



19th GFF Investors Group meeting

November 5, 2024





Welcome/Director's Report

AGENDA

19th GFF INVESTORS GROUP MEETING | November 5, 2024

Time	Agenda Item	Session Description	Action	Presenter
9:00am – 9:45am	Welcome, Opening, and Director's Report	<ul style="list-style-type: none">• Approval of IG18 Meeting Report.• Approval of IG19 Agenda.• GFF Director opening remarks.• Update on the Ministerial Network meeting.	For endorsement	IG Co-chairs, GFF Director, and Ministerial Network Chair
9:45am – 10:45am	Nigeria Spotlight	<ul style="list-style-type: none">• Presentation on the partnership with GFF, including progress, challenges, and way forward.	For discussion	Coordinating Minister, Dr. Muhammad Pate
10:45am – 11:00am	Break			
11:00am – 12:00pm	Stocktaking on GFF Strategy	<ul style="list-style-type: none">• Secretariat updates on key milestones, challenges and progress.• Stocktaking on strategy implementation.	For information	GFF Secretariat
12:00–1:00pm	Lunch			
1:00–2:00pm	Alignment Stocktaking	<ul style="list-style-type: none">• Update on alignment efforts, including progress under Lusaka agenda.	For discussion	GFF Secretariat

AGENDA (continued)

19th GFF INVESTORS GROUP MEETING | November 5, 2024

Time	Agenda Item	Session Description	Action	Presenter
2:00–3:00pm	GFF Approach to Strengthening Country Data Systems and Monitoring Performance of GFF Strategy	<ul style="list-style-type: none">• Overview of the GFF’s approach to strengthening country systems for data generation, quality and use.• Discussion on GFF’s approach to assess in-country GFF support.	For discussion	GFF Secretariat
3:00–3:15pm	Break			
3:15–4:45pm	Health Systems Strengthening for RMNCAH-N, with a focus on SRHR	<ul style="list-style-type: none">• Focus on Health Systems Strengthening framework to realize RMNCAH-N outcomes, with a focus on SRHR.	For discussion	GFF Secretariat
4:45–5:15pm	Meeting Closure	<ul style="list-style-type: none">• Summary key decision points and next steps.	For discussion	IG co-Chairs



Nigeria Spotlight



Break

Stocktaking on the GFF Strategy



GFF partner countries continue to increase coverage of interventions to millions of beneficiaries

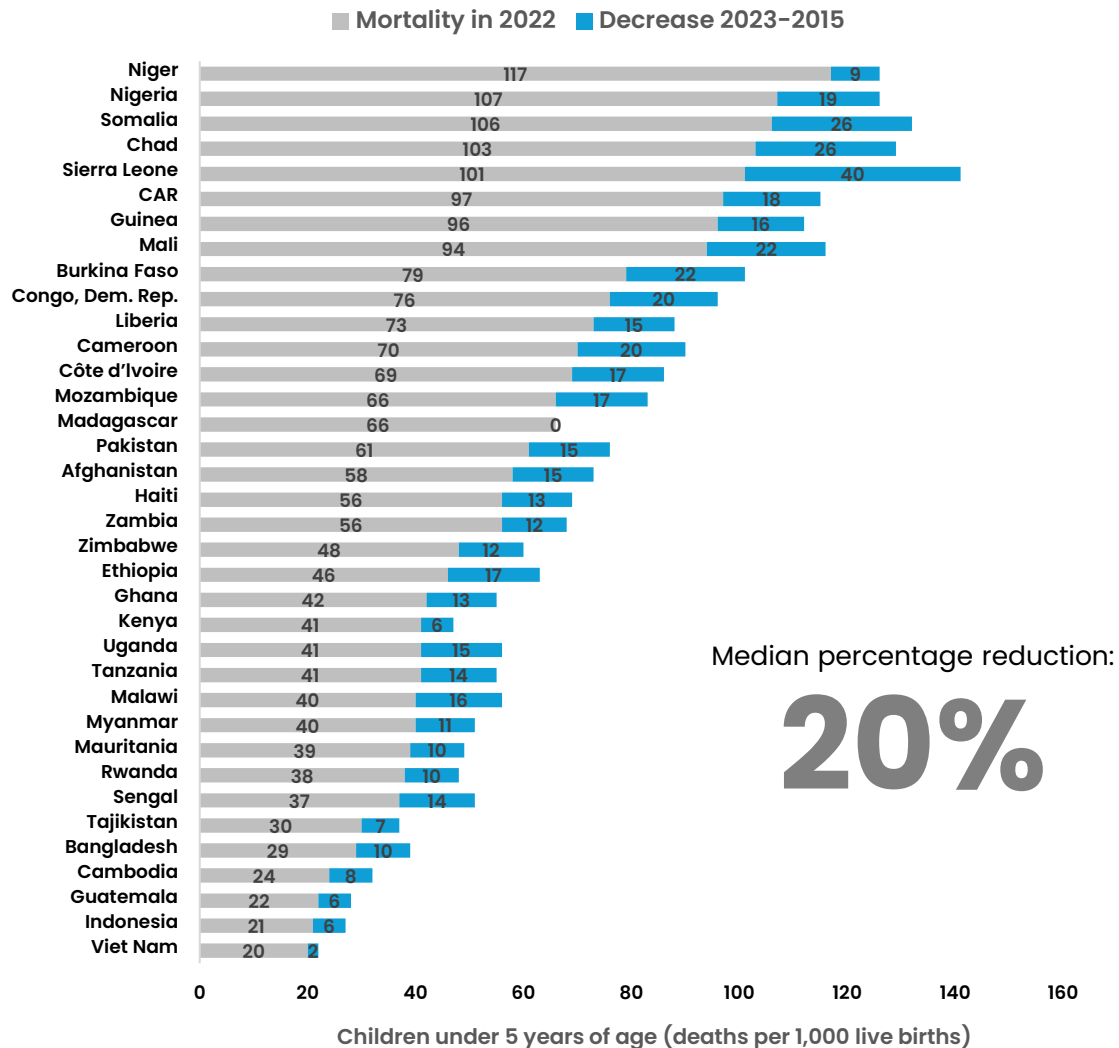
GFF partner countries have reached more than 30 million women with ANC4, safe delivery care and early initiation breastfeeding in the past year.

Partner countries have also reached 145 million women with demand for modern contraceptives in the past year, resulting in more than 50 million unintended pregnancies averted.

Indicator	Total Beneficiaries reached since baseline till 2022	Additional Beneficiaries reached in 2023
# of women receiving 4+ ANC visits	100M	32M
# of women receiving safe delivery care	130M	34M
#of women initiating early breastfeeding	135M	37M
#of unintended pregnancies averted as a result of contraceptive demand being met	285M*	54M*

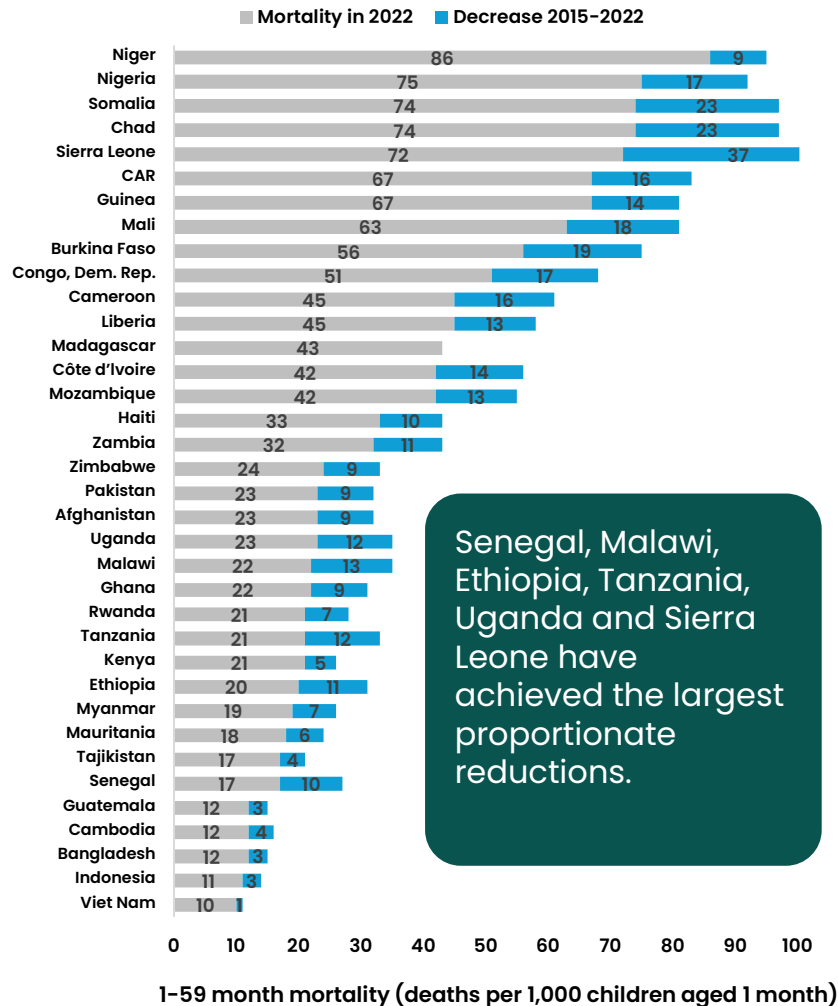
*The estimates of unintended pregnancies refer to the middle of the next calendar year (i.e., estimates through mid year 2023 shown in first column and mid year 2024 shown in the second column)

Under-five mortality has decreased, but levels are higher on average in fragile and conflict affected countries



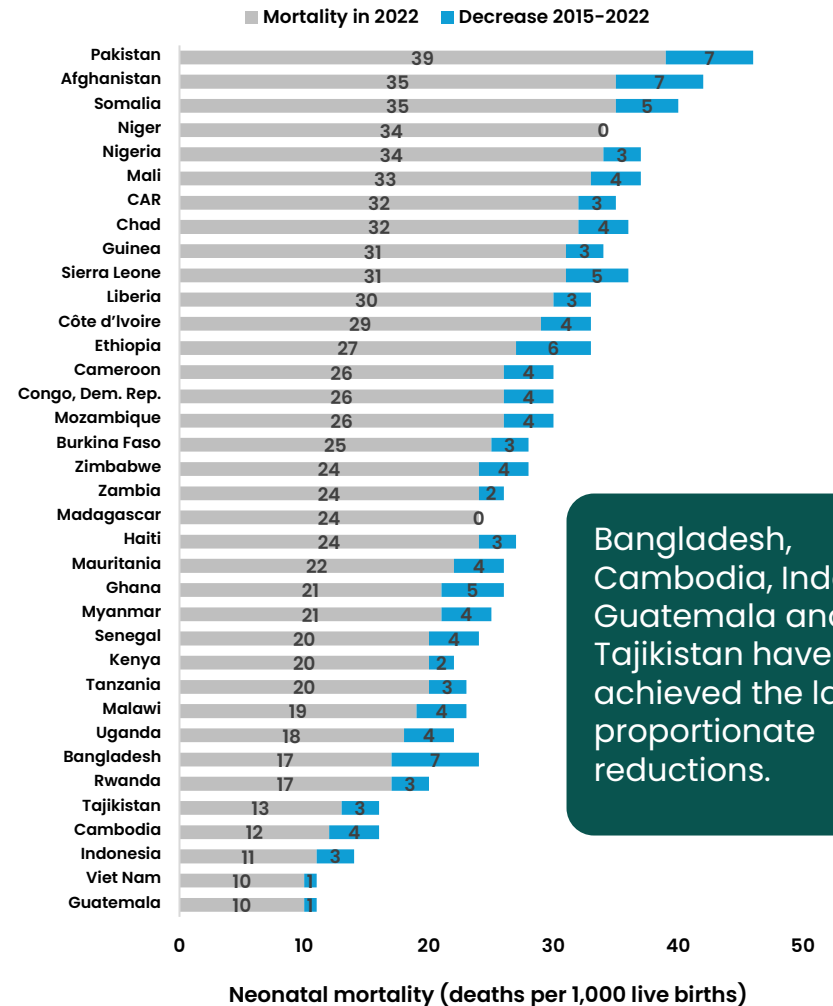
- All GFF supported countries except Madagascar achieved reductions in the U5MR between 2015 and 2022
- 4 countries have achieved the SDG 3.2.1 and 3.2.2 targets (Vietnam, Indonesia, Guatemala, Cambodia)
- Of the top 10 highest mortality countries, 8 (80%) are FCV countries
- The median U5MR for the GFF countries dropped from 67 deaths per 1,000 live births in 2015 to 56 in 2022.
- Malawi, Sierra Leone, Senegal, Uganda and Ethiopia have achieved the largest proportionate reductions

The under five mortality estimates mask major differences between mortality in the 1-59 month age group, which has decreased more rapidly, and mortality among newborns, which has decreased more slowly



Senegal, Malawi, Ethiopia, Tanzania, Uganda and Sierra Leone have achieved the largest proportionate reductions.

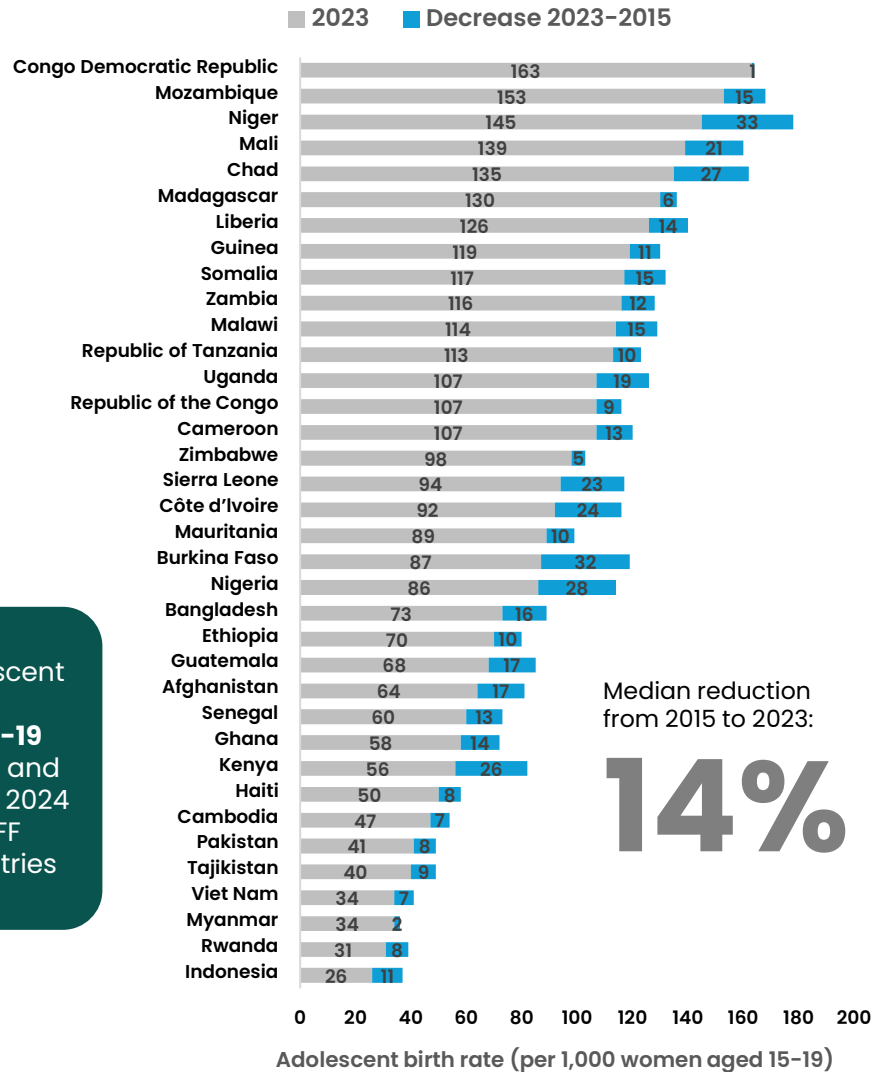
Median percentage reduction from 2015:
25% for 1-59 month old
13% for newborns



Bangladesh, Cambodia, Indonesia, Guatemala and Tajikistan have achieved the largest proportionate reductions.

Analyses from Countdown to 2030; data source: UNIGME estimates. Stillbirths are not included in the figure alongside neonatal deaths this year because there are no new stillbirth estimates since last year's IG meeting.

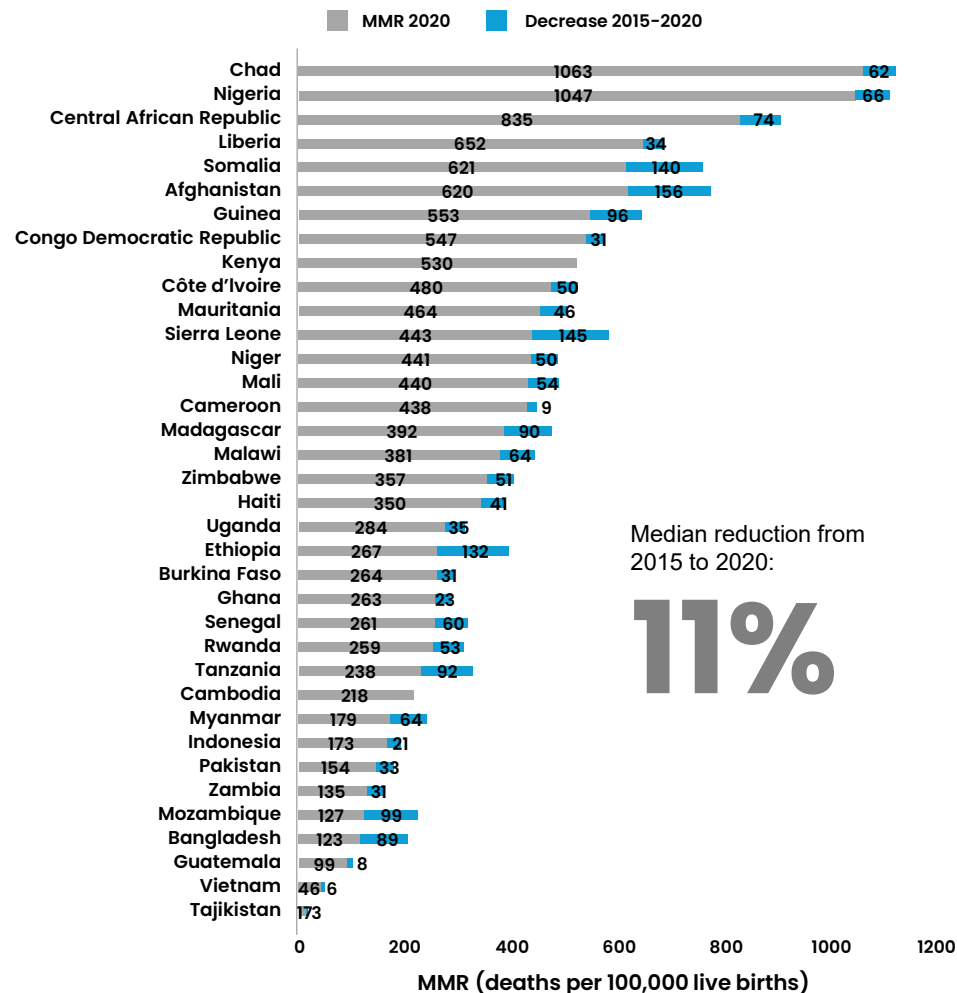
High adolescent birth rates across many GFF partner countries underscore the need to address gender barriers and youth rights



Trends in adolescent births per 1,000 women aged 15-19 by country, 2015 and 2023, UNDP WPP 2024 estimates, 36 GFF supported countries

- Adolescent birth rates (ABR) are associated with multiple negative consequences ranging from reduced life opportunities to poorer health and well-being outcomes for young women and their children.
- **All** GFF countries experienced decreases in their ABR, albeit with some reductions being very small.
- The median rate dropped from 115 births per 1,000 women aged 15-19 in 2015 to 90 in 2023, with a median percentage reduction from 2015 for all GFF countries of **14%**.
- Kenya, Indonesia, Burkina Faso, Nigeria, Afghanistan and Cote d'Ivoire have achieved the largest proportionate reductions.
- However, **15 (42%)** of all GFF countries had an ABR exceeding 100 per 1,000 women aged 15-19 in 2023.

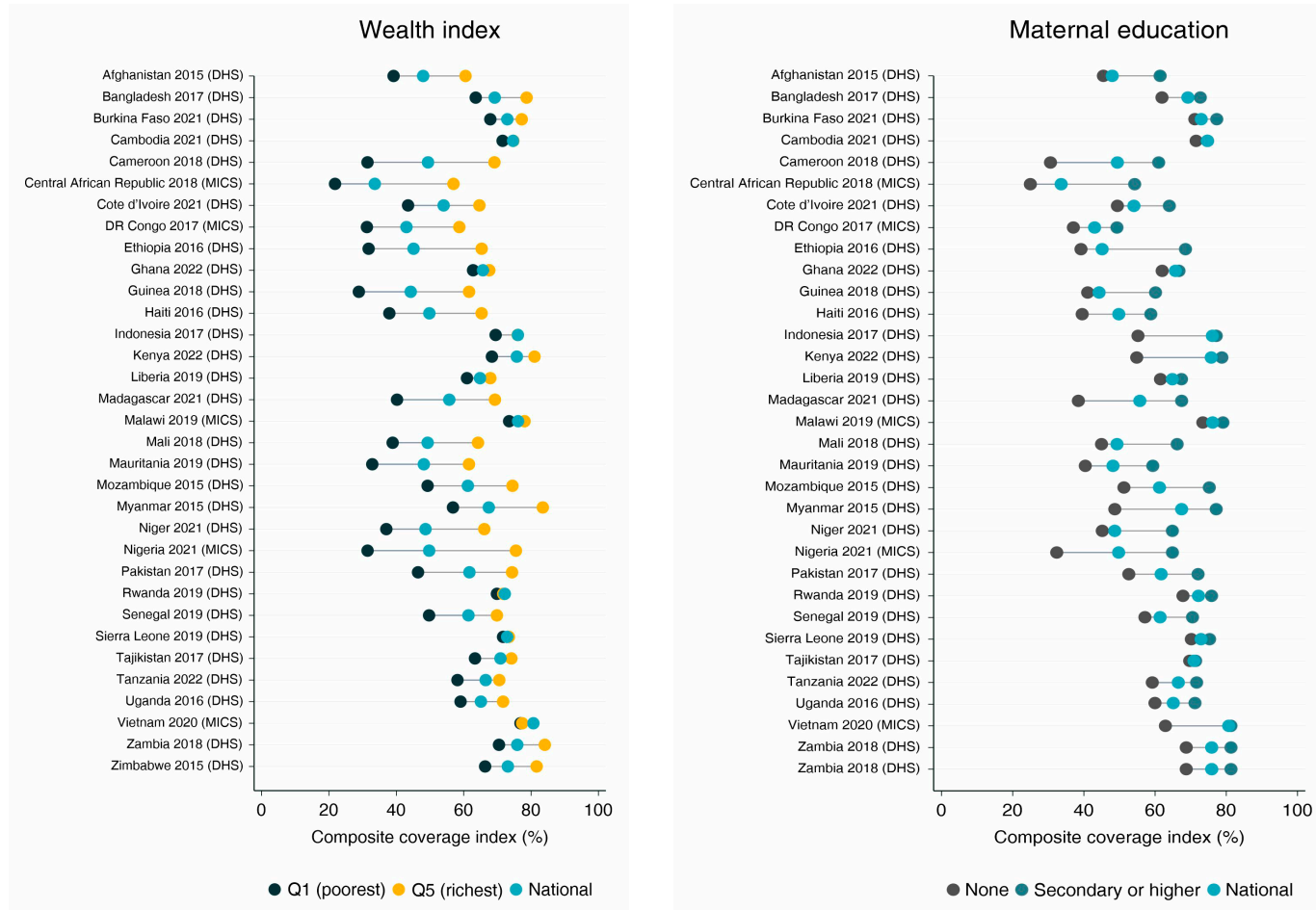
Maternal mortality has decreased in all GFF countries, but accelerated progress is needed



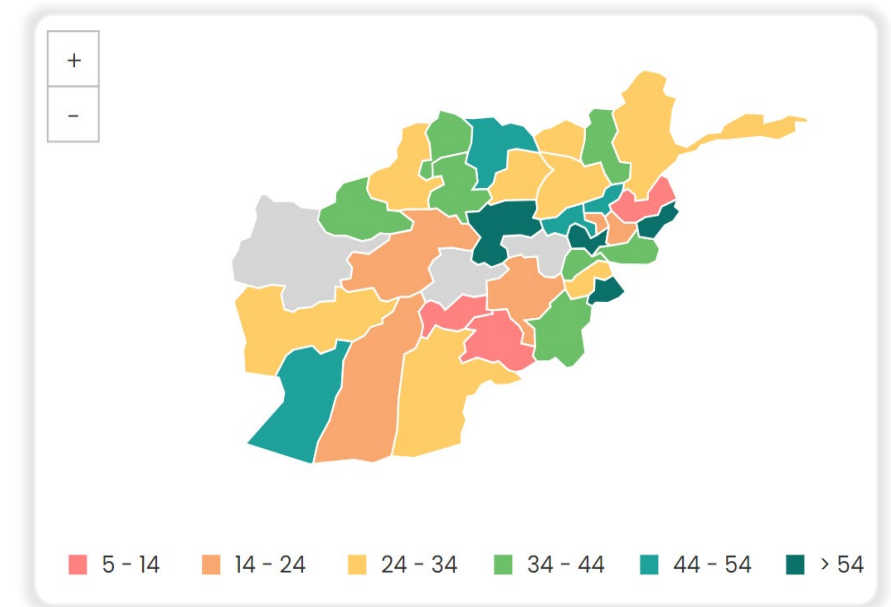
- **All** GFF partner countries experienced MMR reductions since 2015. NB: Kenya and Cambodia reduction is not reflected in these global estimates due to new data available since the 2020 estimates were published.
- Mozambique, Bangladesh, Ethiopia, Tanzania and Myanmar have achieved the largest proportionate reductions (noting the estimates precede the coup in Myanmar).
- **Only 6** countries have an MMR less than 140 per 100,000 live births, the Ending Preventable Maternal Mortality national target to be achieved by 2030.

Improvements in national averages mask large equity gaps, illustrated here based on disparities related to poverty, maternal education and subnational geography

Equity distribution of RMNCAH-N Co-Coverage Index, by wealth status and maternal education



Geographic equity distribution of post-partum care in Afghanistan



Proportion of women who have postpartum contact with a health provider within 2 days of delivery in Afghanistan, HMIS 2023

The CCI is the weighted average of the percentage coverage of eight interventions along four stages of the continuum of care: reproductive care; maternal care; childhood immunization; and management of childhood illness.

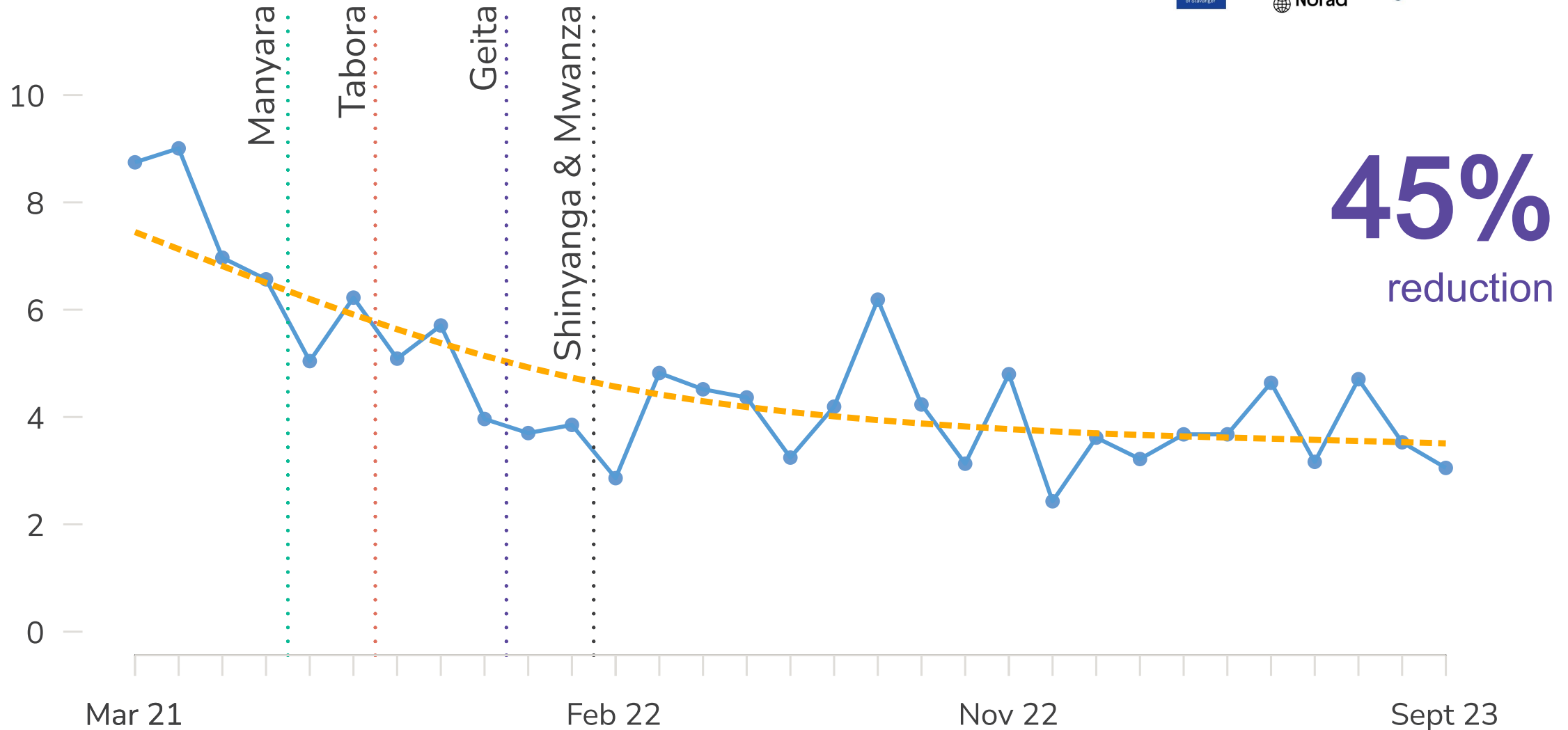
Note: unpublished preliminary data

Early newborn mortality

per 1000 live births



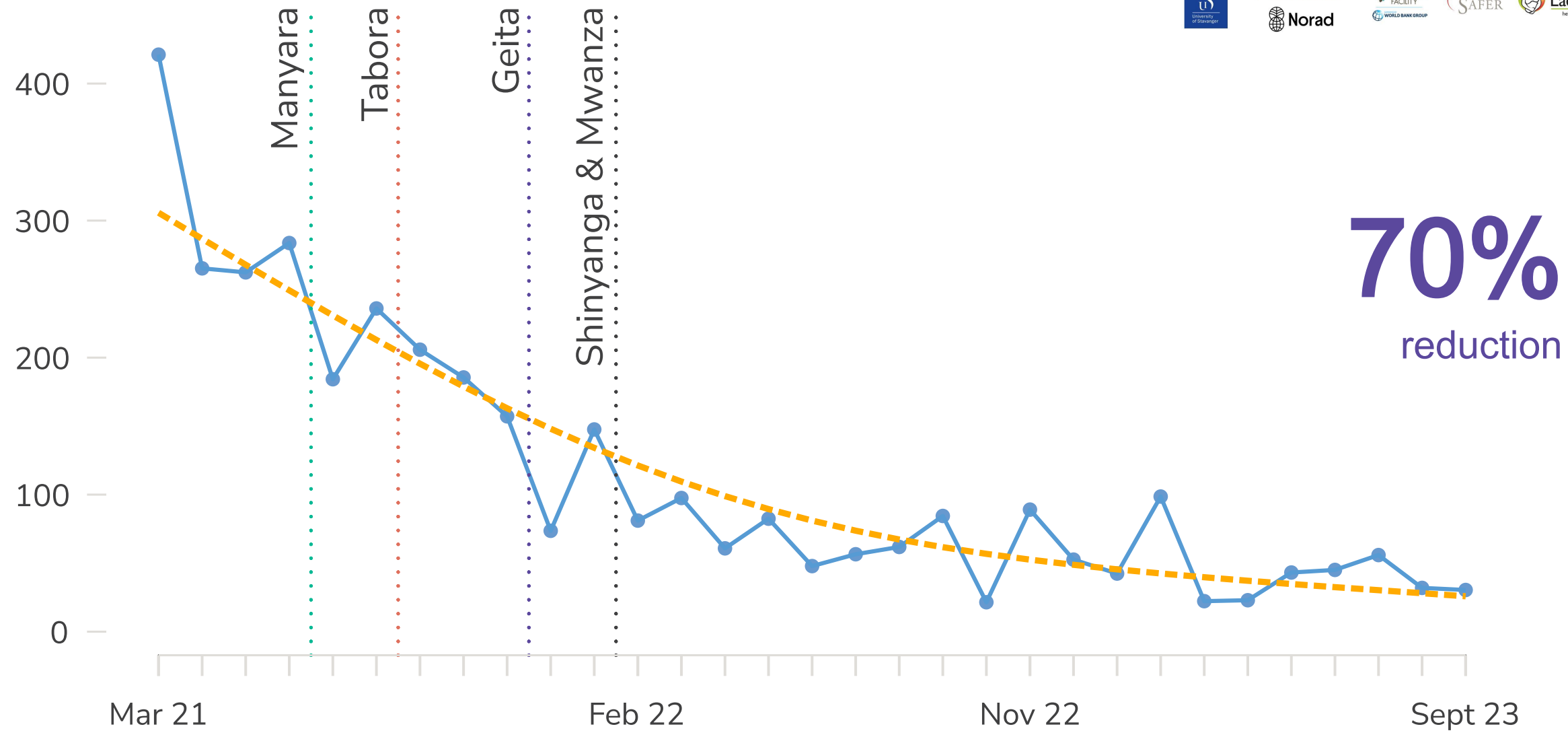
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Note: unpublished preliminary data

Maternal mortality

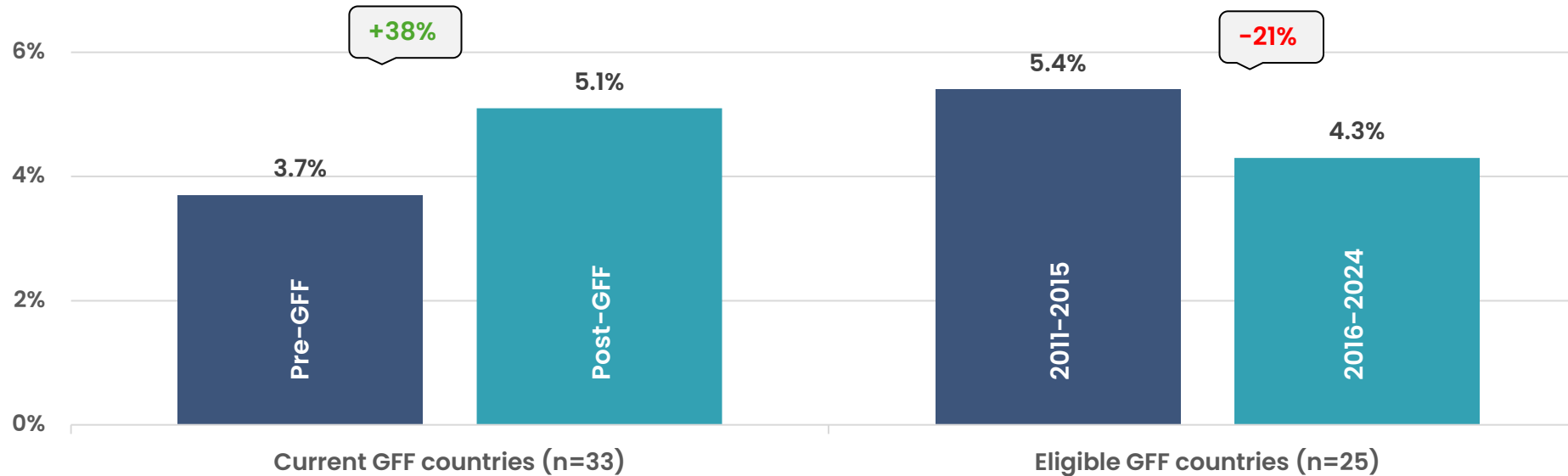
per 100,000 births



70%
reduction

GFF partner countries have allocated more IDA to RMNCAH-N than they did prior to engaging with GFF, while countries that are eligible but not yet supported have decreased RMNCAH-N IDA allocations over time

Figure: Median percent of IDA allocated to RMNCAH-N (FY2011-FY2024)



6 new country-specific projects co-financed with IDA were approved in the last year. 3 are coded as having 75% or more of the resource going to RMNCAH-N. The remaining 3 are not tagged with RMNCAH-N specific codes in the WB system, but have very significant RMNCAH-N content:

- **Kenya:** Objective is to improve utilization and quality of primary healthcare services and strengthen institutional capacity for service delivery.
- **Tajikistan:** Objectives are to improve the quality and efficiency of primary healthcare services and strengthen national capacity to respond to public health emergencies
- **Zambia:** Objective is to promote human capital development and productivity among poor and vulnerable girls and women, while strengthening social protection delivery systems.



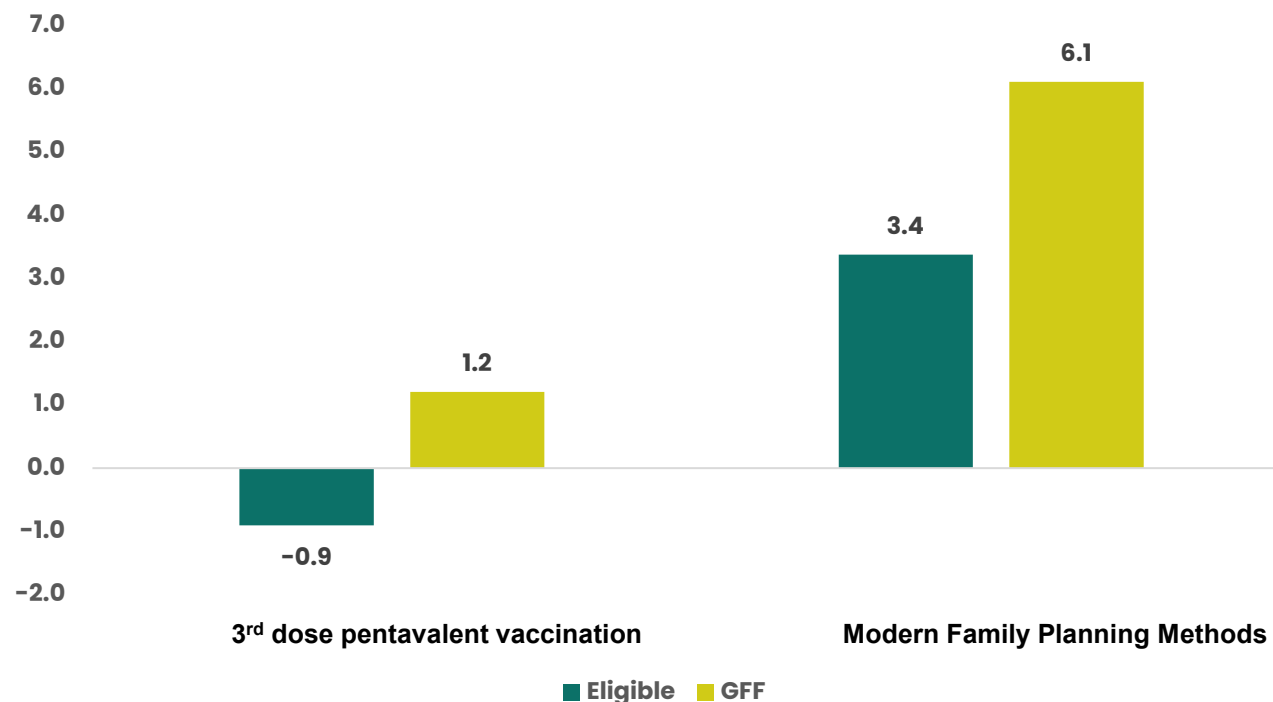
The first two have strong focus on essential RMNCAH-N services delivered through PHC systems. The GFF invests in the third to strengthen health and nutrition focus within a large cross-sectoral human capital project.

GFF partner countries continue to scale service delivery faster than countries that are GFF eligible but not yet supported

In 2023, compared to 2022:

- 71% of GFF partner countries have reached more children with routine pentavalent vaccination (median improvement 3.5 percentage points)
- 100% of GFF partner countries have reached more women with modern contraceptives (median improvement 5 percentage points)
- In comparison, a smaller percentage of countries that are GFF eligible but not yet supported have demonstrated improvements

Median average annual percent change in number of beneficiaries reached since GFF engagement began



Headwinds: Global trends with adverse impacts on women, children, and adolescents

Pushback on gender equality and SRHR

Climate change direct and indirect impacts

Economic threats

Changing global priorities in health

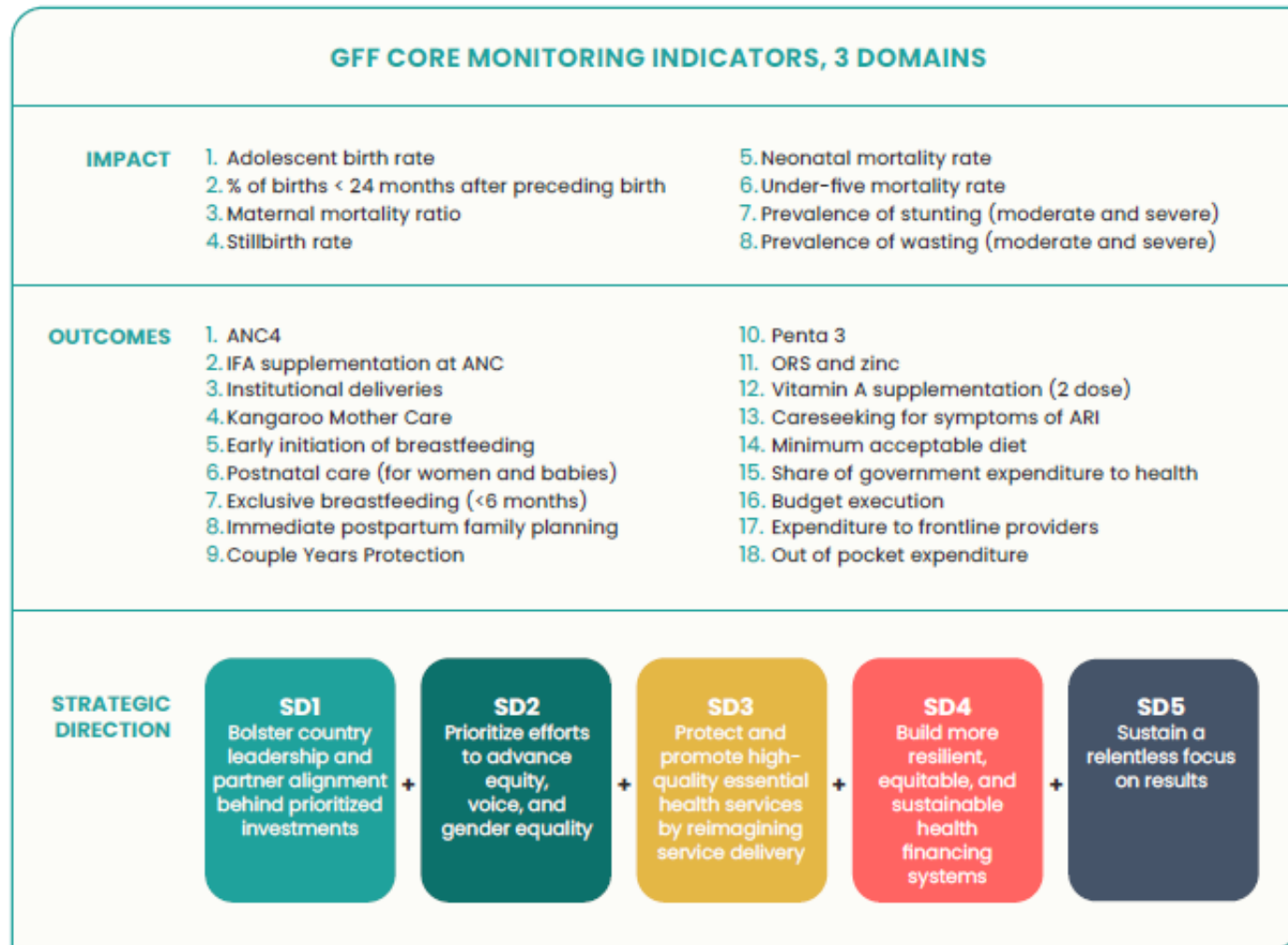
Conflict escalation



Strategy Update

based on Key Performance
Indicator Analysis

The GFF Results Measurement Framework includes three key domains, including Strategy Key Performance Indicators



These 3 domains provide a critical overview across the portfolio of countries, to:

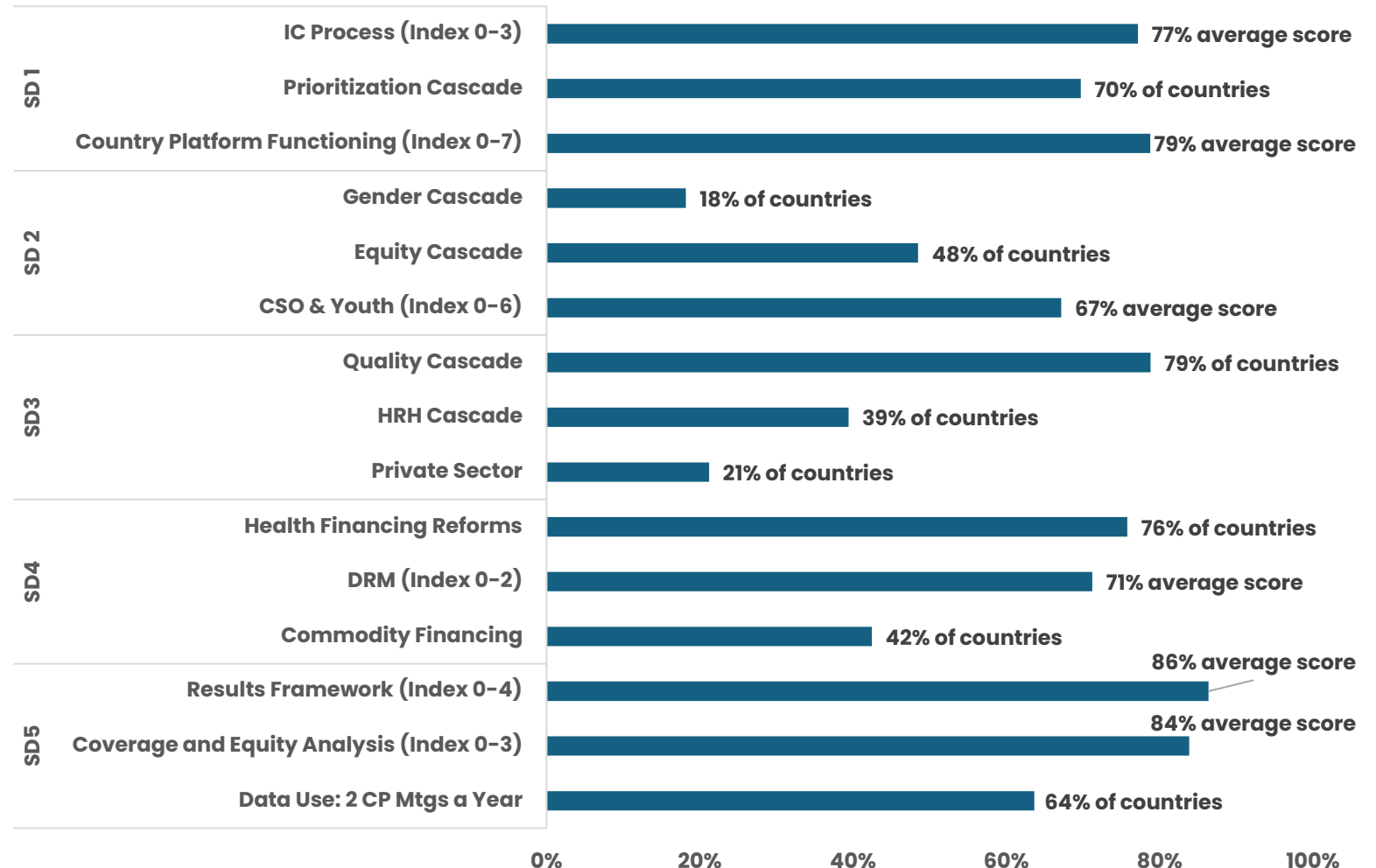
- Identify where progress is on track and where there are gaps
- Identify where GFF should provide more support to countries
- Promote cross-country learnings based on evidence

High level summary view of KPI Dashboard for fiscal year 2024

Fiscal Year 2024 (July 1 2023 to June 30 2024) marks the first full cycle of KPI tracking

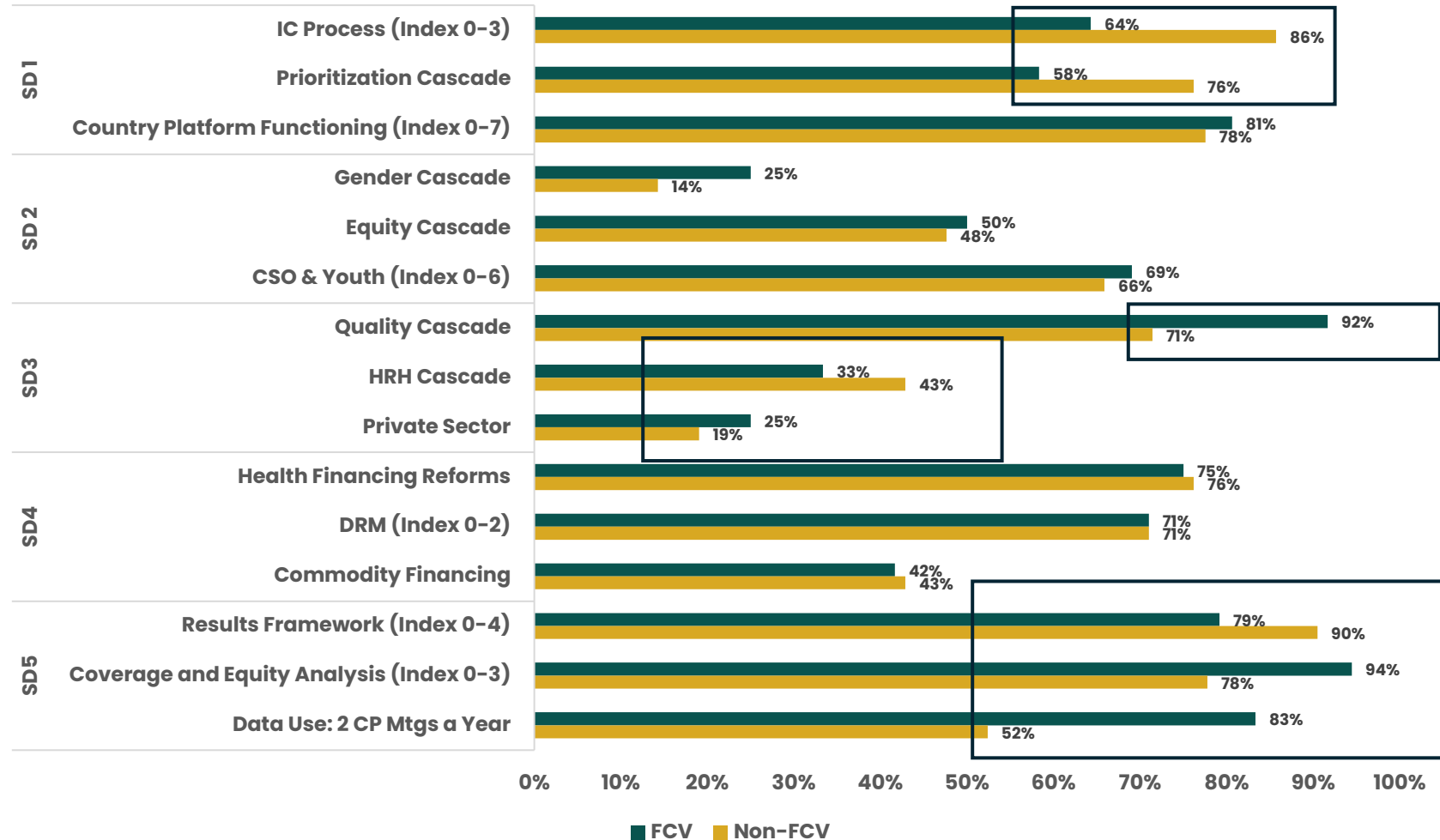
Shifts from previous reporting include:

- Streamline and simplify indicator definitions and criteria based on IG and TFC feedback
- Stronger focus specifically on GFF engagement and support
- Institutionalization of process, including through new internal online workspace and technical/programmatic leads to serve as 'owners'



NB: The denominator for IC Process, Country Platform Functionality, and CSO & Youth is 35 countries. For the remaining KPIs, the denominator is 33 countries. Myanmar is excluded from the analysis due to no active GFF engagement in the time period covered by this analysis (Fiscal Year 2024)

Differences between Fragile, Conflict and Violence Countries and non FCV countries emerge for some indicators



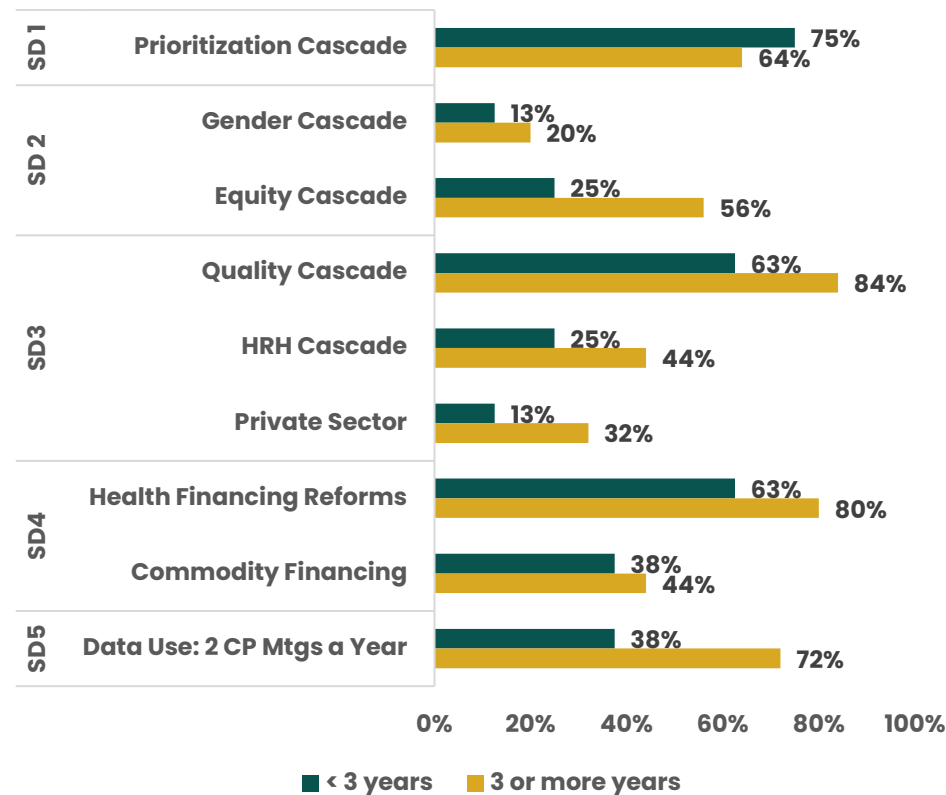
Key challenges and opportunities in FCV countries are explored further in the IG FCV paper

Countries that have implemented for three or more years tend to show higher scores than countries implementing for shorter periods of time

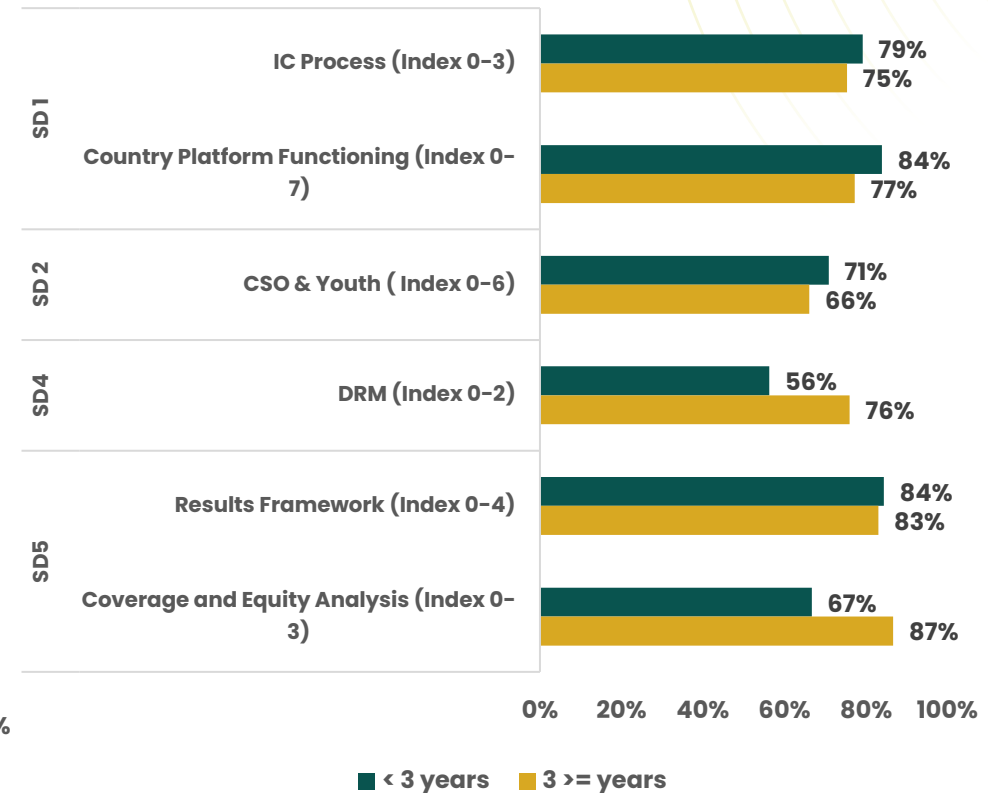
For reforms requiring sustained commitment over a multi-year period, longer duration of implementation is strongly associated with higher scores.

However, the prioritization cascade scores are not associated with longer implementation. Countries implementing for a short period of time are closer to the upfront work of developing their ICs, when prioritization activities are especially intensive.

Cascades: Percent of countries meeting the KPI Benchmark in 2024 by years of Implementation



Indices: Average percent score across GFF countries by Years of Implementation



Discussion

Based on this stocktaking, what do you see as key implications for:
1/the implementation of the remaining strategy period
2/the forthcoming strategy development



Lunch

Alignment Stocktaking



Current momentum for alignment agenda emerges from past efforts and builds on lessons learned

Aligning funds and technical assistance from donors, private sector, civil society, and other external entities with a government's priorities and systems enables countries to take the lead and makes health spending and program implementation more efficient and effective. Some mechanisms and efforts include:

- **Sector-wide approaches (SWAp) in health** – improve alignment and encourage donor pooling
- **Budget support for health** – unearmarked contributions to a government's budget to support policy reforms
- **Global development effectiveness initiatives**





From the start, working with partners, the intention of the GFF model was to support stronger alignment efforts at country level

With the goal of improving the health and well-being of women, children, and adolescents, certain enablers were identified as key triggers for this process

The term **alignment** refers to stakeholders and partners better aligning behind country-level priorities and plans. This also includes alignment with government processes and systems.

GFF-supported enablers for alignment have evolved based on experiences and feedback

Shifted investment case support to encourage a **“living IC”**

Increased focus on support for **Government Focal Points and Multi-stakeholder Country Platform**

Introduced **GFF Country Liaison Officer role in 2019** to support GFF country model operationalization

Confirmed commitment to integration of youth and civil society: **in IC processes and country platforms**

Scaled-up **resource mapping and expenditure tracking (RMET)** support across GFF countries and paired with broader public financial management support

Focused on leveraging IDA/IBRD to ensure government plans reach scale and are financed “on-budget”

In 2021, the GFF partnership launched the Alignment Working Group (AWG)

The AWG aimed to **maximize the effectiveness of health spending to improve RMNCAH-N outcomes by:**

- 1) Developing and delivering guidance and policy recommendations that help optimize existing country-led processes to enhance and track alignment; and
- 2) Operationalize short and medium-term activities to assist partner countries to advance their alignment efforts

Alignment Definition

The process of planning and implementing policies, strategies, and priorities with all stakeholders at global and country levels following the basic principle of **one plan, one budget and one report**.

Tools

Alignment Framework
diagnostic and maturity model

Pilot Countries

Burkina Faso
Central African Republic
Ethiopia
Rwanda

Sample Results

Ethiopia:
Harmonized plan of action, revitalization of the country platform as, adoption of a Harmonization Manual

Learnings And Opportunities

- Simplify and package tools
- Synthesize country experiences
- Partner with other agencies to implement
- Support application of tools to operationalization Lusaka Agenda

Platforms like the GFF Ministerial Network can help advocate for increased leadership among country governments to steward this work.

Broader constraints across operational and political dimensions for consideration

1

Country systems and capacity

Programmatic and fiduciary processes for alignment, and weak public financial management systems to manage donor financing “on-budget”

2

Global ecosystem

Strong country leadership and the right incentive structure are essential to promote and champion country alignment

Strong country leadership, an enabling environment and adequate resources must also be in place to support countries to steward the alignment agenda

Emerging areas for GFF value add on alignment

- Direct support in countries:
 - Lusaka Agenda and “Lead Collaboration Countries”
 - Enhance CSO and community engagement
 - Channel resources through government systems for RMNCAH-N
 - Prioritization and alignment within programs for RMNCAH-N
 - Support government to steward alignment processes
- Contribute to ongoing research, learning, and knowledge sharing on country-led alignment experiences, tools, and frameworks for systems change (including the GFF-supported Alignment Framework)
- Global: How can the IG better support this agenda? (*opportunity to discuss further*)

Discussion

1

Do you agree with the emerging areas of GFF's value add for alignment agenda, with respect to its model and mandate (focus on RMNCAH-N)?

2

Do you have recommendations for optimizing the GFF's contribution to alignment as part of the upcoming strategy?

3

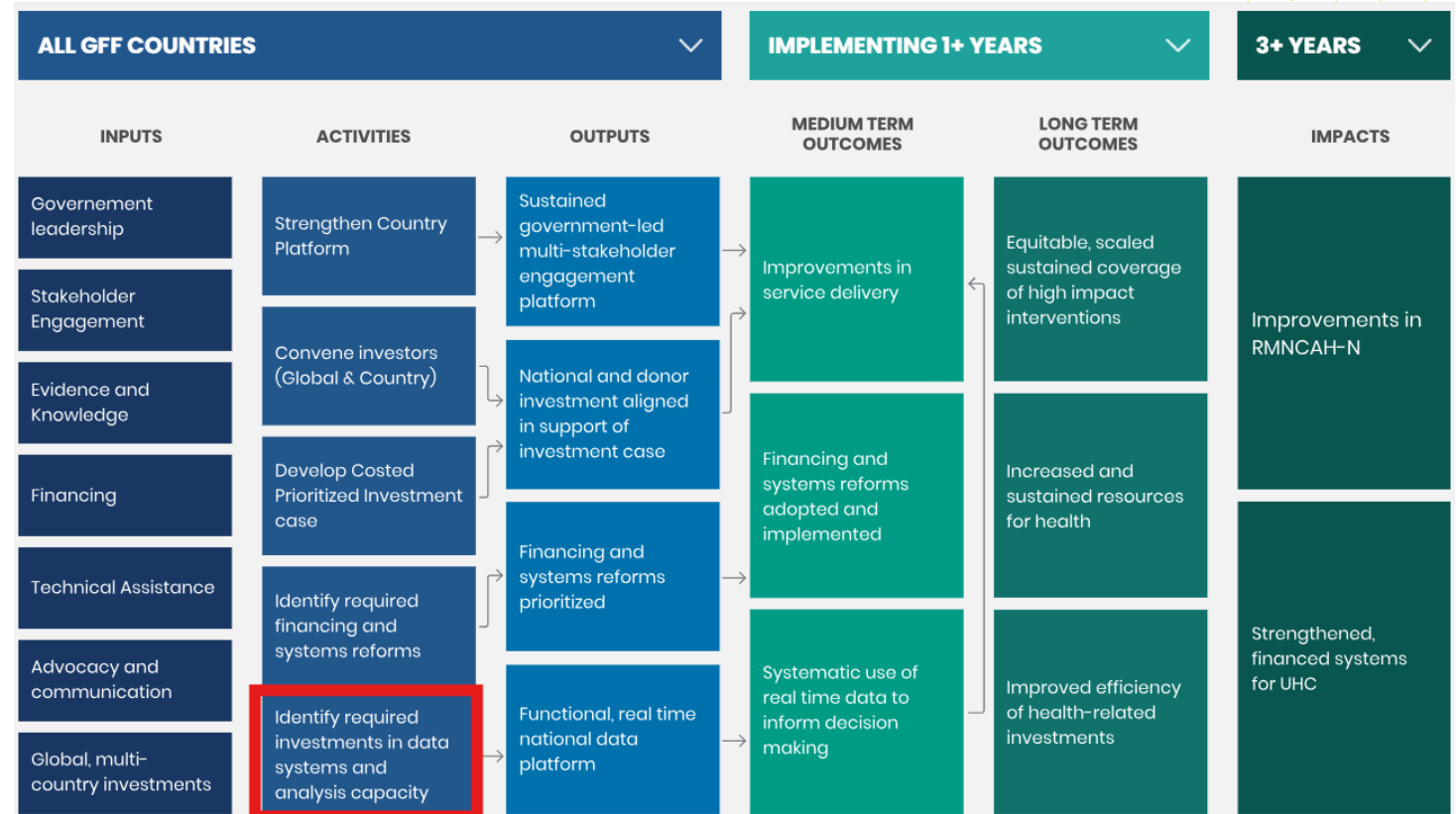
What collective efforts are currently missing that should be considered to advance the alignment agenda?

GFF Approach to Strengthening Country Data Systems and Monitoring Performance of GFF Strategy

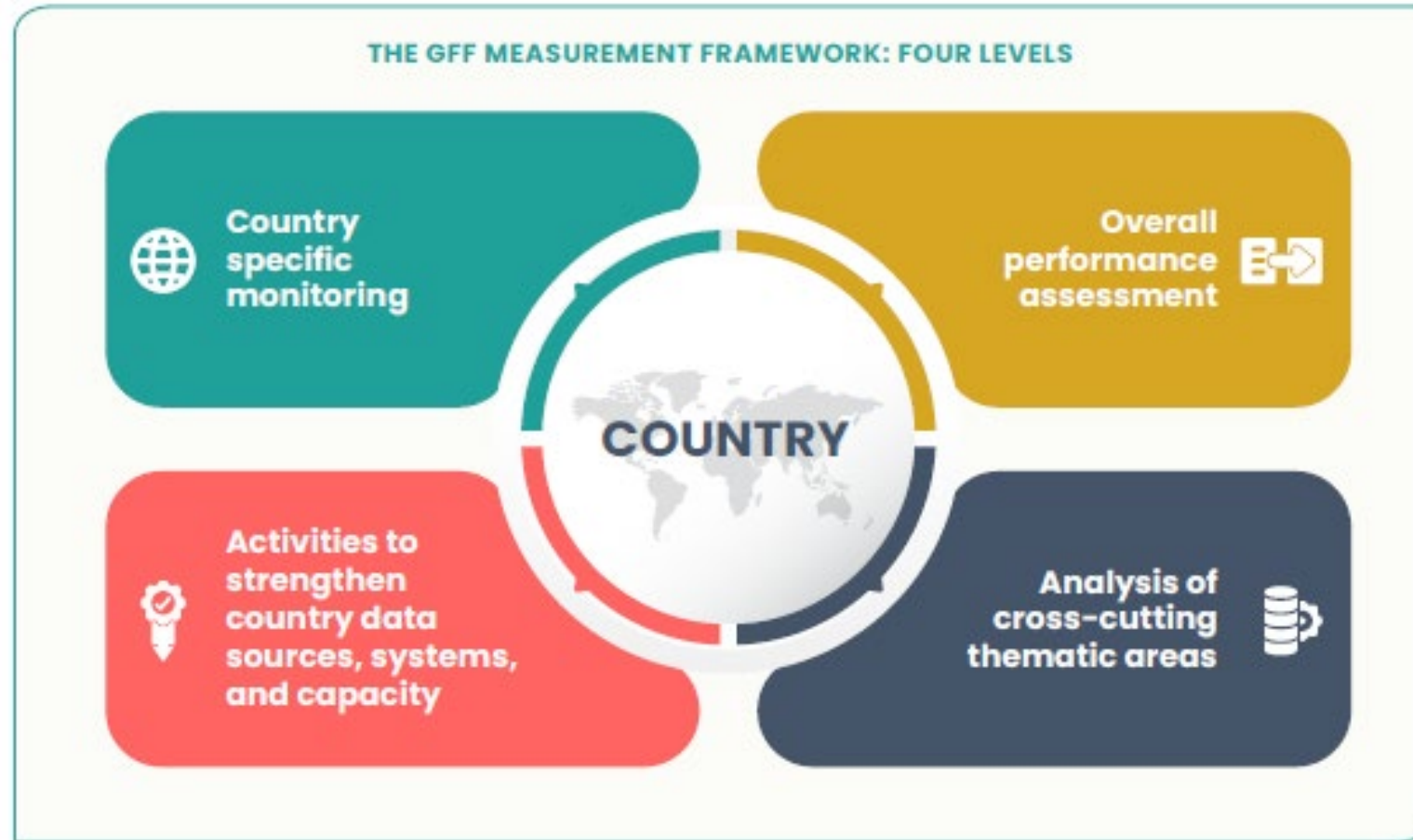


The GFF Logic Model Provides a Basis for Tracking Progress through Pathways of Change, from Inputs to Impact

- Adopts contribution perspective: impact is led by and belongs to countries
- Aims to clarify and refine how the GFF contributes to country results through pathways that vary by country context
- Includes explicit focus on helping strengthen country data systems and analysis capacity



GFF measurement framework: strengthens country capacity to collect, analyze and use data



1. Overall Performance Assessment

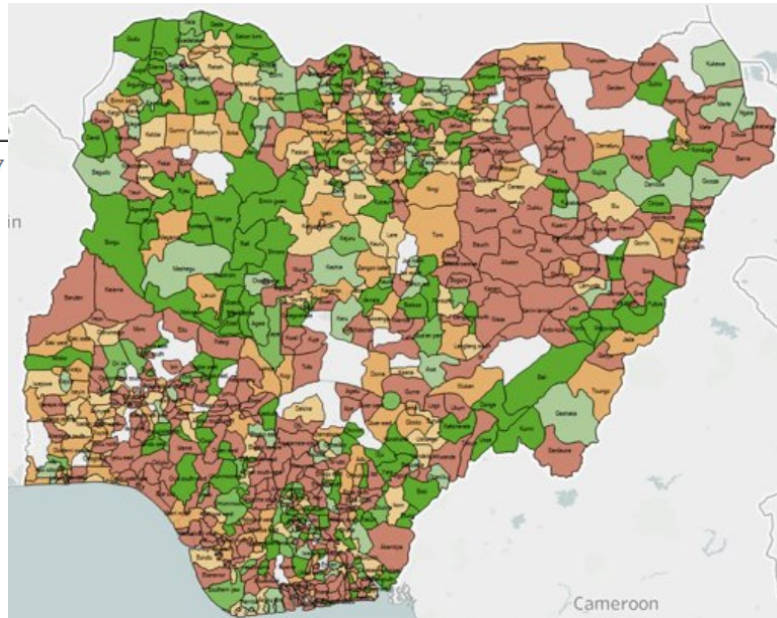
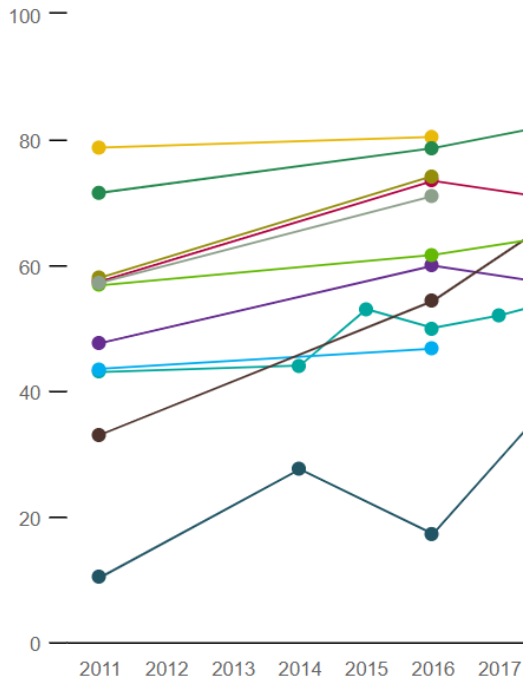
GFF CORE MONITORING INDICATORS, 3 DOMAINS	
IMPACT	<ol style="list-style-type: none"> 1. Adolescent birth rate 2. % of births < 24 months after preceding birth 3. Maternal mortality ratio 4. Stillbirth rate 5. Neonatal mortality rate 6. Under-five mortality rate 7. Prevalence of stunting (moderate and severe) 8. Prevalence of wasting (moderate and severe)
OUTCOMES	<ol style="list-style-type: none"> 1. ANC4 2. IFA supplementation at ANC 3. Institutional deliveries 4. Kangaroo Mother Care 5. Early initiation of breastfeeding 6. Postnatal care (for women and babies) 7. Exclusive breastfeeding (<6 months) 8. Immediate postpartum family planning 9. Couple Years Protection 10. Penta 3 11. ORS and zinc 12. Vitamin A supplementation (2 dose) 13. Careseeking for symptoms of ARI 14. Minimum acceptable diet 15. Share of government expenditure to health 16. Budget execution 17. Expenditure to frontline providers 18. Out of pocket expenditure
STRATEGIC DIRECTION	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="background-color: #008080; color: white; padding: 10px; border-radius: 10px; text-align: center;"> SD1 Bolster country leadership and partner alignment behind prioritized investments </div> <div style="font-size: 20px;">+</div> <div style="background-color: #006464; color: white; padding: 10px; border-radius: 10px; text-align: center;"> SD2 Prioritize efforts to advance equity, voice, and gender equality </div> <div style="font-size: 20px;">+</div> <div style="background-color: #FFD700; color: black; padding: 10px; border-radius: 10px; text-align: center;"> SD3 Protect and promote high-quality essential health services by reimagining service delivery </div> <div style="font-size: 20px;">+</div> <div style="background-color: #FF4500; color: white; padding: 10px; border-radius: 10px; text-align: center;"> SD4 Build more resilient, equitable, and sustainable health financing systems </div> <div style="font-size: 20px;">+</div> <div style="background-color: #4682B4; color: white; padding: 10px; border-radius: 10px; text-align: center;"> SD5 Sustain a relentless focus on results </div> </div>

Three main mechanisms of reporting:

- Countdown to 2030 annual report
- GFF Annual Report and data portal
- Strategy stocktaking

2. Country Specific Monitoring

POPULATION-BASED SURVEY COVERAGE INDICATORS



- Results Frameworks based on country-specific Investment Cases & co-financed projects, tailored to each country
- Data come from country data sources plus standardized surveys
- Data transparently shown annually on publicly accessible data portal.

3. Analysis of Cross-Cutting Themes that are Core to GFF Strategy and Relevant to all Partner Countries

Key Themes

In order to jointly examine progress and identify potential challenges across these themes, you can expect to find summary findings and detailed sub-national analysis across the GFF partner countries related to Civil Registration and Vital Statistics...

[More](#)

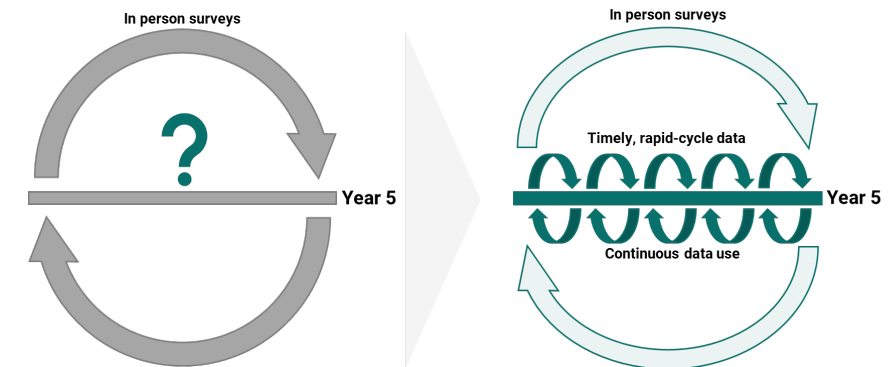
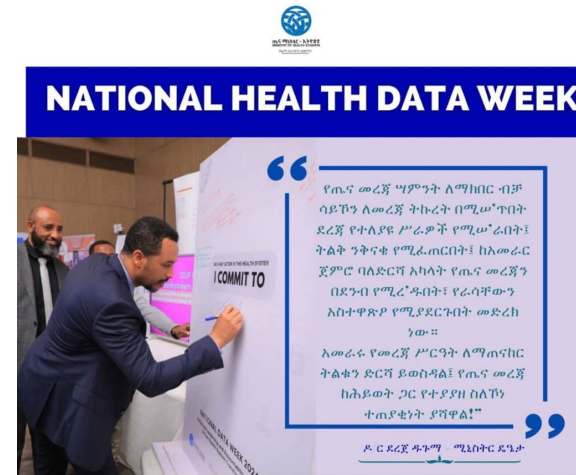


Resources



4. Activities to Strengthen Country Data Sources, Systems and Capacities

- Investments and TA to strengthen country data sources, systems and capacities
- Support for country-led implementation research & evaluation linked to ICs
- Strong focus on strengthening data and evidence use through country-led processes at Country Platforms
- GFF does this through partnership, e.g.:
 - Strengthening integration of gender with JHU through MAGE
 - WHO-led PHC measurement alignment process, together with Unicef, Global Fund, Gavi and others



The GFF works through five main levers to help strengthen country data sources, systems and capacities

1. Country Investment Case process

2. World Bank/GFF co-financed projects

3. Technical assistance

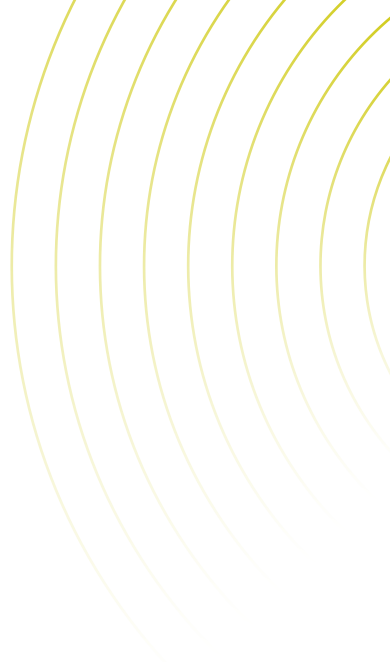
4. Support for knowledge and learning activities

5. Collaboration with partners at national, regional and global levels

Discussion

What guidance do you have on how to clarify and refine the GFF's approach to strengthening country data sources, systems and capacities?

- In the near term
- For the next strategy period





Break

Health Systems Strengthening for RMNCAH-N, with focus on SRHR



GFF HSS for RMNCAH-N Framework Connects Systems Investments to RMNCAH-N Outcomes

1

Purpose

- Optimizing investments across various health systems areas to enhance RMNCAH-N outcomes
- Advancing a knowledge and learning agenda to deepen understanding of how GFF investments contribute to improved RMNCAH-N outcomes

2

Encompasses

- 'Broad investments': wide-reaching benefits across the RMNCAH-N continuum
- 'Targeted investments': more specific benefits to one part of the RMNCAH-N continuum

3

Informed By

- Existing health systems frameworks, especially the Primary Health Care Measurement Framework and Indicators (PHCMFI)
- GFF Logic Model
- 6 pillars of GFF health systems support, reflected in Key Performance Indicators
- Standardized impact and outcome indicators tracked by GFF

Upon Completion, the Framework will be used for Internal and External Purposes

1

Internal

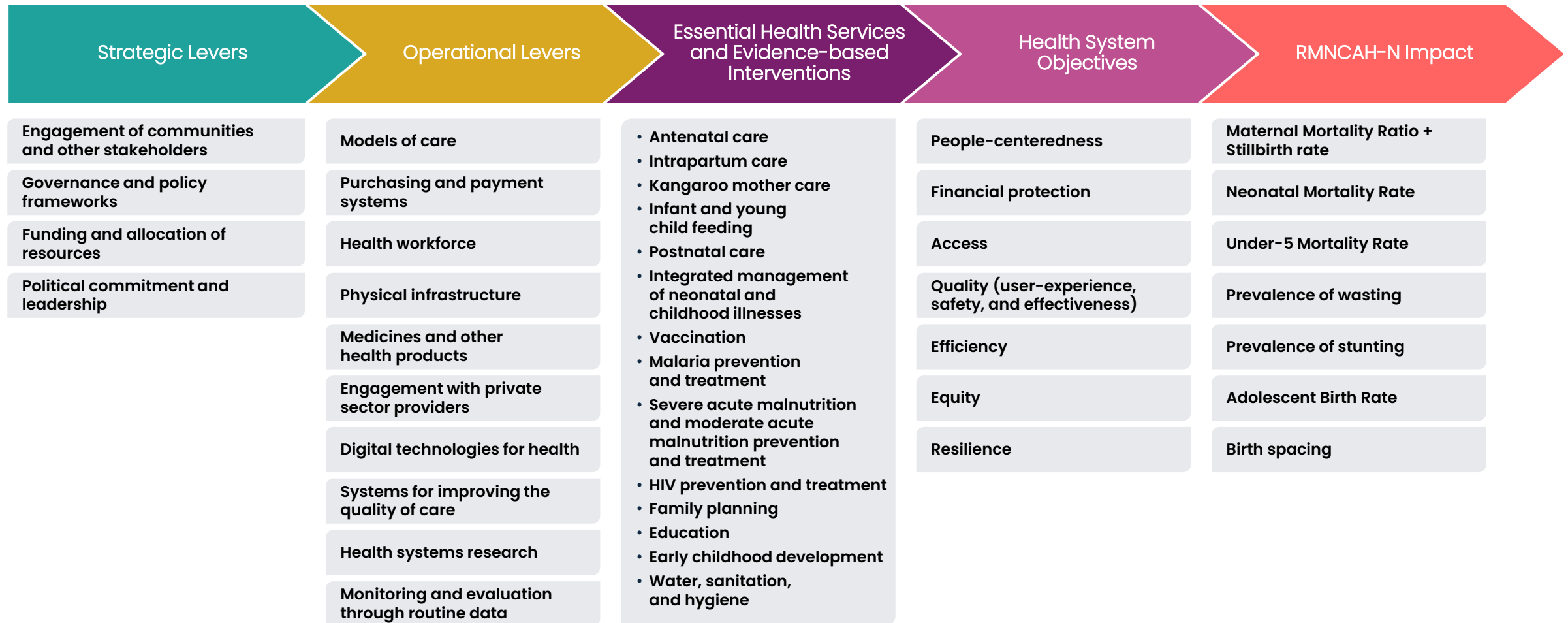
- Enhanced Prioritization
- Continuous Improvement
- Strategic Development

2

External

- Clarity and Transparency
- Collaboration and Partnership
- Knowledge Sharing

The GFF HSS for RMNCAH-N Framework

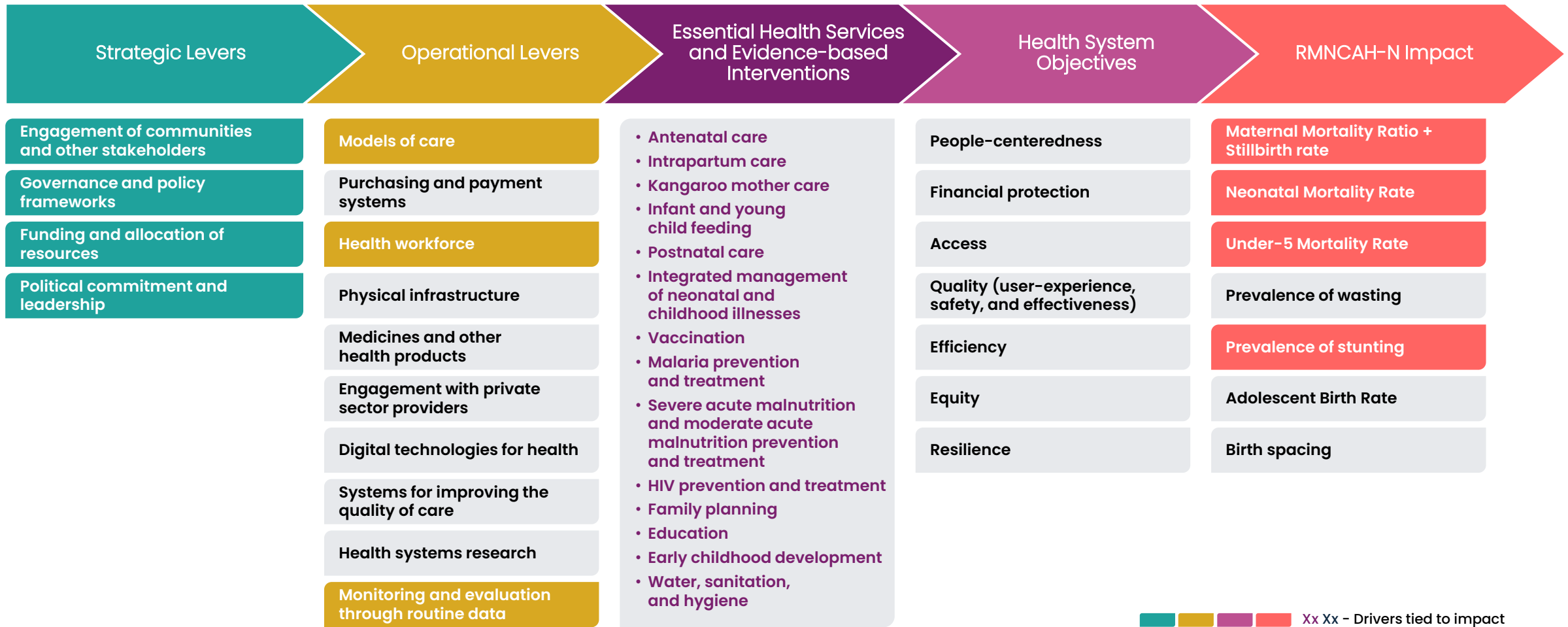


Cross-Cutting Themes:

Gender equity | Cross-sectoral collaboration | Macroeconomic factors | Social determinants of health

Example 1: Investments with 'Broad Benefits' across the RMNCAH-N Continuum

The GFF HSS for RMNCAH-N Framework

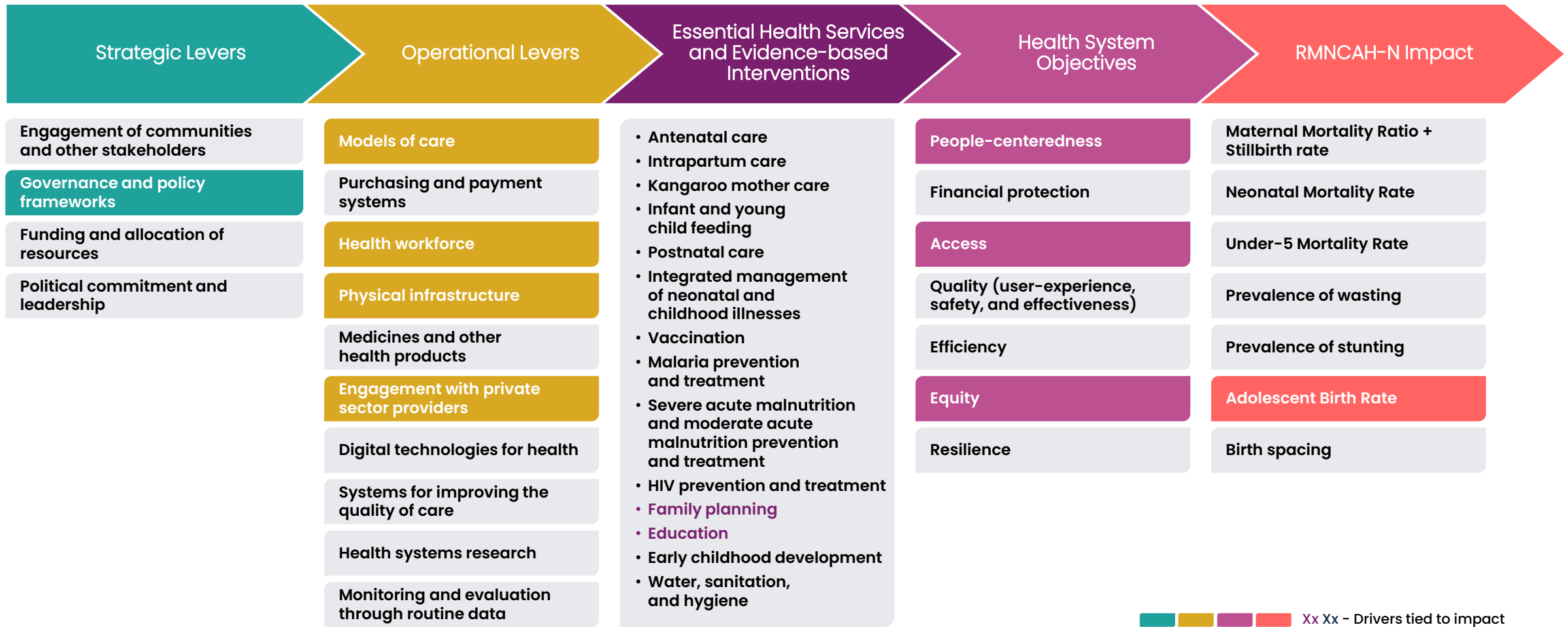


Cross-Cutting Themes:

Gender equity | Cross-sectoral collaboration | Macroeconomic factors | Social determinants of health

Example 2: Investments with 'Targeted Benefits' Specifically for Adolescent Birth Rate

The GFF HSS for RMNCAH-N Framework – Target Example



Cross-Cutting Themes:

Gender equity | Cross-sectoral collaboration | Macroeconomic factors | Social determinants of health

Given GFF Unique Positioning at the World Bank, GFF TA can Help Advance Government-Defined RMNCAH-N and Gender Priorities with Support of World Bank Instruments

Government's RMNCAH-N
and gender priorities

GFF links Govt priorities
to WB financing tools
& instruments

World Bank project financing
tools & instruments

GFF TA translates global norms &
standards; strengthens content of
WB projects & components; facilitates
alignment of partner resources

**Tailored solutions to
prioritized RMNCAH-N
and gender issues
delivered through HSS
strategic and operational
levers in context of
WB operations**

Timeline for Development of HSS for RMNCAH-N Framework

Phase 1: Sept to Nov 2024 IG

- Development of initial draft
- Internal consultations
- Feedback from IG

Phase 2: Post IG to April 2025

- Further develop framework
- Flesh out evidence
- Refine GFF strategic approach
- Additional partner consultations

Phase 3: May 2025 Onward

- Iterative application of framework
- Evidence-based strategy development
- Embed Framework in new strategy
- Bring greater specificity and concreteness

Using the HSS for RMNCAH-N Framework as a starting point, the GFF's new Evidence for Action initiative will document and disseminate evidence on the pathways through which GFF investments contribute to improved RMNCAH-N outcomes.

SRHR Update



Advancements on Legal Reforms and Data Generation & Use

Legal and policy reforms

- **Sierra Leone:** support to the adoption and implementation of the Safe motherhood bill (decriminalizing abortion, expanding access to contraceptives, post-abortion care and other SRH services)
- **Liberia:** continued support to the adoption of the Public health law, support to the adoption of the FGM law and rights of women
- **Ghana:** support to the finalization of the gender health policy to enhance gender equity in health including SRH as well as the revision of the VAW Law
- **Mauritania:** support to adolescents' access to FP services

Data & evidence use for improved learning and accountability for SRHR

- **MAGE - Monitoring for Action and Gender Equity** strengthens integration of gender & equity in collaboration with Johns Hopkins School of Public Health with a 2.0 in the pipeline with enhanced focus on adolescent girls as well as HPV
- **ADLAB - Adolescent Health Learning, Action, and Benchmarking Collaboration** with WB Development Economics Research Group, IR in pipeline in Mozambique, Mauritania, Liberia, Nigeria and DRC. Adolescent health module in development for FASTR, to strengthen feedback loops from adolescents.

Strengthening Partnerships to Generate Evidence and Outreach on SRHR

Ongoing partnerships

- **Partnership Women, Business and the Law (WBL) to collect data in 26 countries in Sub-Saharan Africa** on legal and policy frameworks affecting women and adolescents' access to education and SRHR, final results Dec 2024
- **Partnership with HRP/WHO to provide 15 country assessments** on access to legal and safe abortion and consent for family planning services, final results Dec 2024
- **Partnership with UNFPA** (delayed due to global WB-UN negotiations on safeguards reporting) to increase collaboration on SRHR opportunities, validation by Jan 2025, global scope as well as key focus country support. Ongoing collaboration on FP commodities and HF.

New partnerships for FY25

- **WB Sustainable Development (social inclusion) to assess opportunities for SRH referrals** by leveraging investments in safeguards mechanisms to move from project based to (health) systems based
- **WB Gender Innovation Lab collaboration on the Adolescent Girls Empowerment Regional Flagship Report** with research clinics, country deep dives and policy briefs to support GFF country priorities on adolescents

GFF Facilitates Increased Focus of SRHR in Resource Allocation and WB Operations

Distribution of IDA/GFF resources in co-financed projects

- Investments coded as 'Reproductive, Maternal and Newborn Health' have doubled in the past two years, from 12% in FY22 to 24% in FY24
- Investments coded as 'Adolescent Health' have nearly tripled, from 7% in FY22 to 20% in FY24

Enhanced focus on SRH services within the WB with GFF technical support

- GFF provides technical support to integrating SRH within the World Bank-wide target of reaching 1.5bn people with quality services by 2030.

New WBG Gender Strategy 2024-2030

- Discussions with WB Board around implementation of the strategy has led to increased focus on SRHR in operations.

NEW IDA21 SRH Targets

- GFF has committed to deliver 30 country investments in SRH (current and planned)
- Contributes to the WB global SRH target as well as Gender Strategy targets
- Also will constitute an important contributor to the WB 1.5 Billion people target

Commodities and Supply Chain Update



GFF Support for Commodities & Supply Chain : Overarching Goal

Access to quality commodities is essential to support countries as they save lives of mothers and children, increase spacing of births, and reduce stunting and wasting amongst children.

GFF will help strengthen mixed systems to deliver quality RMNCAH–N commodities through both public and private delivery channels as required to meet UHC targets.

Investment in Stewardship is Critical to Improve RMNCAH-N and Achieve Sustained UHC

Stewardship capabilities allow leaders to identify constraints on commodity access and leverage private sector capabilities where necessary. Stewardship joins-up upstream & downstream investments

Stewardship of Mixed Systems



Market Systems Analysis for RMNCAH-N Commodities in mixed systems



Build capabilities to address stockouts and employ cost-effective distribution



Formalize the Supply Chain Leaders Forum (LMIC Community of Practice)



Supply chain maturity assessments

Commodity Security



Commodity Financing to catalyze DRUM and On-budget funding



Build Commodity Resource Mapping and Expenditure Tracking Capabilities



Expand RHSC Role as RMNCAH-N Observatory and increase scope of SC Planning VAN to MCH commodities

Patient Centric Supply Chains



Diagnostics and investment to build HR capacity to manage mixed systems



Landscape Private Sector SC Innovators and Hurdles to Scale



Develop Private Sector investment mechanisms to support mixed systems

← Upstream Downstream →

Initial Activities will Prioritize Technical Assistance for Specialized Analysis to Shape Cofinancing



Technical Assistance

- Knowledge, advisory and technical assistance supporting the World Bank's program
- Informs client approach, Policy, and Investment Roadmaps for Commodity Security and System Strengthening



Cofinancing

- Funds that the Bank loans to a third-party recipient; the Bank plays an operational role, such as appraising and supervising funded activities. GFF RETF is given as co-financing grants alongside world bank loans
- Where countries incorporate recommendations into policy and investment cases, RETF (on-budget) will be used to address commodity funding gaps, transition to on-budget procurement under government oversight, and support system strengthening.
- In WB Operations that are 'Program for Results', the GFF can co-finance achievement of specific Disbursement Linked Indicators (DLI's)

Commodities and Supply Chain activities are supported by technical and financial resources across the WBG:

- Co-financing with IDA for commodity procurement and public sector strengthening
- GFF's \$34m Challenge Fund makes available both TA and cofinancing with focus on multi-sectoral issues
- Partnering with IFC may support private sector investments that develop mixed systems to deliver equitable access

Discussion

1

HSS Framework:

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?

2

SRHR, Commodities and Supply Chain:

What guidance does the IG have for maximizing GFF effectiveness in supporting countries to advance SRHR and address commodity and supply chain gaps for SRHR and other critical needs?



Meeting Closure



THANK YOU

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