

Health Systems Strengthening for RMNCAH-N Framework

OVERVIEW

The GFF is developing a Health Systems Strengthening for Reproductive, Maternal, Newborn, Child and Adolescent Health and Nutrition (HSS for RMNCAH-N) Framework, aimed at enhancing how its health systems strengthening investments contribute to improved health for women, children and adolescents. In partnership with Exemplars in Global Health (EGH), the GFF has developed an initial high-level draft of the HSS for RMNCAH-N framework, summarized in this document. This multi-year initiative seeks to establish a cohesive framework that aligns GFF's health system investments with measurable RMNCAH-N outcome and impact indicators. By doing so, the GFF aims to enhance the effectiveness of its investments, strengthen country health systems, and ensure that these efforts directly contribute to improved health for women, children, and adolescents.

The GFF's intent is to start at a high level with a clear conceptual framework, and then move iteratively toward greater specificity as the evidence improves and knowledge gaps are addressed. This high-level HSS for RMNCAH-N framework will serve as a foundational piece for *Evidence to Action*, the GFF's new knowledge & learning initiative which aims to generate actionable insights, systematically capture lessons learned, and inform decision-making to optimize health outcomes for women, children and adolescents.

ACTION REQUESTED

The Investors Group (IG) is invited to provide feedback on this initial draft. The Secretariat will use the feedback provided by the IG to strengthen and refine the framework.

SECTION 1: INTRODUCTION

Rationale for Developing the Framework

The GFF's mission centers on improving the health of women, children, and adolescents through an integrated health systems approach. This approach is integral to the overall GFF model and is supported by a Logic Model that connects investments and activities to measurable improvements in RMNCAH-N outcome and impact indicators. However, the GFF currently lacks a structured framework to guide investments across various health system areas, for maximal contribution to RMNCAH-N impact. The introduction of the HSS for RMNCAH-N Framework aims to address this gap.

Introducing this high-level framework now is timely, given that the process for developing the next GFF strategy will commence shortly. The HSS for RMNCAH-N Framework can serve as a foundational element of the GFF's next five-year strategy, aligning health systems strengthening investments with organizational goals and prioritized outcome and impact measures.

Introducing this framework now also helps facilitate the GFF's productive engagement in discussions associated with the Lusaka Agenda, and in collaborative work on health systems with Gavi, the Global Fund and other partners. By clarifying its approach to supporting country-led health systems strengthening in the form of a cohesive framework, the GFF aims to foster enhanced collaboration with partners.

Purpose

The purpose of the HSS for RMNCAH-N Framework is to systematically guide the GFF in:

- Optimizing investments across various health systems areas to enhance RMNCAH-N outcomes.
- Advancing a knowledge and learning agenda to deepen our understanding of how these investments impact RMNCAH-N outcomes.

The framework will examine health systems investments that benefit the full RMNCAH-N continuum (e.g., strategic purchasing of integrated service packages for meeting the health needs of women, children and adolescents holistically) as well as those with specific benefits for targeted outcomes along one part of the RMNCAH-N continuum (e.g., such as private sector engagement strategies specifically for improved outcomes in adolescent sexual and reproductive health and rights). Investments that have wide-reaching benefits across the RMNCAH-N continuum are referred to in this framework as ‘**broad investments**,’ while those that offer more specific benefits to one part of the continuum are referred to as ‘**targeted investments**.’ The HSS for RMNCAH-N Framework helps provide a basis for considering the optimal combination of broad and targeted investments in a given context.

Gender and equity are a core part of the HSS for RMNCAH-N framework and are considered at each level.

How the Framework will be used

Upon completion, the HSS for RMNCAH-N Framework will serve both internal and external purposes, as outlined below:

Internal

- **Enhanced Prioritization:** To optimize the prioritization of GFF investments and activities (e.g., through country processes), ensuring the highest possible impact on RMNCAH-N outcomes.
- **Continuous Improvement:** To inform ongoing refinement of GFF support and related operational processes.
- **Strategic Development:** To inform the development of the next GFF strategy for 2026-2030.

External

- **Clarity and Transparency:** To provide a clearer understanding of how, where, when, and why GFF invests, for partner countries and stakeholders.
- **Collaboration and Partnership:** To foster collaboration among partners, ensuring that health systems strengthening investments and activities are evidence-based and aligned.
- **Knowledge Sharing:** To contribute to the global, regional, and country-level knowledge base on effective health systems strengthening practices that enhance RMNCAH-N outcomes.

SECTION 2: GFF HSS Approach

Principles guiding the GFF HSS approach

- **Support Country Leadership:** Align with and bolster country-led identification of health priorities to ensure ownership and relevance.
- **Strengthen Institutional Frameworks:** Work through national and sub-national systems and processes to enhance the capabilities of institutions fulfilling key health functions.
- **Address Systems Gaps and Bottlenecks on Critical Path to Improved RMNCAH-N Outcomes:** Focus on identifying and addressing critical gaps within the health system that hinder improved outcomes for women, children, and adolescents, guided by systematic data analysis and evidence.
- **Integrate Gender and Equity:** Ensure that gender and equity considerations are woven into all strategies and interventions.
- **Accelerate Progress through Innovation:** Support countries to accelerate progress in RMNCAH-N outcome areas with lagging results through the adoption, institutionalization and scaling of innovation.
- **Leverage Local Expertise:** Partner with and build upon local knowledge and capabilities to enhance effectiveness and sustainability.
- **Foster Collaborative Partnerships:** Collaborate with governments, non-state actors, and development partners to strengthen alignment around country-led priorities and systems and facilitate coordination.
- **Focus on Measurable Results:** Prioritize analytics, timely data usage, and knowledge sharing to drive continuous systems improvement toward measurable outcomes for women, children and adolescents.

Elements of the HSS for RMNCAH-N Framework

The HSS for RMNCAH-N Framework is based on existing health systems frameworks, including the Primary Health Care Measurement Framework and Indicators (PHCMFI). The PHCMFI and other frameworks considered are summarized in Annex 1. The Key elements of the HSS for RMNCAH-N Framework are summarized below.

Prioritized pillars of GFF support within health systems

The GFF focuses primarily on addressing six pillars of health systems through strategic and operational “levers” essential for strengthening health systems and achieving improved RMNCAH-N outcomes. The six pillars include:

- Governance
- Health Financing
- Human Resources for Health (HRH)
- Supply Chain
- Service Delivery
- Data and Health Information Systems

All six pillars are established aspects of the GFF Key Performance Indicators and represent critical areas for intervention to ensure that health systems are robust, resilient, and capable of delivering high-quality, equitable care specifically for RMNCAH-N.

Strategic and operational levers

The GFF’s HSS for RMNCAH-N Framework utilizes the definition of strategic and operational levers from the PHCMFI. Strategic levers represent upstream actions that are foundational prerequisites for the operational levers, which are mutually reinforcing health systems actions that help accelerate progress. Two of the six pillars prioritized by the GFF (governance and health financing) represent strategic levers. The remaining four pillars (HRH, supply chain, service delivery and data & health information systems) represent operational levers.

Essential health services and evidence-based interventions

This framework focuses on health systems levers that optimize the effectiveness and delivery of these essential and evidence-based health interventions at scale. Through the framework, the GFF aims to align with and support operationalization of normative guidance developed by partner organizations such as the World Health Organization.

Health system objectives

These outcomes reflect a composite set of measures as defined by a recent review of health systems frameworks summarized in Annex 1. Taken together, they represent aspects of universal health coverage (access, quality, and financial protection) and other key health systems goals.

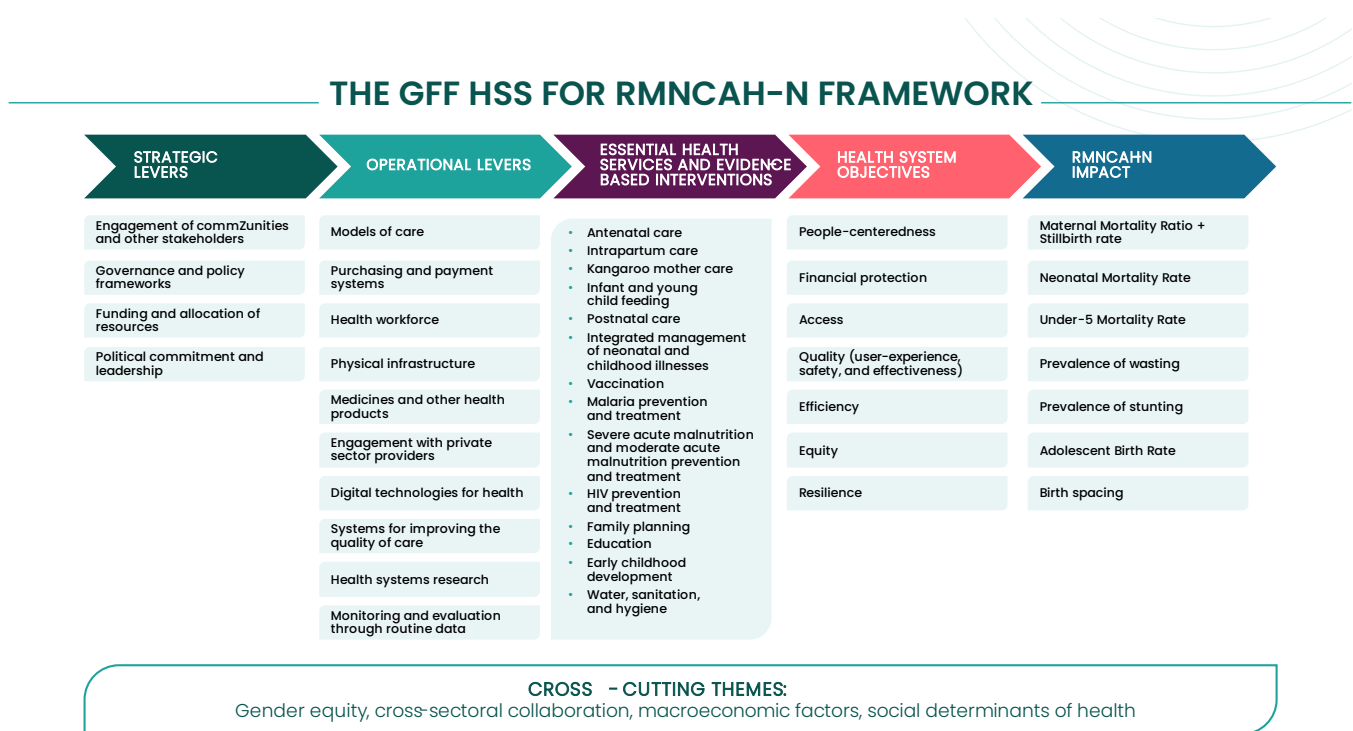
RMNCAH-N impact

High-priority outcomes that will yield the most significant benefits for women, children, and adolescents when health systems investments are effectively mobilized and implemented. These outcomes are not defined *de novo* by this framework—they are defined by existing impact indicators focused on women, children and adolescents’ health that the GFF has adopted as part of its strategy. These indicators, and how they are used alongside other indicators the GFF tracks, are described in detail in the GFF Measurement Framework.

Cross-cutting themes

Cross-cutting themes including gender and equity, social determinants of health and cross-sectoral collaboration are considered across each step of the framework.

Figure 1: The GFF HSS for RMNCAH-N Framework



How does the GFF work through the levers in the framework?

The GFF works through a variety of means to exploit the strategic and operational levers outlined in the framework above, including:

- **Facilitating Prioritization through Country-Led Investment Case Processes:** The GFF supports countries to develop Investment Cases that address their unique health challenges. Investment Cases are prioritized strategic plans that identify the most critical interventions to improve RMNCAH-N outcomes in a given context. Through support for resource mapping, costing and evidence-informed decision-making, the GFF enables countries to prioritize needs and optimize the use of financial and technical resources for greatest impact.
- **Leveraging World Bank Instruments and Co-Financing Opportunities:** Through its partnership with the World Bank, the GFF plays a catalytic role by facilitating health systems financing by combining grants, loans, and domestic resources, and linking them to RMNCAH-N outcomes. This integrated approach maximizes the impact of health investments while promoting long-term sustainability through country-led systems and processes.
- **Supporting the Uptake, Institutionalization and Scaling of Innovation:** The GFF supports countries to adopt, institutionalize and scale innovations that help accelerate progress in outcome areas that are lagging and where there are breakthrough innovations available. In doing so, the GFF focuses on integrated solutions delivered through routine systems—for example, integration of the Safer Birth Bundle of Care in Tanzania and Ethiopia.
- **Providing Technical Assistance to advance systems reforms and improve RMNCAH-N outcomes:** The GFF provides technical assistance tailored to each country’s specific needs in response to country demand and while actively translating global normative guidance into practicable systems reforms supported by World Bank operations. This includes capacity-building in health system governance, health financing, service delivery, RMNCAH-N technical areas, gender integration, monitoring and evaluation, and data use. The GFF mobilizes high quality technical assistance from the Secretariat and the World Bank as well as through global experts and partner institutions. The GFF recognizes that while known technical solutions are essential, they are often insufficient. Adaptive solutions tailored to country contexts are also required, particularly for addressing complex systems issues.
- **Collaborating with Partners at National, Regional, and Global Levels:** The GFF operates through an inclusive partnership model, collaborating with governments, civil society, the private sector, and other donors. The Country Platform is essential to fostering coordination and alignment at the national level, ensuring that all efforts support country-led priorities. The GFF also engages with regional and global partners to share knowledge, harmonize efforts, and drive collective action in strengthening RMNCAH-N outcomes.
- **Advancing Results Measurement, Analytics, and Knowledge Sharing:** A key pillar of the GFF’s support is its emphasis on results measurement, data analytics, knowledge exchange and data use. By supporting the development of robust monitoring and evaluation (M&E) systems, the GFF helps countries track progress, identify challenges, and make informed decisions. The GFF also promotes the timely use of data and shared insights for decision-making to continuously adapt strategies and achieve better health outcomes for women, children, and adolescents.

A summary of GFF actions to address each of the specific strategic and operational levers in the framework is provided in Annex 2.

SECTION 3: Connecting Investments in Specific Systems Areas to Prioritized RMNCAH-N Outcomes

Applying the HSS for RMNCAH-N Framework

The framework is designed to allow the deployment of combinations of health systems levers to accelerate improvements in specific RMNCAH-N outcomes. It can be interpreted from left to right to demonstrate which levers influence RMNCAH-N outcomes or from right to left to work backwards from priority outcomes to see the contribution of specific levers.

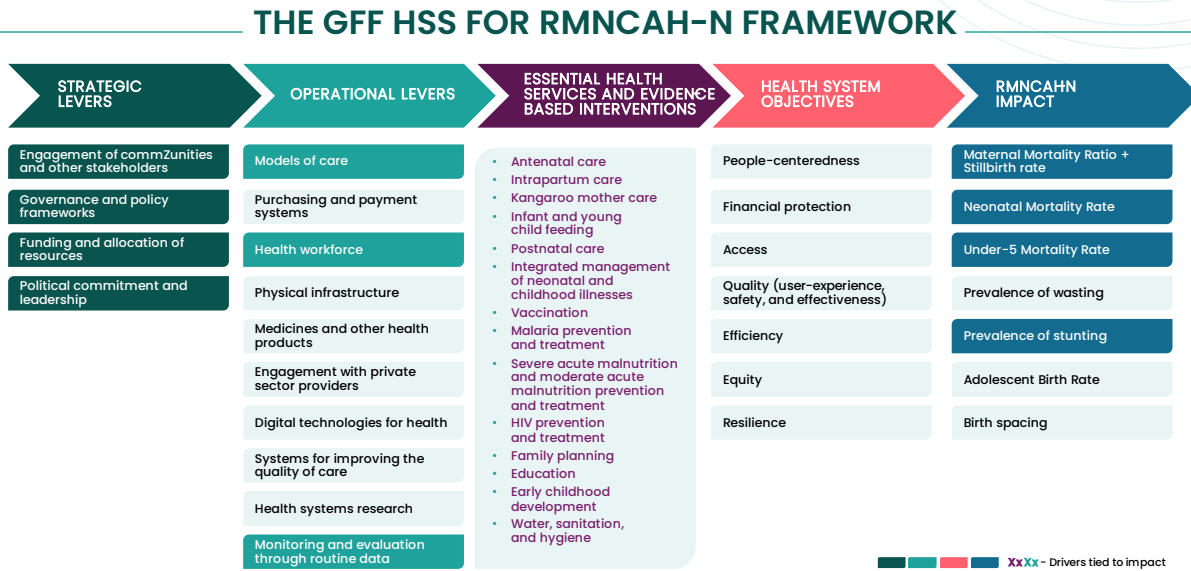
Two examples below demonstrate how the framework can be applied to understand how various strategic and operational levers help meet health systems objectives and improve RMNCAH-N outcomes. The examples draw upon mixed-methods studies conducted through Exemplars in Global Health (EGH) that identify countries that made exceptional, quantifiable historical progress in improving health outcomes and qualitatively describe the systems functions that drove success. The first example highlights how complementary strategic and operational levers have broad effects for a range of RMNCAH-N outcomes. The second example demonstrates how specific applications of operational and strategic levers contribute to adolescent fertility rates as a targeted health outcome.

Example 1: Investments with broad benefits across the RMNCAH-N continuum

EGH studies that correspond with four GFF RMNCAH-N impact indicators (maternal mortality, under-five mortality, neonatal mortality, and stunting reduction) in 10 countries were re-analyzed to identify patterns in health system strengthening investments among exemplar countries.¹ Seven health systems strengthening activities and one cross-cutting theme were identified as drivers of success across countries and outcomes. These drivers are highlighted on the framework, along with a corresponding text synthesis to demonstrate patterns of health systems strengthening approaches with cross-cutting benefits to RMNCAH-N (Figure 2). Table 1 provides additional details, including a description of drivers of success, health systems levers they are mapped to, and alignment with the GFF model and its value add to countries. Notably, all strategic levers are highlighted, demonstrating the importance of addressing foundational aspects of health systems strengthening in a holistic manner to enable effective service delivery. Furthermore, there is strong alignment between the drivers of success and the GFF model, especially across the strategic levers.

¹ Akseer N, Phillips DE; Exemplars in Global Health Partner Network. Drivers of success in global health outcomes: A content analysis of Exemplar studies. PLOS Glob Public Health. 2024 May 9;4(5):e0003000. doi: 10.1371/journal.pgph.0003000. PMID: 38722816; PMCID: PMC11081220.

Figure 2: Health systems strengthening investments with broad benefits



CROSS - CUTTING THEMES:
 Gender equity, cross-sectoral collaboration, macroeconomic factors, social determinants of health

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Table 1: Mapping investments with broad benefits to the GFF model

EGH driver of cross-cutting impact	Description	Location on the framework	Alignment with GFF model's value add
Effective stakeholder coordination	Map and involve diverse stakeholders, establish national coordinating bodies, collaboration between champions	Strategic levers – Engagement of communities and other stakeholders	GFF support for strengthening Country Platforms aims to facilitate inclusive stakeholder engagement and improve coordination and alignment
Adoption and implementation of national policies	Establishing a national commission to address key priorities, instituting plans and actions for multiple stakeholders, policies that target marginalized community	Strategy levers – Governance and policy framework	Investment case process is tied to national strategic plan, with prioritization of reforms and interventions based on the resource envelope available; use of World Bank instruments such as Development Policy Operations to advance legal and policy reform; institutionalize integration of innovations, such as the Safer Birth Bundle of Care
Effective and sustainable financing	Context-specific mechanisms utilize detailed financial planning, increase and sustain high national health expenditure	Strategic levers – Funding and allocation of resources	Resource Mapping of all available resources, Domestic Resource Mobilization advocacy, Investment Case planning, leveraging larger amounts of financing supported through the World Bank, collaborating with other development partners to maximize

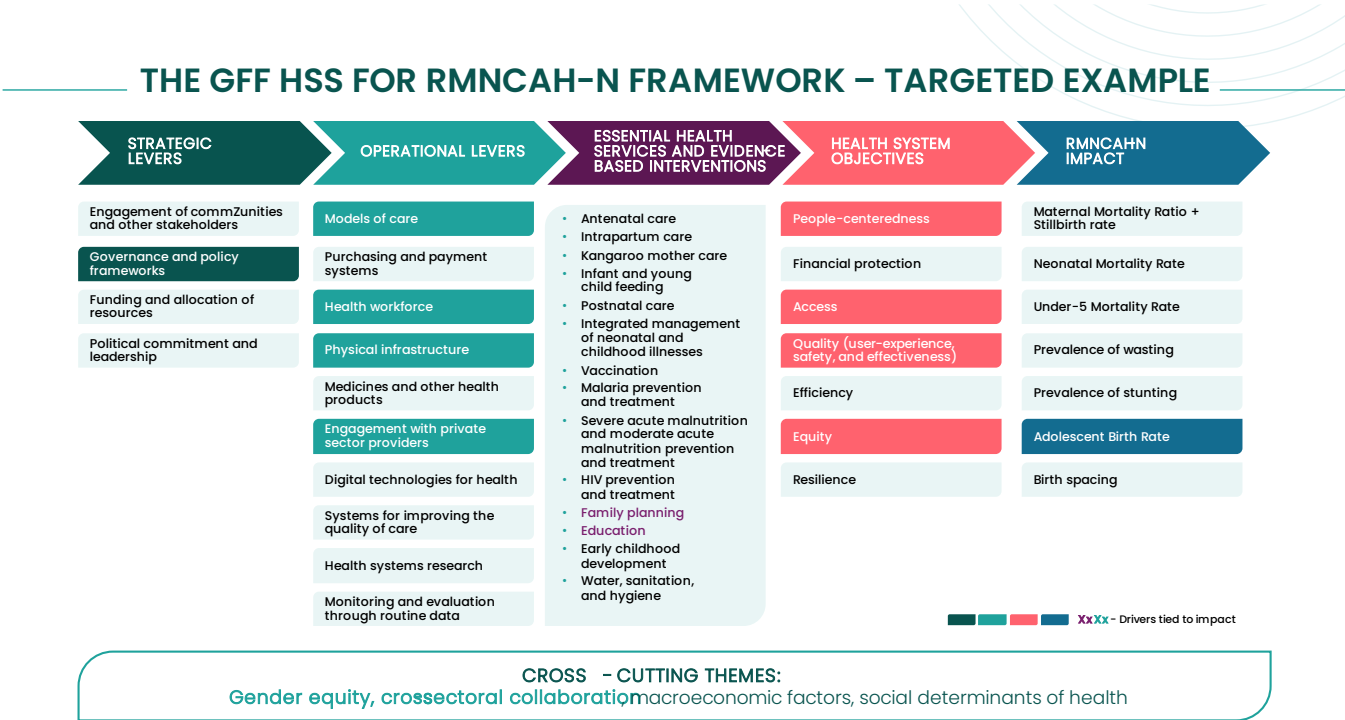
			use of all available resources to finance prioritized plans
Political commitment and health leadership	Mobilize political leaders, cross-ministry collaboration, high-level coordinating bodies	Strategic levers – Political commitment and leadership	Strengthening country leadership, including through support for Government Focal Point leadership, the Country Leadership Program and the Greater Leaders Program, which specifically focuses on female leaders
Equitable, efficient outreach and targeting	Multisectoral programs focused on most at-risk communities, prioritization of interventions based on need, innovation and service delivery adaptation	Operational levers – Funding and allocation of resources & Models of care	Supporting the identification of equity gaps, the prioritization of resources to address those gaps and aligning models of care to meet the needs of most at-risk communities. Leveraging multi-sectoral projects (e.g., Social Protection) to reach the unreached with essential health services.
Local, connected, skilled workforce	Community-based health care programs, deliberate overproduction of human resources for health	Operational levers – Health workforce	Supporting countries to assess and analyze gaps in their health workforce, and to prioritize, finance and implement reforms to strengthen the workforce; strong focus in many contexts on the workforce needed to deliver quality community-based primary health care
Data collection and use for decision making	Investment in quality national and subnational data systems, piloting and evaluating interventions before scaling, prioritizing populations/geographies, fostering a culture of data use	Operational levers – Monitoring and evaluation through routine data	Supporting local data systems and real-time use in policy through the FASTR program, expansion of data use for decision-making through GFF data portal and <i>Evidence for Action</i> initiatives; investing in strengthening country data sources, systems and capacities through WB/GFF co-financed projects and TA
Women’s empowerment and engagement	Girls education and corresponding investment in schools, incentive programs to keep girls in schools, national policies on women’s rights, social inclusion, and equality	Cross cutting theme – Gender equity	Integration of gender-sensitive approaches through MAGE; address legal and policy barriers through Development Policy Operations; engage with, and co-invest in, cross-sectoral projects to strengthen girl’s and women’s empowerment and engagement

Example 2: Investments with targeted benefits for a specific part of the RMNCAH-N continuum

While certain health systems strengthening investments have generalized benefits for improving health along the RMNCAH-N continuum, other investments operate through specific pathways that produce benefits for targeted parts of the RMNCAH-N continuum only. The practical implication is that improving RMNCAH-N outcomes requires investing in a mix of different levers that takes into account the various pathways required for improving different outcomes. To demonstrate this phenomenon, a hypothesized pathway for reducing adolescent birth rates is described along the framework (Figure 3). Additional details, emerging examples from countries that have reduced adolescent fertility rates, and linkages to the GFF model’s value add are provided in Table 2. While certain levers (e.g., governance and policy frameworks) are highlighted in both the pathways for broad benefits spanning

the RMNCAH-N continuum (Figure 2) and reducing adolescent birth rates (Figure 3), the specific action required from that lever is different. Namely, in Figure 2, this lever refers to adoption and implementation of national policies, whereas the same lever in Figure 3 refers to legal reforms necessary for providing access to modern family planning methods, safe abortion and other essential services related to adolescent births. Similarly, whereas strengthening public sector provision of essential services is important for improving RMNCAH-N outcomes in many contexts, adolescents may be more likely to seek services from the private sector, thus necessitating effective strategies for strengthening delivery of quality, safe, and client-responsive services through the private sector. Other levers (e.g., physical infrastructure) emerge as especially important for this outcome, in particular dedicating spaces to providing sexual and reproductive health services to adolescents, as was done in Malawi and Rwanda. Future work will further describe country-specific examples and the relative importance of different combinations of levers.

Figure 3: Health systems strengthening investments with targeted benefits for adolescent birth rate reduction



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Table 2: Mapping investments with targeted benefits for adolescent birth rates to the GFF model

Highlighted lever	Description	EGH country example	GFF model's value add
Governance and policy frameworks	Many countries do not currently have legal frameworks that ensure access to safe abortion and other essential services	Ghana and Nepal instituted legal reforms to make safe abortion more accessible with interventions focused on developing new guidelines, training providers, engaging communities, ensuring access to information as well as data systems to monitor and evaluate outcomes	Supporting legal and policy reforms through Development Policy Operations and other instruments; supporting data and analytics to identify gaps and track progress
Models of care	Attempts to specifically target adolescents may require adjustments to routine service delivery	A policy for developing youth-friendly health services was developed and implemented in Malawi, supported by cross-cutting systems investments	Supporting innovative delivery strategies to meet the specific needs of adolescents – eg, through strategic purchasing of services from the private sector, supporting school-based service delivery models, supporting innovation to meet the specific needs of out-of-school girls
Health workforce	To support adolescent-sensitive service delivery, health workers may either need to be recruited from youth communities and/or trained to deliver services	In Malawi, a cadre of trained youth agents offer contraceptives and other health services directly in communities.	Supporting TA to ensure that: 1) youth agents' curricula as well as standard operating procedures take a rights-based approach and maintain quality standards of counseling; 2) HMIS is adapted to record and report services by youth agents, and that the data are routinely reviewed for course correction and better programmatic targeting
Physical infrastructure	Ensuring anonymity and user satisfaction may require changes to physical spaces where services are delivered	Dedicated spaces were established within health facilities targeting adolescents with SRHR services, a notable feature in Rwanda and Malawi.	Supporting safe spaces within health facilities and schools; conducting analytics and implementation research on safe space strategies to improve understanding of how the utility of such strategies can be optimized, in a manner that is informed by adolescents' experiences, preferences and demand perspectives
Engagement with private sector providers	The role of the private sector in supplying and distributing contraceptives was essential in several Exemplar countries		Supporting governments to strengthen private sector engagement strategies, including strategic purchasing from private sector providers. Supporting innovative models of incentivizing the private sector to provide high quality services to adolescents, in context of a coherent government-led framework.

SECTION 4: Results Measurement and Knowledge & Learning

GFF Results Measurement Framework

The GFF has developed a Results Measurement Framework with support of the Results Advisory Group. Key content within the Results Measurement Framework that is relevant to the HSS for RMNCAH-N Framework includes:

- Description of GFF approach to measuring health systems strengthening
- Key Performance Indicators for GFF strategy, including those for the 6 health systems pillars highlighted in the HSS for RMNCAH-N Framework

- Indicator definitions and data sources used for measuring RMNCAH-N outcome and impact indicators
- Integration of gender and equity through Monitoring & Action for Gender & Equity (MAGE)
- Application of rapid cycle analytic and data use approaches through the FASTR initiative
- Implementation research & evaluation strategy
- Extensive availability of data, evidence and visuals through the GFF’s public data portal, including the PHC Collaborative Data Hub

Evidence for Action Initiative

The GFF’s new *Evidence for Action* initiative will document and disseminate evidence on the GFF’s investments and the pathways through which they contribute to improved RMNCAH-N outcomes. Using the HSS for RMNCAH-N Framework as a starting point, this initiative will generate country-specific insights, including case studies from diverse settings such as fragile states and middle-income countries, clarifying the GFF’s value-add to country-led health systems strengthening. By systematically capturing lessons learned and best practices, it will help ensure that GFF’s health systems investments are evidence-based and informed by real-world results. The *Evidence for Action* initiative will also facilitate:

- Strategic investment decisions by providing data-driven insights that refine and adapt the GFF’s support to countries.
- Continuous improvement processes within the GFF, using empirical evidence to inform decision-making and optimize its support modalities for maximum benefit to RMNCAH-N outcomes.
- Cross-country learning, enabling stakeholders to share insights and innovations that can be applied to similar contexts.

The *Evidence for Action* initiative will supply the actionable insights necessary to continually adapt and improve strategies articulated in the HSS for RMNCAH-N Framework. This iterative and adaptive approach aims to ensure that the GFF’s health systems investments are effective, informed by evidence and lessons learned, and responsive to the evolving needs of partner countries.

Partnering with others to contribute to “learning health systems approach”

The GFF recognizes that it is one of many actors supporting countries in strengthening health systems. The GFF embraces a learning health systems approach—a model that promotes continuous learning from data and experiences to drive health system improvements for RMNCAH-N, in collaboration and exchange with others.

A learning health system is characterized by:

- Continuous learning: Health interventions and policies will be constantly monitored, and data will be translated into actionable knowledge, enabling the system to improve over time.
- Stakeholder engagement: Diverse stakeholders—including policymakers, health practitioners, and community members—will be engaged to ensure a broad range of perspectives inform the learning process.
- Rapid cycles of improvement: By acting on real-time feedback and evidence, the GFF and its partners will make quick adaptations to health strategies and interventions, ensuring responsiveness to emerging challenges.

By embedding this learning health systems approach into its operations and working in partnership with others, the GFF will enhance its ability to:

- Optimize health interventions, ensuring they are tailored to specific country needs and contexts.
- Adapt to challenges quickly, using real-time evidence to inform decision-making and refine health strategies.
- Achieve better health outcomes for women, children, and adolescents, contributing to long-term progress toward Universal Health Coverage and sustainable health improvements.

Partnerships are central to this approach. The GFF will continue to work in close collaboration with country practitioners, ensuring that local expertise and leadership guide investments and actions. It will also engage technical and financial partners, including technical agencies represented on the Investors Group and other financiers including bilateral partners and Global Health Initiatives such as Gavi and the Global Fund, to exchange knowledge and foster joint learning across various settings. The GFF actively contributes to the WHO-led PHC measurement alignment process. The GFF aims to work with partners to align on a common set of PHC indicators that derive from the PHCMFI, and to strengthen alignment behind country-led approaches to measure and improve their PHC systems, which are critical for improved RMNCAH-N outcomes.

Within the World Bank Group, the GFF collaborates closely with different units, including Health, Nutrition, and Population (HNP), other sectors within Human Development (HD), regional departments, the Development Economics Research Group, and the Gender Innovation Lab. These internal partnerships are important for enabling different units in the Bank, including the GFF, to learn from each other, mutually leverage each others' strengths and better serve client countries.

The GFF envisions its close partnership with the Exemplars in Global Health initiative to continue as it further develops the HSS for RMNCAH-N Framework and then iteratively adapts it through the *Evidence for Action* initiative. Intentional feedback loops that connect the learning generated through the Exemplars in Global Health studies to application by the GFF as part of its country support model can generate critical insights regarding what works across diverse contexts and how. These insights can help address key knowledge gaps in the field and enable learning across countries and partners, in addition to informing how GFF support to country-led health systems strengthening can be optimized for improved RMNCAH-N outcomes.

SECTION 5: Next steps

As we move forward with the development of the HSS for RMNCAH-N Framework, the following steps will be undertaken, along with their corresponding timelines:

Phase 1: September to November 2024 IG meeting

- **Development of Initial Draft:** Finalize the initial high-level draft of the HSS for RMNCAH-N Framework based on the feedback received and consultations conducted.
- **Internal Consultations:** Engage relevant stakeholders within GFF to discuss the initial draft and gather insights.
- **Feedback from the IG:** Seek structured feedback from partners on the initial draft at the IG, while ensuring alignment with GFF's strategy and responsiveness to country needs.

Phase 2: Post IG meeting to April 2025

- **Further Develop Framework:** Refine the HSS for RMNCAH-N Framework based on feedback from IG, incorporating additional evidence and stakeholder insights.
- **Flesh Out Evidence:** Connect different types of health system investments to priority RMNCAH-N outcome measures, establishing a clearer and more evidence-based relationship between investments and outcomes.
- **Refine GFF Strategic Approach:** Enhance the GFF's strategic approach across each of the RMNCAH-N impact areas and health systems pillars as defined in the HSS for RMNCAH-N Framework to ensure coherence and effectiveness.
- **Additional Partner Consultations:** Conduct targeted consultations with partners to address specific technical areas and generate feedback to inform refinement.

Phase 3: May 2025 Onward

- **Iterative Application of Framework:** Begin the iterative application of the HSS for RMNCAH-N Framework to inform and strengthen GFF support.
- **Evidence-Based Strategy Development:** Utilize the framework as one important input to guide the development of the next GFF strategy, ensuring that it is data-driven and aligned with RMNCAH-N outcomes.
- **Embed Framework in New Strategy:** Fully integrate the HSS for RMNCAH-N Framework into the new GFF strategy, reinforcing its role as a guiding document for future investments and actions.
- **Bring Greater Specificity and Concreteness:** Through iterative application and a strengthening of the evidence base, bring progressively greater specificity and concreteness to the causal pathways in the framework.

Discussion Guide

- **Evidence Development:** What key data sources or evidence should be incorporated into the next iteration of the framework?
- **Partnership Engagement:** How can we best engage GFF partners and country stakeholders in the framework's development, and in the broader knowledge & learning agenda regarding how countries and partners invest in health systems?
- **Strategic Focus:** As we look ahead to the next strategy, how can we retain what is useful about the GFF's current approach to investing in health systems (e.g., strongly anchored in country leadership; ability to mix broad and targeted investments, depending on the country context), while recalibrating parts of the model to accelerate impact (e.g., by incentivizing investments in specific lagging areas, especially where there are breakthrough innovations available)?

Annex 1: Organizing frameworks

The HSS for RMNCAH-N framework builds on existing frameworks to ensure a common understanding of health systems strengthening activities. These include the GFF's Logic Model, the WHO's health systems building blocks framework, the World Bank "control knobs" framework, the High-Quality Health Systems in the SDG Era (HQSS) Framework, the WHO's Health System Performance Assessment Framework (HSPA) for UHC, and the PHCMFI. Following recommendations of the HSPA, to reconcile divergences in the understanding of health systems frameworks three conceptual areas are described:

- **The boundaries of the health system to be assessed:** This framework adopts the WHO definition, of all organizations, people, and actions whose primary intent is to promote, restore, or maintain health. The GFF considers the health system from a broad and holistic perspective, while investing in specific parts of the system which have the most direct connection to improved health for women, children and adolescents, per the GFF strategy.
- **Factors that influence health systems performance:** The HSS for RMNCAH-N framework adopts the strategic and operational levers for accelerating progress on PHC and health systems, as described in the PHCMFI. These levers expand on the WHO health systems building blocks (e.g., leadership and governance, financing, service delivery, human resources for health, medical supplies and equipment, and health information systems) and describe actionable areas for health systems strengthening, which is suitable for demonstrating pathways to achieving outcomes. This approach recognizes the importance of primary health care and the push towards donor/partner alignment under the Lusaka agenda.
- **Identifying health system objectives:** There is consensus around the fact that the final goals of health systems are to improve health in a way that is people-centered and ensures financial protection, while also striving for equity and efficiency. This framework fills a gap by recognizing there are likely differentiated and interrelated effects of health systems strengthening levers on health outcomes across the life course for women, children, and adolescents. To better describe this phenomenon, this framework recognizes the importance of consensus health systems goals (e.g., people-centeredness, financial protection, equity, and efficiency) while elevating the objective of "improved health" by describing pathways to improving key health outcomes (e.g., maternal, neonatal, and child mortality). From the perspective of the HSS for RMNCAH-N Framework, the strength of the health system ultimately comes down to whether it leads to improved health for women, children and adolescents.

The draft HSS for RMNCAH-N Framework represents a preliminary approach to demonstrating the combinations and sequences of health systems strengthening levers that have been historically employed by countries to achieve improvements in health outcomes. The framework is envisioned to provide learnings about the GFF's investments that advance an understanding about health systems. Over time, details about the specific levers and their interactions can support evidence-based improvements to the GFF model, especially through the GFF's new *Evidence to Action* initiative.

Framework Name	Authors	Publication Year	Objective	Contribution to HSS for RMNCAH-N Outcomes framework
GFF Logic Model ²	GFF	2020	Provides a basis for measuring progress by tracking stepwise progression from inputs to activities, outputs, outcomes, and impacts	Informs organization of the framework and alignment with GFF model
Health Systems Performance Assessment for UHC (HSPA) ³	WHO; European Observatory on Health Systems and Policies	2022	Harmonize and align existing health systems assessment approaches	Provides basis for health systems outcomes; provides useful review of existing frameworks
Primary Health Care Measurement Framework and Indicators (PHCMFI) ⁴	WHO; UNICEF	2022	i) support Member States to assess, track and monitor PHC performance improvement; ii) align PHC monitoring within existing health system, UHC, and SDG monitoring frameworks and guidance; and iii) enable global tracking of the progress of WHO Member States in strengthening PHC towards the achievement of UHC by 2030.	Provides basis for strategic and operational levers by updating the health systems building blocks
High-Quality Health Systems in the SDG Era (HQSS) Framework ⁵	Kruk et al (Lancet Global Health Commission)	2018	To provide a framework for defining, measuring, and improving the performance of high-quality health systems	Informs conceptualization of quality as a health systems outcome and specific health outcomes (e.g., maternal mortality and stillbirths)
Health Systems Building Blocks Framework ⁶	WHO	2007	Describe health systems functions in terms of structural inputs and links them with core indicators	Informs the PHCMFI levers
Control knobs framework ⁷	World Bank	2003	Describe factors that influence health systems goals	Informs approach to link health systems investments with goals

² https://www.globalfinancingfacility.org/sites/gff_new/files/documents/GFF-Strategy-2021-2025.pdf

³ [Health system performance assessment \(who.int\)](#)

⁴ [Primary health care measurement framework and indicators: monitoring health systems through a primary health care lens \(who.int\)](#)

⁵ [High-quality health systems in the Sustainable Development Goals era: time for a revolution - The Lancet Global Health](#)

⁶ [Everybody's business -- strengthening health systems to improve health outcomes \(who.int\)](#)

⁷ Roberts, Marc J.. "Getting Health Reform Right: A Guide to Improving Performance and Equity." (2003).

Annex 2: Definition of Strategic and Operational Levers, and how the GFF Uses them

Strategic Levers	Definition from Primary Health Care Measurement Framework and Indicators (PHCMFI)	How the GFF uses the lever to strengthen systems for RMNCAH-N
Political commitment and leadership	Political commitment and leadership that place PHC at the heart of efforts to achieve universal health coverage and recognize the broad contribution of PHC to the SDGs.	<ul style="list-style-type: none"> Reinforcing the central leadership role of key leaders within Ministries of Health and other government agencies where relevant, aligning behind their priorities and processes and working through national systems. Conducting leadership strengthening programs, linked to key priorities identified in Investment Cases. Advocacy initiatives to ensure RMNCAH-N outcomes are prioritized in national agendas. Engagement strategies that encourage political leaders to promote and support PHC strengthening and RMNCAH-N outcomes. Development of partnerships that leverage political influence for sustainable health policy reforms. Out of scope: engaging in advocacy in a manner that leads to fragmentation.
Governance and policy frameworks	Governance structures, policy frameworks and regulations in support of PHC that build partnerships within and across sectors and promote community leadership and mutual accountability.	<ul style="list-style-type: none"> Supporting policies and processes that foster cross-sectoral collaboration, community participation and mutual accountability. Support for strengthening governance, policy and regulatory frameworks that ensure alignment with PHC strengthening objectives, enhancing RMNCAH-N service delivery through effective governance. Strategies that facilitate cross-sectoral partnerships for comprehensive health system strengthening. Out of scope: engaging in support for governance and policy frameworks in a manner that gives rise to fragmentation or silos.
Funding and allocation of resources	Adequate financing for PHC that is mobilized and allocated to promote equity in access, to provide a platform and incentive environment to enable high-quality care and services, and to minimize financial hardship.	<ul style="list-style-type: none"> Sustainable funding mechanisms that support equitable resource allocation in health systems. Strategies that enhance the efficient mobilization and alignment of resources for RMNCAH-N outcomes, ensuring that financing is allocated and spent toward interventions that will have the great impact on women, children and adolescents health. Initiatives to create incentives that promote quality care and reduce financial burdens on communities. Out of scope: perpetuating dependence on external resources or distorting allocation of resources in a manner that is misaligned with what is likely to have the greatest impact on women, children and adolescents health.
Engagement of community and other stakeholders	Engagement of communities and other stakeholders from all sectors to define problems and solutions and prioritize actions through policy dialogue.	<ul style="list-style-type: none"> Strengthening the role of Country Platforms in bringing inclusive groups of stakeholders together to improve coordination and alignment. Approaches that foster collaboration among diverse stakeholders to collectively address health challenges.

		<ul style="list-style-type: none"> • Mechanisms for ensuring that community voices are heard and integrated into health policy decisions. • Initiatives that support local leadership and capacity-building to enhance community-driven health interventions. • Out of scope: reinforcing siloing across stakeholder groups, or displacing country leadership role in convening stakeholders.
Operational levers	Definition from Primary Health Care Measurement Framework and Indicators (PHCMFI)	How the GFF uses the lever to strengthen systems for RMNCAH-N
Models of care	Models of care that promote high-quality, people-centered primary care and essential public health functions as the core of integrated health services throughout the course of life.	<ul style="list-style-type: none"> • Provision of TA and analytics for assessment of current models and informing redesign. • Supporting institutionalization and scaling of integrated packages of innovations, such as the Safer Birth Bundle of Care • Implementation research to test different models and address implementation challenges. • Provision of TA and implementation support to lay the groundwork for scaling new models in an institutionalized manner. • Provision of Knowledge & learning support for exchange and learning across countries on how to redesign models of care. • Out of scope: supporting parallel delivery models or vertical programs.
Primary health care workforce	Adequate quantity, competency levels and distribution of a committed multidisciplinary primary health care workforce that includes facility-, outreach-, and community-based health workers supported through effective management supervision and appropriate compensation.	<ul style="list-style-type: none"> • Support for HRH assessments, analytics and information systems. • Development and application of HRH optimization tool, to improve prioritization and planning of HRH investments. • Strengthening HRH policy, governance and financing and data/information systems. • Supporting HRH development, training and management, with strong focus on community based primary health care. • Out of scope: using GFF resources for gap-filling input financing to maintain existing health workforce.
Physical infrastructure	Secure and accessible primary care facilities to provide effective services with reliable water, sanitation, waste disposal or recycling, telecommunications connectivity and a power supply, as well as transport systems that can connect patients to other care providers.	<ul style="list-style-type: none"> • Evaluating and optimizing health facility distribution and linkages, with consideration of standards of care at different levels, including those related to emergency obstetric care. • Guiding prioritization of infrastructure investments based on needs. • Adapting infrastructure to enable delivery of high quality care and responsiveness to client needs, including safe spaces for adolescents. • Out of Scope: Covering input costs for large-scale infrastructure projects.
Medicines and other health products	Availability and affordability of appropriate, safe, effective, high-quality medicines and other health products through	<ul style="list-style-type: none"> • Support for assessments, analytics and diagnostics on gaps and challenges in financing, procurement and management. • Support for financing reforms to strengthen consistent availability of quality products needed for improved RMNCAH-N outcomes.

	transparent processes to improve health.	<ul style="list-style-type: none"> • Catalyzing innovation and additional financing for medicines/supplies through Challenge Fund. • GFF Supply Chain Strategy in process will further refine strategic approach to medicines/supplies. • Out of scope: using GFF resources for large scale input financing for recurrent costs of purchasing commodities (emphasis on capacitating financing and procurement through national systems).
Engagement with private sector providers	Sound partnership between public and private sectors for the delivery of integrated health services.	<ul style="list-style-type: none"> • Support for assessments and analytics of mix of public and private sector service delivery. • Supporting governments to strengthen their strategies for engaging the private sector. • Facilitating dialogue and inclusive stakeholder engagement across the public and private sectors. • Supporting strategic purchasing of services from private sector providers, within a framework of government-led stewardship. • Supporting integration of private facilities within national data systems and quality assurance processes, with effective regulation. • Private sector strategy review will further refine strategic approach to private providers. • Out of scope: exacerbating divisions between public and private sectors, or financing the private sector outside of a coherent governance framework that guides how providers in different sectors contribute to prioritized RMNCAH-N health goals.
Purchasing and payment systems	Purchasing and payment systems that foster a reorientation in models of care for the delivery of integrated health services with primary care and public health at the core.	<ul style="list-style-type: none"> • Leveraging World Bank financial instruments, resources and expertise to advance purchasing and payment reforms. • Co-financing with IDA (or IBRD) to provide more traction for key reforms. • Major focus on strategic purchasing based on integrated packages of services, but if relevant can in some cases be targeted at specific services with identified quality and coverage gaps and misaligned incentives hindering performance. • Support for purchasing and payments systems is almost always linked with strengthening of public financial management systems. • Out of scope: contributing to fragmented financing systems, or supporting purchasing reforms with poor specification of package of services to be delivered.
Digital technologies for health	Use of digital technologies for health in ways that facilitate access to care and service delivery, improve effectiveness and efficiency, and promote accountability.	<ul style="list-style-type: none"> • Promoting integration of digital solutions for integrated health service delivery. • Investing in health information systems for better and more timely data collection, analysis and use. • Strengthening health workers capacity to effectively use digital technologies as an integrated part of their work (i.e., not for isolated interventions targeting a single disease or condition). • Supporting implementation research on how to institutionalize and scale digital and other innovations • Out of scope: investing in digital technologies that are likely to contribute to fragmentation or remain at small scale (no exacerbating profusion of pilots)

Systems for improving the quality of care	Systems at the local, subnational and national levels to continuously assess and improve the quality of integrated health services.	<ul style="list-style-type: none"> • Development of frameworks and measurement approaches for monitoring and evaluating service quality and efforts to improve quality. • Support for the implementation of quality standards and quality assurance protocols that integrate community feedback and evidence-based practices. • Incentivizing quality improvements at scale through WB financing instruments (e.g., Program-for-Results) • Out of scope: financing fragmented or isolated quality improvement efforts without national alignment.
Primary health care-oriented research	Research and knowledge management, including dissemination of lessons learned, as well as the use of knowledge to accelerate the scale up of successful strategies to strengthen PHC-oriented systems.	<ul style="list-style-type: none"> • Supporting implementation research and evaluations to assess the effectiveness of different primary health care models and interventions, and address implementation challenges, linked directly to Investment Cases and WB/GFF co-financed projects. • Supporting implementation research on adolescent health through ADLAB • Support for collaborative research initiatives that engage academic institutions, health organizations, and communities to explore innovative solutions for health system challenges. • Supporting the sharing of findings, facilitating knowledge exchange among stakeholders, and supporting use of evidence for decision-making. • Out of scope: funding research not directly linked to priorities defined in Investment Cases.
Monitoring and evaluation	Monitoring and evaluation through well-functioning health information systems that generate reliable data and support the use of information for improved decision-making and learning by local, national and global actors.	<ul style="list-style-type: none"> • Strengthening country data sources, systems and capacities. • Strengthening country-led Results Frameworks for Investment Cases and WB/GFF co-financed projects • Strengthening country capacity to update RMNCAH-N coverage and equity analyses annually based on all available data sources, in partnership with Countdown to 2030 • Facilitating data use for decision-making through Country Platforms and other relevant fora. • Strengthening integration of gender and equity through the MAGE partnership • Supporting rapid cycle analytics and data use through the FASTR initiative • Out of scope: investing in parallel or fragmented data activities, outside of national systems