resource utilization and mobilization (DRUM), efficiency, and/or financial protection	All GFF countries
	Number of countries that have linked any of their HF reforms to loan/credit operations	All GFF countries
Functional, national data platform	Number of countries with routine data visuals and analysis of the IC Results Framework indicators available to the country platform	All GFF countries with a complete IC
	Number of countries with an established process to analyze prioritized results from the framework for review at the Country Platform meeting	All GFF countries with a complete IC
	Number of countries with completed health information system assessment	All GFF countries
MEDIUM-TERM OUTCOME INDICATORS		
Improvements in service delivery	Number of countries improving in 75% or more of their RMNCAH-N output indicators as defined in the Investment Case results framework	Total number of GFF countries with an approved IC and outcome data over time
	Number of countries that are actively engaged in monitoring quality of services	All GFF countries with a complete IC
Financing and systems reforms adopted and implemented	Number of countries that identified private sector/mixed health system reforms	Total number of GFF countries that have specified mixed health system reforms in their IC or equivalent

TABLE 2. | Cont.

INDICATOR DOMAIN & NAME	NUMERATOR	DENOMINATOR
Systematic use of data to inform decision making	Number of countries that have conducted or are conducting an annual and/or midterm reviews of the IC at the national and sub-national level to inform the country platform	GFF countries with Government approved IC
LONG-TERM OUTCOME INDICATORS		
Improved efficiency of health- related investments	Number of countries with increased health budget execution rate	Total number of GFF countries
Equitable, scaled, sustained coverage of high impact interventions	Number of countries showing improvement in 75% or more of their maternal and newborn outcome indicators	GFF countries with a complete IC and time-trend data that report maternal and newborn outcome data
	Number of countries showing improvement in 75% or more of their family planning outcome indicators	GFF countries with a complete IC and time-trend data that report family planning outcome data
	Number of countries showing improvement in 75% or more of their nutrition outcome indicators	GFF countries with a complete IC and time-trend data that report nutrition outcome data
	Number of countries showing improvement in 75% or more of their health systems strengthening outcome indicators	GFF countries with a complete IC and time-trend data that report health systems strengthening outcome data
	Number of countries on track to achieve RMNCAH-N outcomes as defined in the investment case	Total number of countries with an approved IC
IMPACT INDICATORS		
Accelerated improvements in RMNCAH-N indicators (“results”)	Number of countries reducing the under-5 mortality rate, among countries with two surveys in the last 10 years	Number of countries implementing for more than 3 years with two surveys reporting U5MR in the last 10 years
	Number of countries reducing the neonatal mortality rate, among countries with two surveys in the last 10 years	Number of countries implementing for more than 3 years with two surveys reporting NMR in the last 10 years
	Number of countries reducing the maternal mortality ratio, among countries with two surveys in the last 10 years	Number of countries implementing for more than 3 years with two surveys reporting MMR in the last 10 years

TABLE 2. | Cont.

INDICATOR DOMAIN & NAME	NUMERATOR	DENOMINATOR
	Number of countries that have demonstrated or have a high probability of a reduction of under-five mortality rate	Number of countries implementing for more than 3 years
	Number of countries that have demonstrated or have a high probability of a reduction of neonatal mortality rate	Number of countries implementing for more than 3 years
	Number of countries reducing the adolescent birth rate (15-19 years old), among countries with two surveys in the last 10 years	Number of countries implementing for more than 3 years
	Number of countries reducing the percentage of births born less than 24 months after the preceding birth, among countries with two surveys in the last 10 years	Number of countries implementing for more than 3 years
	Number of countries reducing stunting among children under five years of age, among countries with two surveys in the last 10 years	Number of countries implementing for more than 3 years
	Number of countries reducing stunting among children under five years of age, among countries with two surveys in the last 10 years	Number of countries implementing for more than 3 years
	Number of countries reducing anemia among women aged 15-49 years, among countries with two surveys in the last 10 years	Number of countries implementing for more than 3 years
Strengthened platform for PHC/UHC	Number of countries that show an increase in Domestic General Government Health Expenditure (DGGHE) per capita	Number of countries implementing for more than 3 years that specify DRM reforms in IC
	Number of countries that show an increase in DGGHE as % of General Government Expenditure (GGE)	Number of countries implementing for more than 3 years that specify DRM reforms in IC
	Number of countries that do not show an increase in proportion of households with out-of-pocket health expenditures	Number of countries implementing for more than 3 years that specify financial protection reforms in IC

* This is the list of indicators as of January 2024. Updates or changes to the indicator list made after this time are available on the GFF data portal.

1.2 Key performance indicators to monitor GFF activities related to the five GFF Strategic Directions

The two monitoring activities described above capture general progress on the downstream steps in the GFF Logic Model from outputs, outcomes, through to impact. To complement these efforts with more specific examination of GFF’s contribution to progress, the GFF developed key performance indicators (KPIs) on GFF activity areas linked to each of the five Strategic Directions outlined in the GFF Strategy

(2021–2025) (box 1). Monitoring these process-type indicators is essential for understanding the extent to which GFF activities (e.g., co-financed projects, support for policy dialogues and country platform convenings, analytical work) are driving meaningful changes in GFF partner countries that will ultimately lead to improved women’s, children’s, and adolescents’ health.

BOX 1. GFF Five Strategic Directions



The strategy KPIs help identify implementation challenges and successes in countries through a mix of quantitative and qualitative data. Sources used by the GFF Secretariat to populate KPI values include country investment cases, World Bank Project Appraisal Documents (PADs), country

implementation status reports, midterm reviews, evaluation reports, data shared by countries for inclusion on the GFF Data Portal, other data-related activities supported by the GFF and other publicly available data. Figure 5 clarifies the scope of information the strategy KPIs capture.

FIGURE 5. Summary of the scope and uses of the strategy KPIs

STRATEGY KPI – A STRATEGY AND MANAGEMENT TOOL THAT HELPS GUIDE ACTION AND IMPROVEMENT	
WHAT THE KPIS ARE	WHAT THE KPIS ARE NOT
Summary of country progress based on documentation and evidence.	Report from countries.
Utility-focused perspective on progress and gaps in GFF partner country engagements, focused on how and where the GFF provides support through its strategy and support modalities.	Full record of everything that countries have achieved.
Way of understanding what is happening in the “missing middle” between the inputs at the beginning of the results chain and the outcomes and impacts at the end.	Tool for tracking inputs, health outcomes or impact.
Tailored approach that enables focus on specific reforms and strengthening Onesizefits-all set of measures actions that countries have prioritized.	One-size-fits-all set of measures.

Strategy KPIs were developed for three activity areas most salient to each Strategic Direction and were approved by the Trust Fund Committee in 2023, following consultations with the GFF Results Advisory Group and Investors Group. Four criteria were used for developing strategy KPIs for each selected activity area:

- Captures changes at the country level triggered by GFF activities (i.e., must be a process-type measure that captures implementation steps beyond inputs such as available resources/raw materials);
- Is sensitive to change (e.g., within a year-time frame) following implementation of GFF activities;
- Is consistent with the GFF theory of change and logically linked through a readily defined causal pathway to the GFF outcome and impact

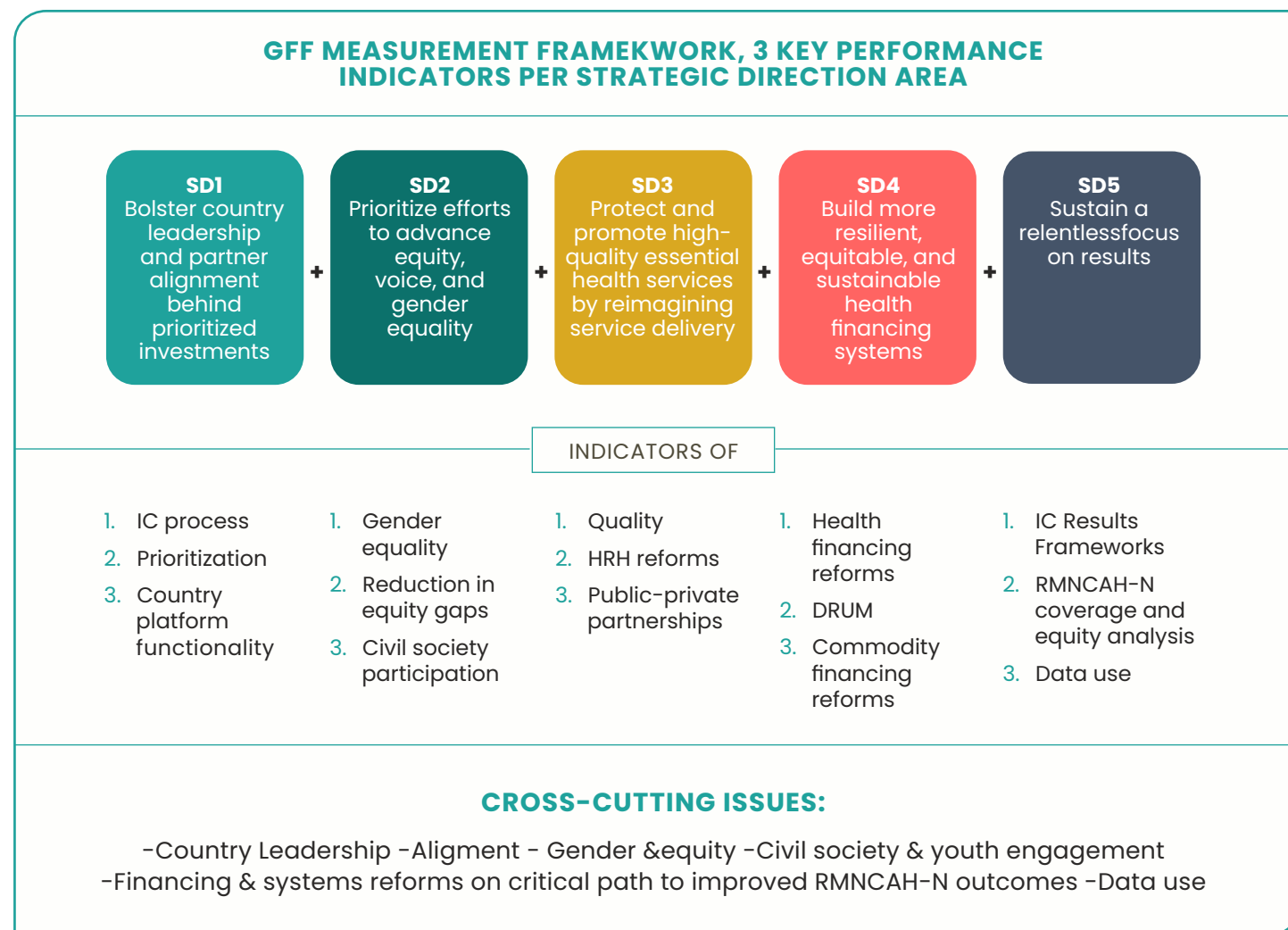
measures in the GFF Logic Model (figure 2), and

- Is feasible to measure through existing reporting mechanisms and data collection processes or through reasonable actions to strengthen existing processes.

Assessments of the strategy KPIs account for variations across the GFF countries in terms of duration of investment case implementation and country-specificity of health system reforms introduced.

In addition to showing the selected areas for indicator development per Strategic Direction, figure 6 highlights cross-cutting issues of relevance to all five Strategic Directions. GFF’s monitoring work on these issues are elaborated on in section 3. KPIs capturing the complex concepts of country leadership and alignment that are integral to the GFF strategy are under development.

FIGURE 6. Performance indicators to monitor the status of activity implementation for each of the GFF five Strategic Directions.



Key performance indicators by GFF Strategic Direction area

Table 3 lists the KPIs developed for the five GFF Strategic Directions. These indicators are compound, and most use a “cascade” modality for two reasons: The underlying constructs are multi-faceted and, therefore, best measured through compound metrics; and the cascade approach accommodates variation across countries in terms of implementation

timelines and implementation strength. The cascades include a series of steps, each representing a measurable stage in activity or reform implementation. The steps, viewed together, provide an indication of how far along countries are in introducing reforms or activities and where they may be experiencing bottlenecks.

TABLE 3. Key performance indicators for the GFF Strategic Direction areas, process measures for GFF activities*

KEY PERFORMANCE INDICATOR AREA	INDICATOR DEFINITION AND MEASUREMENT APPROACH	DENOMINATOR	NOTES
STRATEGIC DIRECTION 1: BOLSTER COUNTRY LEADERSHIP AND PARTNER ALIGNMENT BEHIND PRIORITIZED INVESTMENTS			
IC process	<p>Percentage of countries whose investment case process meets each of the following criteria, reported as a cascade: becomes an index, on a 0-3 scale with 1 point for each of the following</p> <ol style="list-style-type: none"> 1. Has the IC been finalized and validated by government; 2. Are the operational plans associated with the IC reviewed annually (in line with the living IC approach); 3. Are the operational plans associated with the IC updated based on data and evidence following the annual review (in line with the living IC approach). 	All GFF countries	<ul style="list-style-type: none"> • Some key aspects of the IC process are included elsewhere and thus not duplicated here (e.g., prioritization, CSO engagement). • The living IC approach with annual review and updates represents a shift in the model that is the process now. The population of values for this indicator will reflect that, with values increasing as the operationalization of the new approach becomes more mature.
Prioritization	<p>Percentage of countries that meet each of the following criteria, reported as a cascade:</p> <ol style="list-style-type: none"> 1. Completed costing of the IC; 2. Completed resource mapping, for the IC; 3. Completed financial gap analysis for the IC; 4. Used the resource mapping and gap analysis to inform IC prioritization process; 5. Aligned the content of annual operational plans with the resource envelope available including on and off budget resources. 	All GFF countries with finalized IC	<ul style="list-style-type: none"> • Indicator values to be reported both as a % of criteria met per country as well as the % of countries meeting the last criterion, which specifically measures prioritization. • Intersects with SD4 indicators. • For countries that have met all five criteria, the last criterion would need to be reassessed each year, given that review of how well plans are aligned with resources would need to be done each year.

TABLE 3. | Cont.

KEY PERFORMANCE INDICATOR AREA	INDICATOR DEFINITION AND MEASUREMENT APPROACH	DENOMINATOR	NOTES
STRATEGIC DIRECTION 1: BOLSTER COUNTRY LEADERSHIP AND PARTNER ALIGNMENT BEHIND PRIORITIZED INVESTMENTS			
Country platform CP index	<p>Average score on Country Platform Functionality Index, based on the following 7 criteria:</p> <ol style="list-style-type: none"> 1. Government leadership role in convening is clearly demonstrated; 2. Written Terms of Reference adopted; 3. Inclusive membership, including civil society, youths and private sector up to 3 points: one for inclusion of each group, with formal membership documented in TOR; 4. Convenes regularly (ideally 4 but at least 2 times in past year); 5. Actions noted in minutes. 	All GFF countries	<ul style="list-style-type: none"> • It is recognized that there can be multiple fora for convening within any given country, but the main coordination forum that is the focus here should have a central role in ensuring stakeholders come together in an inclusive way for dialogue and action, including in relation to the IC. Intersects with KPIs on civil society and data use. • The criteria above are aligned with the updated Country Platform assessment tool used by the GFF.
STRATEGY DIRECTION 2: PRIORITIZE EFFORTS TO ADVANCE EQUITY, VOICE, AND GENDER EQUALITY			
Gender gaps	<p>% of countries meeting each of the following criteria, tracked as a cascade:</p> <ol style="list-style-type: none"> 1. KPI criterion and continue to track as management information; 2. Prioritized one or more strategy(ies) in the IC and/or projects to address gender-equality challenges that affect RMNCAH-N outcomes; 3. Measurement approach in place to track implementation; 4. Begun implementing the strategy (ies) with GFF support; 5. Demonstrated measurable progress toward closing the gaps. 	All GFF countries with a finalized investment case	<ul style="list-style-type: none"> • Here and in other cascade indicators that follow, 'measurement approach in place' has two elements that need to be met: a) explicit definition of the measurable outcome that the reform aims to achieve, and b) transparent process in place to track measurable progress toward that outcome over the course of implementation • Some of the steps only apply to countries that have reached a certain stage of implementation maturity; this will be explicitly noted in the reporting • Resources from GFF/World Bank (co-financed projects, TA) to support the strategy(ies) will be tracked for management purposes.

TABLE 3. | Cont.

KEY PERFORMANCE INDICATOR AREA	INDICATOR DEFINITION AND MEASUREMENT APPROACH	DENOMINATOR	NOTES
Equity gap	<p>% of countries meeting each of the following criteria, tracked as a cascade:</p> <ol style="list-style-type: none"> 1. KPI criterion and continue to track as management information; 2. Prioritized one or more strategy(ies) in the IC and/or projects to address equity gaps related to poverty, geography or marginalized groups that affect RMNCAH-N outcomes; 3. Measurement approach in place to track implementation; 4. Begun implementing the strategy(ies) with GFF support; 5. Demonstrated measurable progress toward closing the gaps. 	All GFF countries with finalized investment case	<ul style="list-style-type: none"> • Gender-related equity gaps should be addressed through the gender indicator rather than this indicator • Some of the steps only apply to countries that have reached a certain stage of implementation maturity; this will be explicitly noted in the reporting • Resources from GFF/World Bank (co-financed projects, TA) to support the strategy(ies) will be tracked for management purposes • Aligned with Country Equity Diagnostics, which play a key role at the gap identification stage
Civil society and youth participation	<p>% of countries with civil society and youth participation in each of the following reported as index scored 0-6:</p> <ol style="list-style-type: none"> 1. Country Platform (formal membership per TOR) 1 point for civil society and 1 point for youth; 2. IC development process 1 point for civil society and 1 point for youth; 3. Regular review of implementation progress (if IC finalized) 1 point for civil society and 1 point for youth 	All GFF countries	<ul style="list-style-type: none"> • Proposed revision to indicator: track civil society and youth participation separately and give one point for each group for each of the three criteria (reported as an average score out of six, and with ability to report disaggregated values for CSOs and youth) • Indicator does not address how deep or meaningful participation is. That is addressed through CP assessments and dialogue in country • Intersects with KPIs on IC process and Country Platform functionality. • Aligned with GFF CSO and Youth Engagement Framework 2021-25 Monitoring and Accountability Plan.

TABLE 3. | Cont.

KEY PERFORMANCE INDICATOR AREA	INDICATOR DEFINITION AND MEASUREMENT APPROACH	DENOMINATOR	NOTES
STRATEGIC DIRECTION 3: PROTECT AND PROMOTE HIGH-QUALITY ESSENTIAL HEALTH SERVICES BY REIMAGINING SERVICE DELIVERY			
Quality of service delivery	% of countries meeting each of the following criteria, reported as a cascade: 1. Prioritized strategy(ies) in the project and/or the IC for improving quality of RMNCAH-N service delivery (NB: quality can be defined in terms of readiness/structural quality, process of quality/adherence to standards, or experience of care/respectful care, depending on context); 2. Measurement approach in place to track implementation; 3. Begun implementing the strategy(ies) with GFF support; 4. Demonstrated measurable progress toward improving quality.	All GFF countries with finalized IC, with disaggregation to show differences between those prioritizing strategies in this area and those not	<ul style="list-style-type: none"> All of the cascade indicators refer to the duration of the IC or projects. When countries close one IC or project and move to a new cycle, the values are re-set based on new strategies, reforms or strengthening actions defined in the new IC or projects. For those countries with multiple ICs and projects, all values in the 2023 round were captured for the original ICs and projects. For FY 2024, some countries will have values re-set to new ICs and projects. Some of the steps only apply to countries that have reached a certain stage of implementation maturity; this will be explicitly noted in the reporting Resources from GFF/World Bank (co-financed projects, TA) to support the reforms or strengthening actions will be tracked for management purposes
Human Resource for Health (HRH)	% of countries meeting each of the following criteria, tracked as a cascade. 1. Prioritized reform(s) in the project and/or the IC related to improving governance of private sector in health, or inclusion in service delivery reforms or inclusion in health financing reforms; 2. Measurement approach in place to track implementation; 3. Begun implementing the reform(s) with GFF support; 4. Demonstrated measurable progress toward achieving the objective of the reform(s).	All GFF countries with finalized IC, with disaggregation to show differences between those prioritizing strategies in this area and those not	<ul style="list-style-type: none"> Some of the steps only apply to countries that have reached a certain stage of implementation maturity; this will be explicitly noted in the reporting. Resources from GFF/World Bank (co-financed projects, TA) to support the strategy(ies) will be tracked for management purposes. Intersects with KPI on quality. If the reform is specific to quality of service delivery, it should be included in the KPI on quality instead of here.

TABLE 3. | Cont.

KEY PERFORMANCE INDICATOR AREA	INDICATOR DEFINITION AND MEASUREMENT APPROACH	DENOMINATOR	NOTES
Public-private engagement	% of countries meeting each of the following criteria, tracked as a cascade. 1. Prioritized reform(s) in the project and/or the IC related to improving governance of private sector in health, or inclusion in service delivery reforms or inclusion in health financing reforms; 1. Measurement approach in place to track implementation; 2. Begun implementing the reform(s) with GFF support; 3. Demonstrated measurable progress toward achieving the objective of the reform(s).	All GFF countries with finalized IC, with disaggregation to show differences between those prioritizing strategies in this area and those not	<ul style="list-style-type: none"> Some of the steps only apply to countries that have reached a certain stage of implementation maturity; this will be explicitly noted in the reporting. Resources from GFF/World Bank (co-financed projects, TA) to support the strategy(ies) will be tracked for management purposes.
STRATEGIC DIRECTION 4: BUILD MORE RESILIENT, EQUITABLE, AND SUSTAINABLE HEALTH FINANCING SYSTEMS			
Health Financing reforms	% of countries meeting each of the following criteria, tracked as a cascade: 1. Prioritized HF reform(s) in the project and/or the IC, for improved RMNCAH-N outcomes; 2. Measurement approach in place to track implementation; 3. Begun implementing the reform(s) with GFF support; 4. Demonstrated measurable progress toward achieving the objective of the reform(s)	All GFF countries with finalized investment case	<ul style="list-style-type: none"> Prioritized HF reforms also include DRM Some of the steps only apply to countries that have reached a certain stage of implementation maturity; this will be explicitly noted in the reporting. Resources from GFF/World Bank (co-financed projects, TA) to support the strategy(ies) will be tracked for management purposes.
Domestic Resource Mobilization (DRUM) advocacy	% of countries in which the GFF has done each of the following, measured as an index scored 0-2: 1. Engaged in specific advocacy and policy dialogue activities to support DRUM 2. Supported CSOs to engage in DRUM advocacy	All GFF countries with finalized IC	<ul style="list-style-type: none"> The first criterion can include GFF engagement directly with government or partners to align and jointly advocate. It should not include supported CSOs to engage because that is captured in the second criterion. Resources from GFF/World Bank (co-financed projects, TA) to support DRUM and CSO engagement will be tracked for management purposes.

TABLE 3. | Cont.

KEY PERFORMANCE INDICATOR AREA	INDICATOR DEFINITION AND MEASUREMENT APPROACH	DENOMINATOR	NOTES
Commodity financing	<p>% of countries meeting each of the following criteria, tracked as a cascade:</p> <ol style="list-style-type: none"> 1. Prioritized reform(s) in the project and/or the IC to ensure sufficiency of financing for RMNCAH-N commodities through government systems; 2. Measurement approach in place to track implementation; 3. Begun implementing the reform(s) with GFF support; 4. Demonstrated measurable progress toward achieving the objective of the reform(s) 	All GFF countries with finalized IC, with disaggregation to show differences between those prioritizing strategies in this area and those not	<ul style="list-style-type: none"> • Some of the steps only apply to countries that have reached a certain stage of implementation maturity; this will be explicitly noted in the reporting. • Resources from GFF/World Bank (co-financed projects, TA) to support the reform(s) will be tracked for management purposes. • Commodity availability at facility level to be tracked through health facility assessments and FASTR.
STRATEGIC DIRECTION 5			
SUSTAIN A RELENTLESS FOCUS ON RESULTS			
Investment case results frameworks	<p>% of countries meeting each of the following criteria, tracked as an index scored from 0-4:</p> <ol style="list-style-type: none"> 1. Finalized IC includes results framework; 2. Results framework includes a prioritized set of indicators with clear definitions 3. Country is able to meet the data requirements for the majority of their prioritized indicators 4. Sub-national disaggregation is available for prioritized indicators 	All GFF countries with finalized IC	<ul style="list-style-type: none"> • Intersects with KPIs of IC process and data use • We will clarify in CES workspace where that prioritization of indicators is done, e.g. within IC (or national strategy used as basis of IC), companion M&E framework, or other • We will clarify that the 'prioritized indicators' are identified because they are part of an annual review (it's defined by the country), within the CES workspace will ask for the list of prioritized indicators the country wants to review on an at least annual basis

TABLE 3. | Cont.

KEY PERFORMANCE INDICATOR AREA	INDICATOR DEFINITION AND MEASUREMENT APPROACH	DENOMINATOR	NOTES
Annual RMNCAH-N coverage and equity analysis	<p>% of countries that update and review RMNCAH-N coverage & equity analysis annually, an index, scored 0-3:</p> <ol style="list-style-type: none"> 1. RMNCAH-N coverage analysis updated annually based on new data inputs (equity analysis included to the extent that is possible, taking into account limitations in data availability) 2. Analysis documented in a report or presentation 3. Report or presentation summarizing analysis disseminated to stakeholders through Country Platform or similar forum 	All GFF countries with finalized IC	<ul style="list-style-type: none"> • Intersects with KPIs on equity gaps and data use • Not all countries have functional routine systems yet that enable them to meet the data requirements for this, but support is underway to address that
Data use	<p>% of countries with at least two meetings of Country Platform convened in the past year in which progress was reviewed and data and evidence were discussed:</p> <ol style="list-style-type: none"> 1. At least two meetings of Country Platform or similar forum convened in the past year in which progress was reviewed and data and evidence were discussed. 	All GFF countries with IC finalized	<ul style="list-style-type: none"> • Intersects with KPIs on Country Platforms and RMNCAH-N coverage and equity analysis
Adolescent health	<p>% of countries meeting each of the following criteria, tracked as a cascade:</p> <ol style="list-style-type: none"> 1. Prioritized strategy(ies) in the project and/or the IC for improving adolescent health; 2. Measurement approach in place to track implementation; 3. Begun implementing the strategy(ies) with GFF support; 4. Demonstrated measurable progress toward improved adolescent health. 	All GFF countries with finalized IC, with disaggregation to show differences between those prioritizing strategies in this area and those not	<ul style="list-style-type: none"> • Adolescent health improvement strategies tracked in this indicator include but are not limited to those addressed adolescent SRHR. • Some of the steps only apply to countries that have reached a certain stage of implementation maturity; this will be explicitly noted in the reporting • Resources from GFF/World Bank (co-financed projects,

* This is the list of strategy KPIs as of January 2024. Updates or changes to the indicator list made after this time are available on the GFF data portal.

Major results of the strategy KPIs are made available on the GFF data portal. The strategy KPIs are refined periodically based on feedback from countries to improve relevance and utility of data collected. All updates to the strategy KPIs are reflected on the GFF data portal.



2

Country specific monitoring tailored to country investment cases and co-financed projects

Section 1 describes GFF’s monitoring activities that are standard across the GFF portfolio of countries to enable an overall assessment of progress toward the GFF Strategy. Central to the GFF model is recognition that no one size fits all approach to progress will work given variations in health systems and the epidemiological, demographic, economic and political conditions across the GFF supported countries. Countries lead the development, implementation, and regular reviews of investment cases that are uniquely tailored to their situations and contexts.

The GFF provides extensive guidance on how to prepare investment cases and associated monitoring frameworks and provides technical support to countries on how to collect, analyze and use data on investment case implementation. The GFF also prepares investment summaries for every partner country,

which contain indicators for assessing the value-add of GFF supported activities, co-financed projects, and reforms being implemented. Data for these indicators usually come from country routine monitoring systems and are updated annually through the public-access GFF data portal. Documentation on investment cases and World Bank co-financed projects (e.g., date when projects became effective and amount of project funds) is also available on country-specific pages on the GFF data portal.

The GFF Secretariat supports countries in adapting their investment cases and associated monitoring frameworks as needed (i.e., when a new co-financed World Bank project is introduced, when countries revise investment case activities based on new priorities or in response to information from progress assessments).

Strengthening country data sources, systems and capacities to improve country planning, monitoring, and accountability

Central to the GFF agenda and to Strategic Direction 5 is enhancement of country capacity to collect, analyze, monitor, and use their own data (for investment case monitoring and beyond). In the long term, improved country analytical capacity will increase the sustainability of gains made through GFF-supported activities and investments by fostering stronger cultures of data use and evidence-based decision making. High quality country data will also translate into better data for monitoring overall GFF performance.

To achieve these objectives, GFF is investing in country health information systems including [civil registration](#)

and [vital statistics systems](#), health management information systems (HMIS), maternal and perinatal death surveillance and response (MPDSR) systems and [health financing system](#). Highlighted below are three GFF partnership-based projects aimed at country capacity generation and health information system strengthening (FASTR, MAGE, and Countdown to 2030). These descriptions are followed by a brief recap of the GFF implementation and evaluation research portfolio, a key avenue through which GFF is working with countries to strengthen their data systems and uptake of evidence to guide policy and programmatic action.

FASTR: The GFF Approach to Rapid Cycle Analytics and Data Use

The aim of the Frequent Assessments and Systems Tools for Resilience (FASTR) [rapid-cycle analytics initiative](#) is to support countries with timely, rigorous, and low-cost approaches to monitoring primary health care while strengthening underlying country capacity and data systems.

FASTR's approach to rapid-cycle analytics generates high quality data based on country priorities and data use needs. Four technical approaches support this initiative:

1. Rapid cycle monitoring of routine health management information system data;
2. Longitudinal health facility phone surveys;

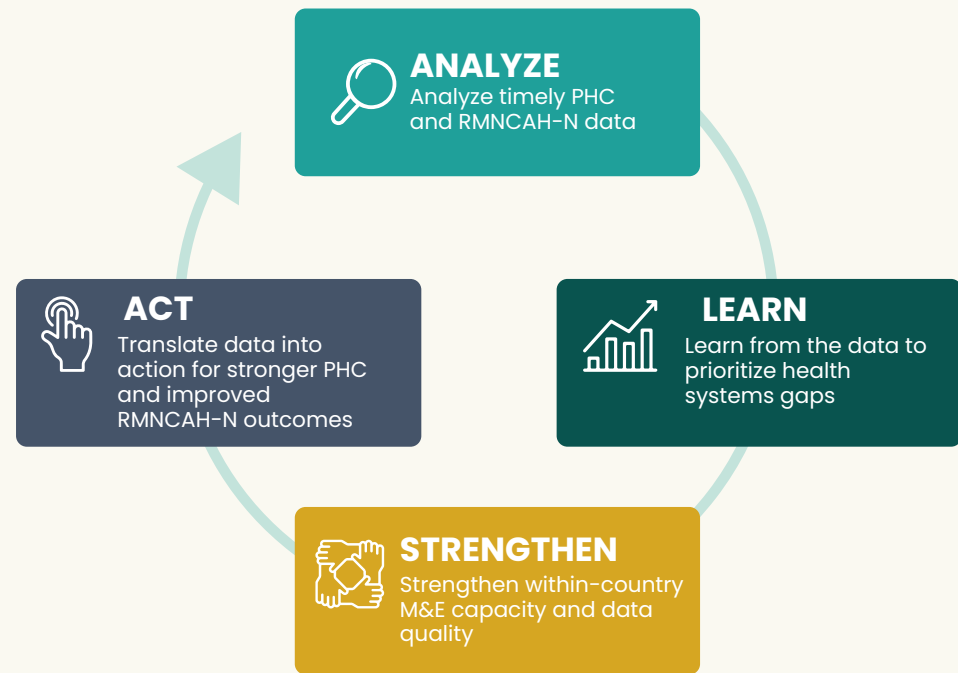
3. High frequency household surveys (conducted in partnership with the World Bank's Living Standards and Measurement Study) and
4. Rapid qualitative follow-up research. All approaches are customized to the specific country context and country initiatives.

Employing a collaborative and country-led approach, learning and capacity enhancing activities are conducted alongside data generation to promote data use for adjusting programs and policies. This continuous cycle of analyze-learn-strengthen-act seeks to improve the systematic use of data for decision-making towards improved RMNCAH-N outcomes (Figure 7).



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World Bank

FIGURE. 7 Analyze-learn-strengthen-act approach to support data for decision making



MAGE: A GFF- Johns Hopkins University Partnership

The Monitoring & Action for Gender & Equity project (MAGE) is a partnership between Johns Hopkins University (JHU) and the GFF with four objectives:

1. Strengthen capabilities and services of the GFF secretariat on gender and equity M&E.
2. Increase access to and uptake of gender and RMNCAHN data, tools, and evidence by the GFF and partner countries.
3. Improve engagement with and capacity of GFF countries on gender and equity M&E.
4. Strengthen systems and sustainability at GFF on gender and equity M&E.

FIGURE. 8

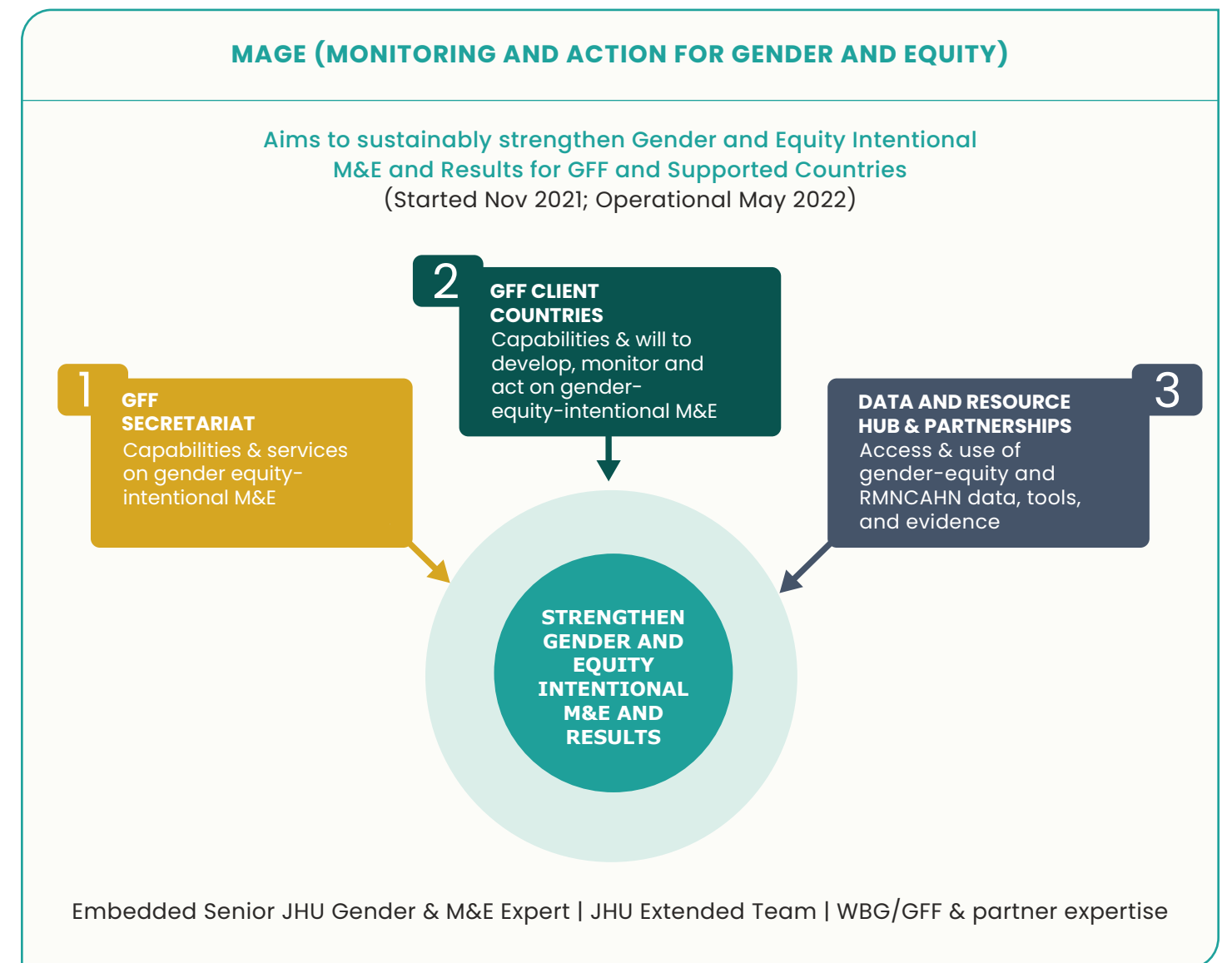


TABLE 4.

SOME KEY MAGE ACTIVITY AREAS	EXAMPLES OF SPECIFIC ACTIVITIES
1. Gender equity M&E guidance and content in key GFF strategies, plans, and initiatives	<ul style="list-style-type: none"> • Gender integration in strategy KPIs, investment case guidance, implementation research strategy • Human resources for health (HRH) strategy implementation, • Adolescent Health, Learning, Actions and Benchmarking (ADLAB)
2. Gender equity M&E support to countries	<ul style="list-style-type: none"> • Disbursement linked indicators implementation guidance in Pakistan, • Rapid Gender Assessment Cote d'Ivoire, • Revision of Health Gender Policy Ghana, • Respectful maternal care analysis Zambia
3. Gender equity in new and ongoing data collection, analysis, and use efforts	<ul style="list-style-type: none"> • FASTR, Countdown, GFF Data portal • Country Data Requests
4. Gender equity related analytics across-countries	<ul style="list-style-type: none"> • Africa Women's Leadership & Health Outcomes • Gender disaggregated HRH with Governance data
5. Gender equity M&E training for GFF, World Bank Group, country counterparts	<ul style="list-style-type: none"> • World Bank Group (WBG) training during Human Development week learning sessions • Gender responsive M&E for WBG Girls and Women Empowerment fellows

Currently, MAGE priority support is to 5 GFF countries: Pakistan, Cote d'Ivoire, Zambia, Ghana, Ethiopia. However, the MAGE team is available for consultation on all GFF countries and has engaged with the teams in Sierra Leone, Bangladesh, Mozambique, Tanzania.

Countdown to 2030 for Women's, Children's, and Adolescents' Health

Countdown to 2030 for Women's, Children's, and Adolescents' Health ([Countdown](#)) is a global collaboration of academic institutions, international agencies, and civil society. It aims to generate evidence to improve the health of women, children, and adolescents in low- and middle-income countries. In addition to its work on global and regional monitoring and measurement, Countdown works with country public health institutions and ministries of health in GFF supported countries to assess progress and performance of country programs and investment cases and to strengthen country analytical capacity. Such Countdown country collaborations have been established in 24 GFF partner

countries in Africa and South Asia with plans to expand to additional GFF partner countries.

Through the Countdown-GFF partnership, an annual workshop involving GFF-supported African countries is held to build the capacity of country teams to assess the quality of their routine data on RMNCAH-N, analyze trends in intervention coverage and equity including gender equity, examine health system performance and identification of bottlenecks, and produce a rigorous progress assessment of women's, children's, and adolescents' health. The Countdown country collaborations also generate analyses on specific RMNCAH-N topics in response to Ministry of Health requests.

Implementation research and evaluation strategy

Through the [Implementation Research and Evaluation \(IR&E\) Strategy](#), the GFF aims to:

1. Support countries to strengthen their own IR&E processes and systems for generating and using evidence,
2. Advance a country-led learning and improvement agenda in RMNCAH&N, and
3. Contribute to strengthening country accountability for achievement of measurable results. The GFF engages in countries in a manner

that deliberately contributes to building "learning health systems" characterized by strong country leadership in defining priority health system needs and information systems that generate high-quality, timely, relevant, and actionable evidence on these needs. Success of the strategy also means generating evidence and facilitating learning about the GFF model and its approach to country engagement, such that GFF support remains agile and adapts to what works in different contexts.



4

Cross-cutting thematic areas core to the GFF strategy and relevant to all GFF partner countries

Although the GFF approach is country-centric with investment cases developed by countries based on their own priorities, achieving significant improvements in women's, children's, and adolescents' health, and delivering on the promise of the [GFF Strategy \(2021-2025\)](#) requires attention to each dimension of the RMNCAH-N continuum of care. GFF undertakes sub-national analyses across the GFF portfolio of countries on thematic areas covering the continuum (specifically

maternal, newborn, and child health; nutrition; and sexual and reproductive health and rights). Descriptions of these thematic areas and latest analytical results are available on the [GFF data portal key themes pages](#).

[Summaries of GFF activities to improve gender equity](#) and the equitable coverage of health interventions are also available on the GFF data portal thematic pages.

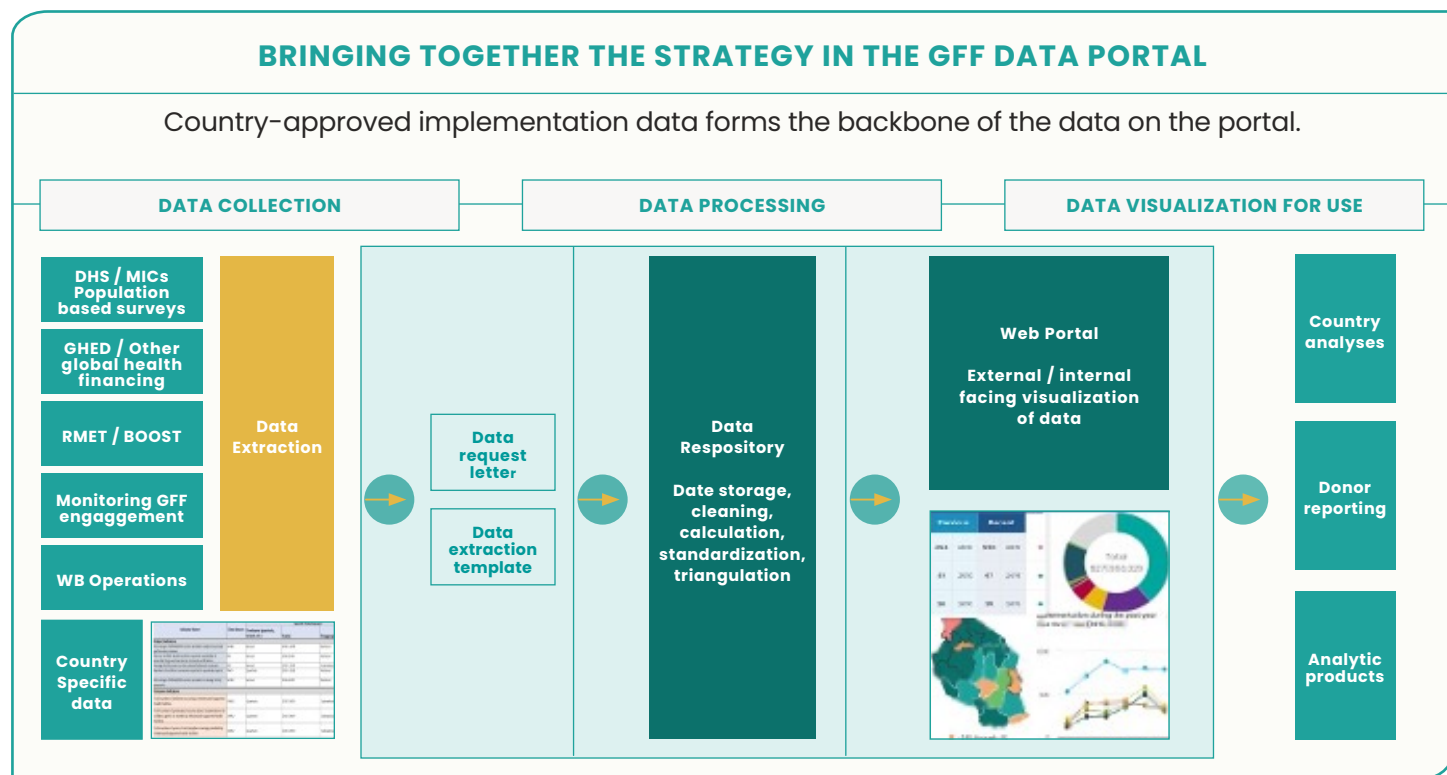
5

GFF data portal and GFF data collection processes

The GFF data portal is a publicly available platform for accessing country data to monitor progress on country investment cases and inform policy decisions for women’s, children’s, and adolescents’ health and nutrition. The objectives of the portal are to make country data dashboards available to improve data use, serve as a data repository for the GFF logic model indicators, and streamline data reporting processes for all levels of the

GFF Measurement Framework. Figure 5 shows the range of data systematically collected to monitor the GFF Strategy by data source, the process for compiling data into the GFF data repository, the data cleaning and analytical steps undertaken prior to putting data on the GFF data portal, and the final step of inclusion of these data into products such as country-specific analyses, donor reporting, and other analytical outputs.

FIGURE 9. The GFF data portal – data flow from collection, processing, to analytical outputs and data visualizations



The figure emphasizes the country-centrality of the GFF strategy and measurement framework and clarifies that all data reflected on the data portal are country-approved. The data portal is an effort to increase the transparency

of GFF activities and to enable analyses across GFF partner countries as well as deeper dives to understand progress in individual countries. More information on the data collection cycle for each data source is available upon request.



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Conclusion

This report describes the four components of the GFF measurement approach for monitoring the [GFF Strategy \(2021-2025\)](#) and the data portal, which serves as the main dissemination platform for the results of all monitoring activities. The components combined allow for two main levels of monitoring – an overall picture of progress across the full portfolio of countries towards achievement of the GFF Strategy aims, and country-specific progress towards priorities identified in country investment cases and associated co-financed projects. The components also detail how GFF supports the development of country information

systems and capacity to collect, analyze, interpret, and use data. Strengthening data systems and fostering a culture of data use for decision-making will help improve the sustainability of current and future investments in RMNCAH&N in the priority countries.

The GFF model is iterative and driven by country needs. The current measurement strategy, therefore, also retains an element of flexibility, with refinements made as needed to the core and country-specific indicators based on changes in the evidence-base, measurement advancements, country priorities, and specific country co-financed projects.



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World Bank

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www.globalfinancingfacility.org

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