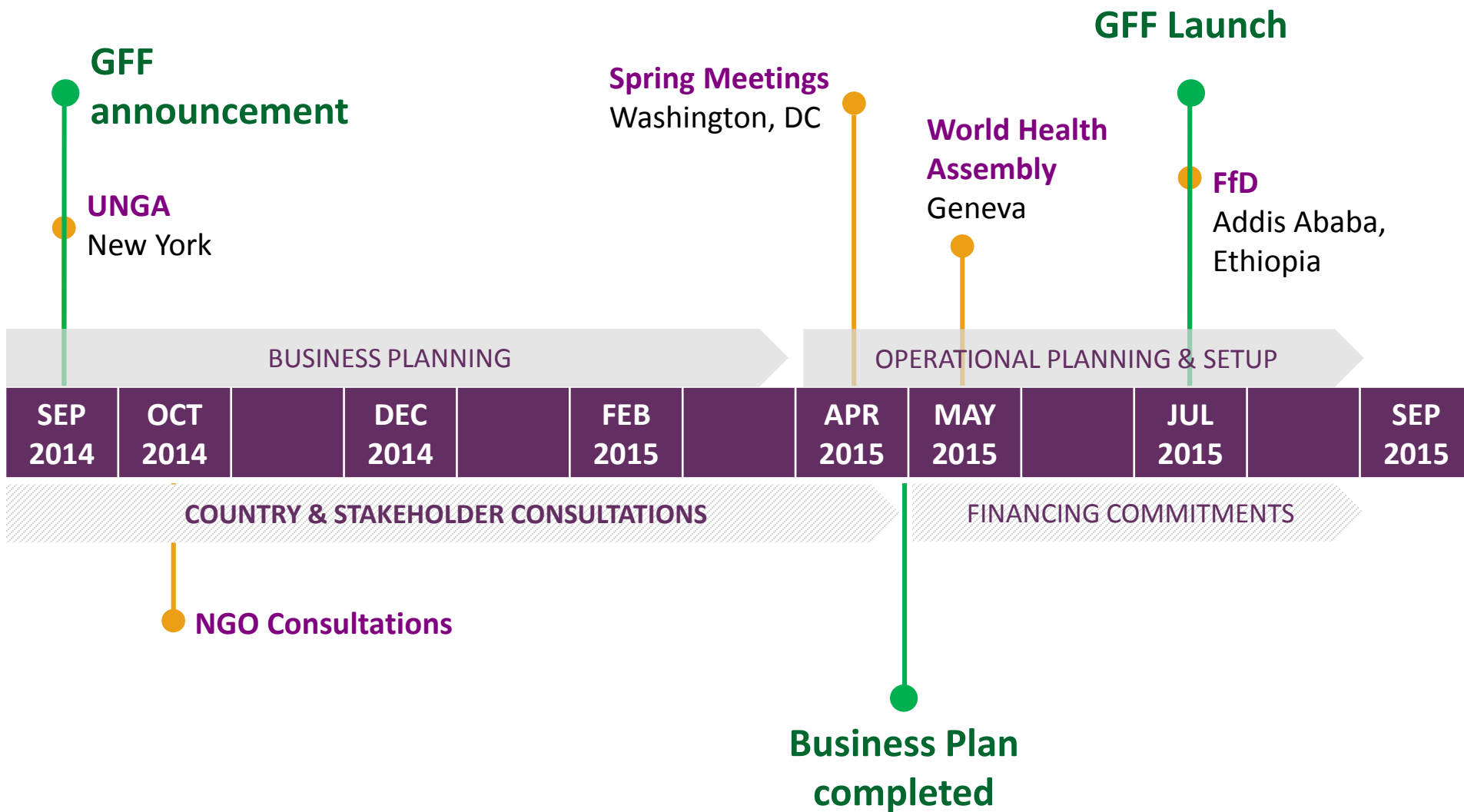




**GLOBAL FINANCING FACILITY
IN SUPPORT OF
EVERY WOMAN EVERY CHILD**

GFF timeline

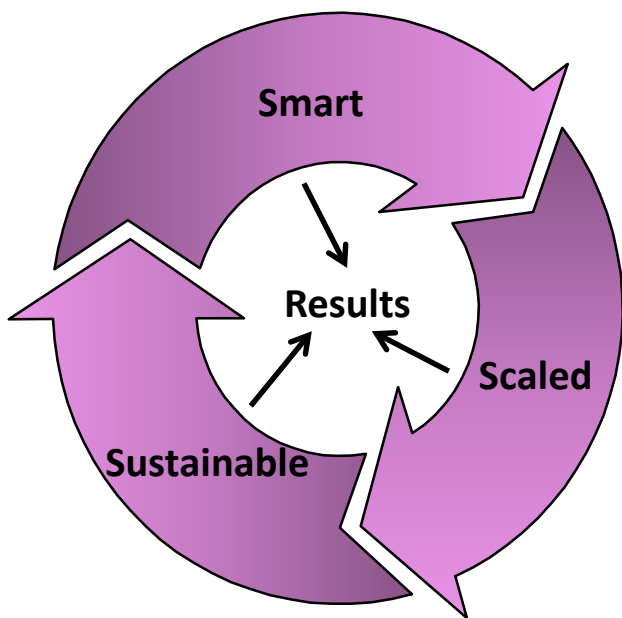


- Process supported by multi-stakeholder Oversight Group & Business Planning Team
- 4 frontrunner countries: Democratic Republic of the Congo, Ethiopia, Kenya, Tanzania

The “what” of the GFF

The “how” of the GFF

The “who” of the GFF

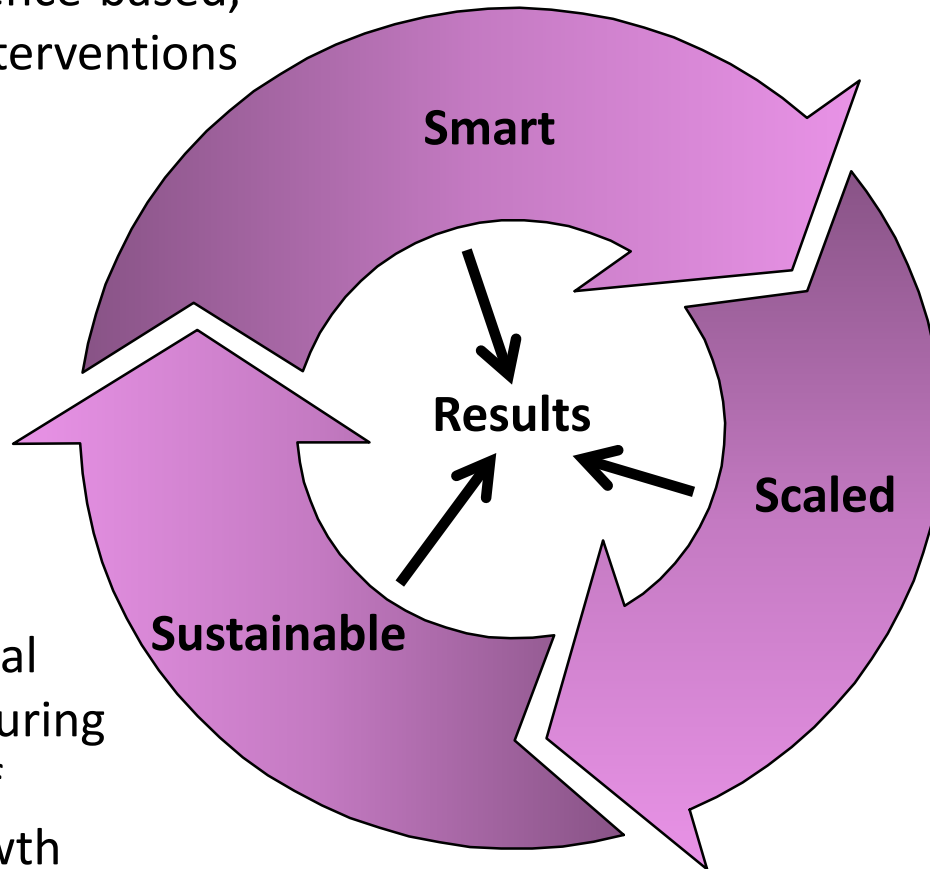


1. Investment Cases for RMNCAH
2. Mobilization of financing for Investment Cases
3. Health financing strategies
4. Global public goods



What: Smart, scaled, and sustainable financing for results

Focus on evidence-based, high impact interventions and results

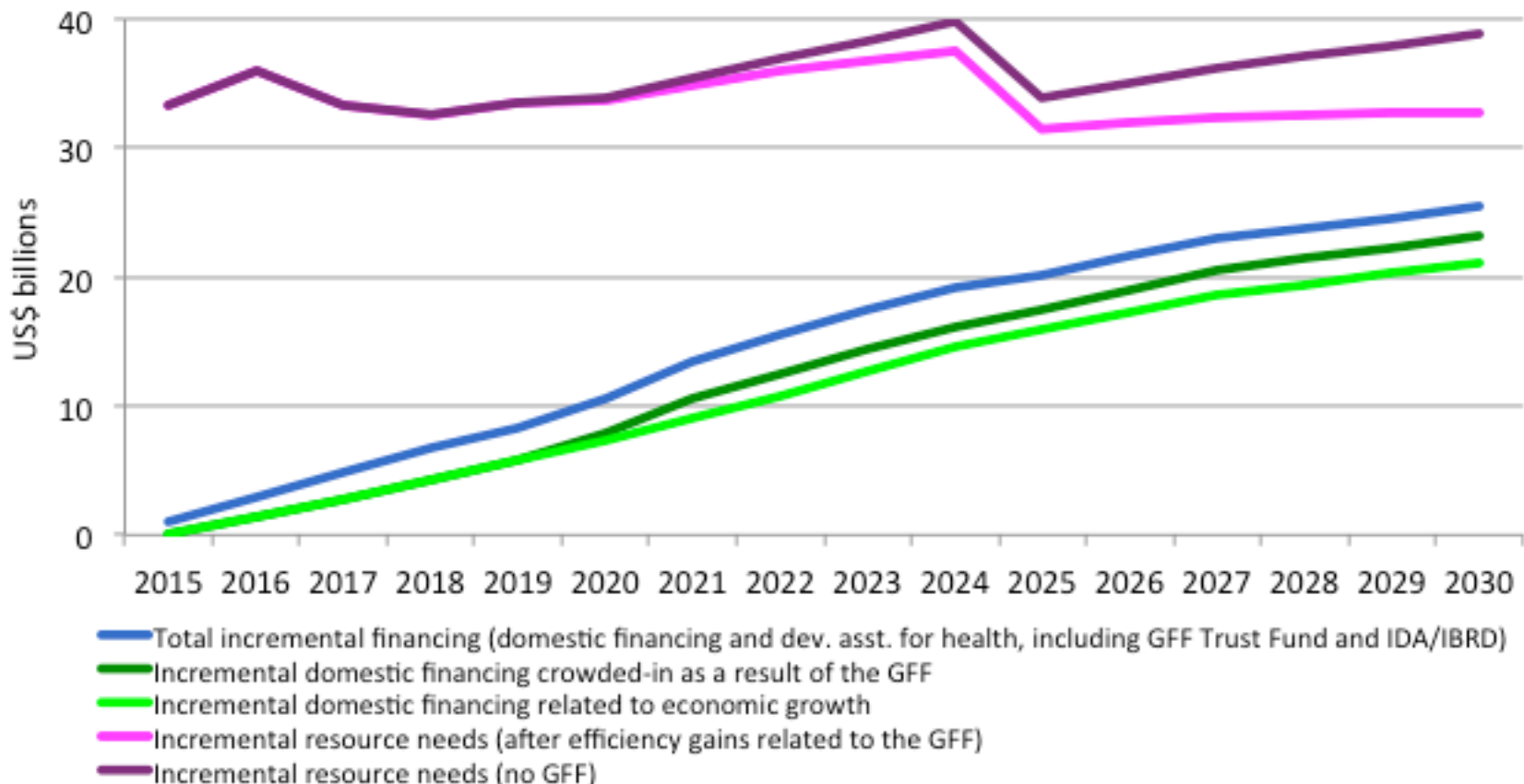


Secure universal access by capturing the benefits of economic growth

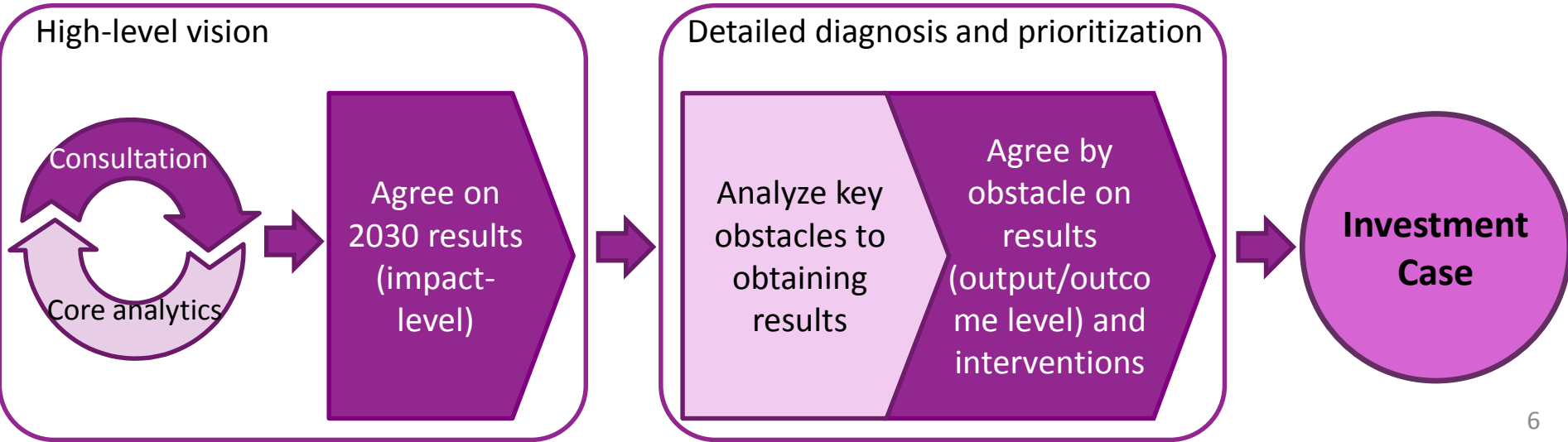
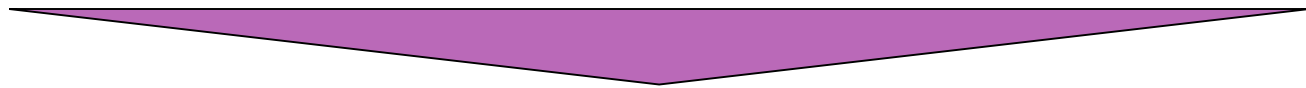
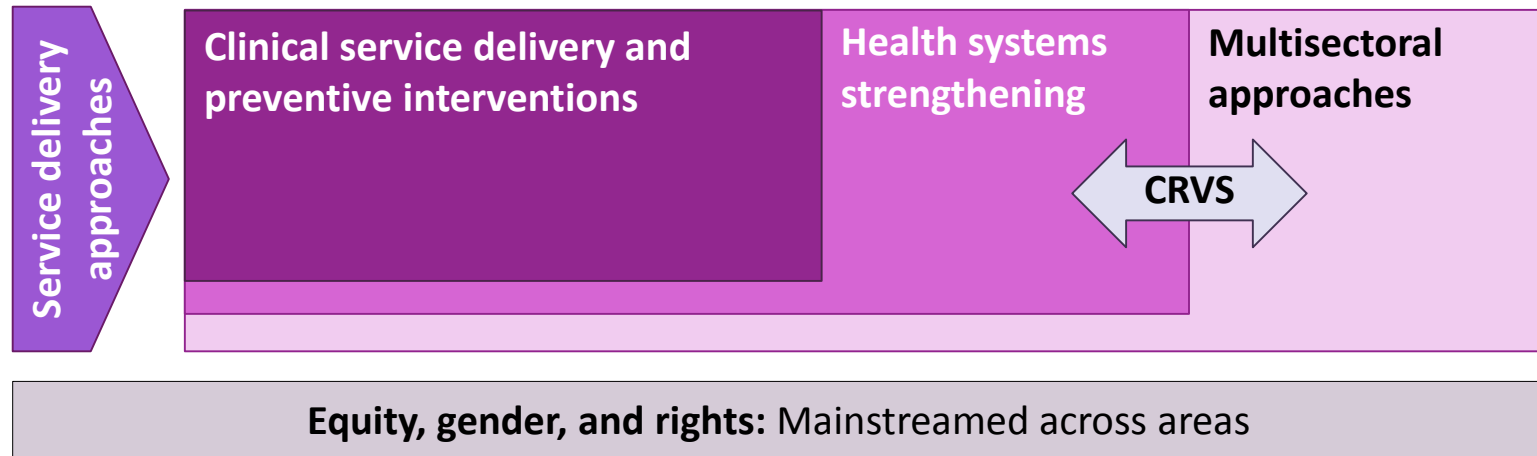
Finance RMNCAH at scale through significantly increased domestic and international financing

What: Bridging the funding gap for RMNCAH

- Smart financing: improving efficiency by approximately 15% in 2030
 - Scaled financing: crowding-in domestic resources and by attracting new external support (mobilizing a cumulative total of >US\$57 billion between 2015 and 2030)
 - Sustainable financing: supporting ~20 countries to graduate from needing GFF financing for RMNCAH
- The combined effects would prevent 24-38 million deaths of women, adolescents, and children by 2030

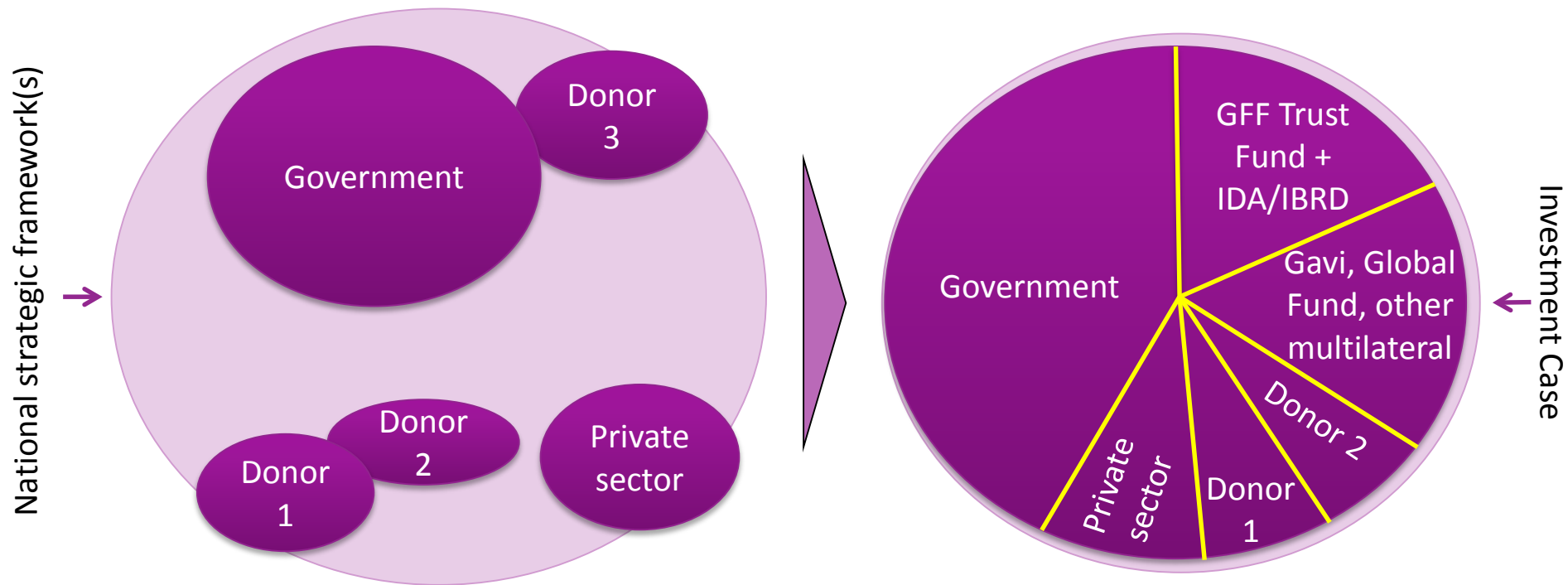


How #1: The Investment Case



How #2: Mobilization of financing for Investment Cases: Complementary financing of the Investment Case

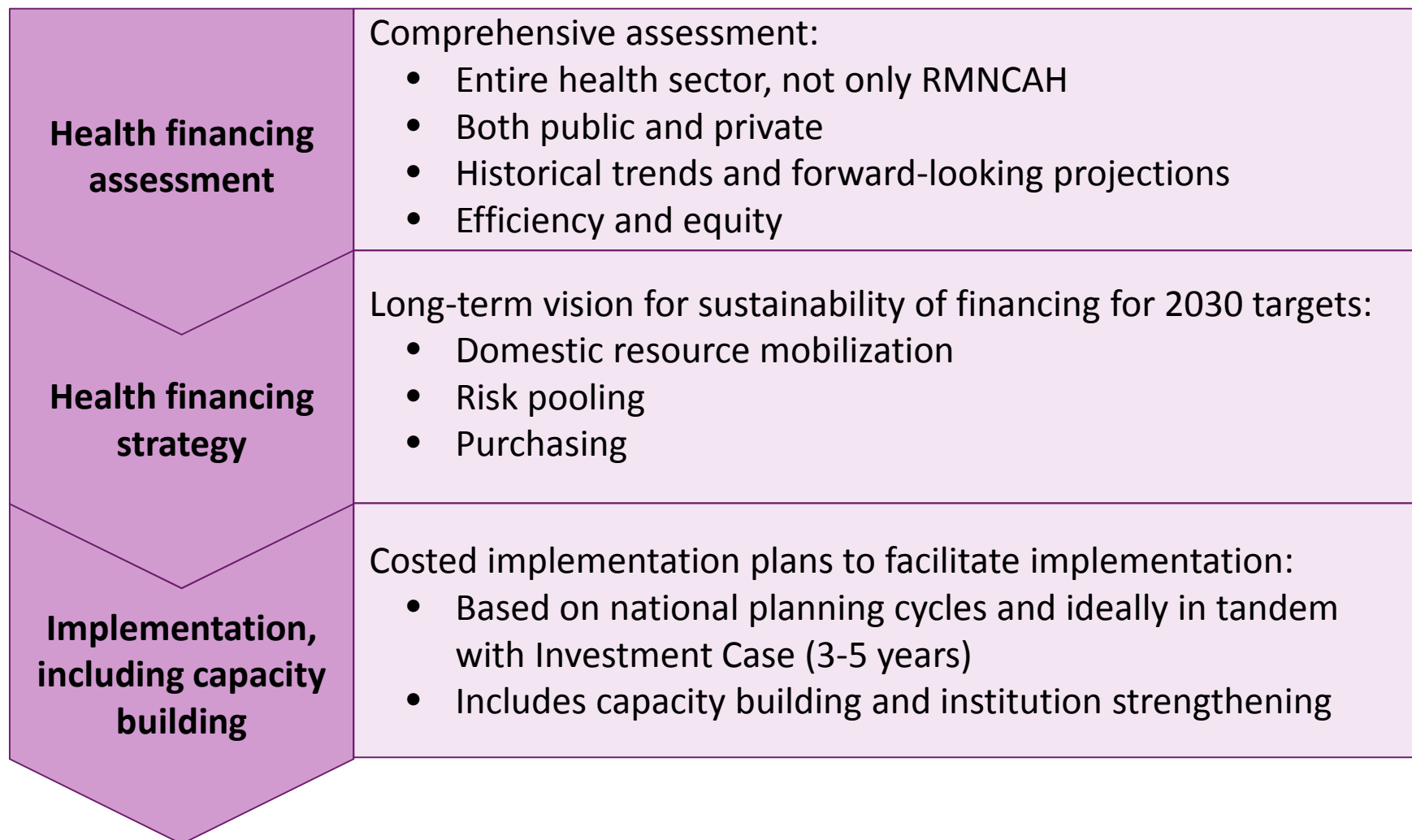
The Investment Case sharpens the focus on evidence-based, high impact interventions while reducing gaps and overlaps as financiers increase funding for RMNCAH



How #2: Mobilization of financing for Investment Cases: Other approaches

1. Increased government investment in RMNCAH
 - Wide spectrum of approaches to increase domestic resource mobilization, both formal and informal
2. Linking grant funding to IDA and IBRD projects
 - The link benefits both trust fund and IDA/IBRD:
 - Improves efficiency of grant financing by using existing systems, and ensures that grant financing is tied into ongoing strategic dialogues on macroeconomic policies and is on-budget
 - Improves quality of national priority-setting process and so of IDA/IBRD financing
 - HRITF had an average ratio of one dollar of grant resources to four dollars of IDA, which the GFF expects to match
3. Innovative engagement of global and local private sector resources
 - Untapped potential at national level around service delivery, supply chain management, medical technology, access to finance
 - Key entry points: Investment Cases and health financing strategies, both of which take mixed health systems approach

How #3: Health financing strategies



Sustainable provision of scaled-up RMNCAH results

How #4: Global public goods

- Initial phase:
 - Focus on knowledge, learning, and evaluation (building on HRITF experience)
 - Establish CRVS “Center of Excellence”
- Potential additional specific initiatives to be defined within these broad categories:
 - Knowledge, learning, and evaluation
 - Data and information systems
 - Commodities
 - Innovation

Who: the country platform

Partners

- Government
- Civil society (not-for-profit)
- Private sector
- Affected populations
- Multilateral and bilateral agencies
- Technical agencies (H4+ and others)

Structures

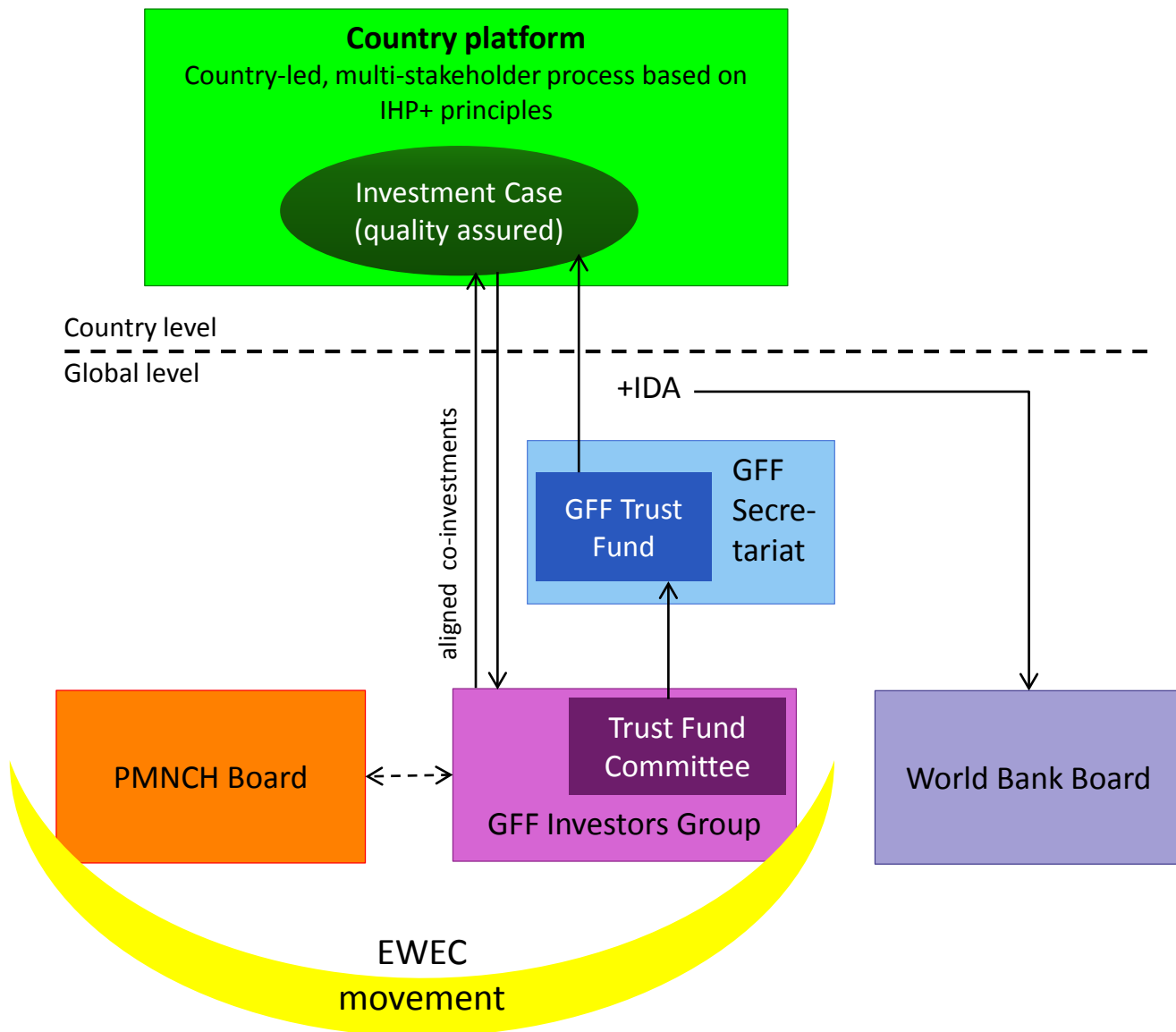
- Not prescriptive about form
 - Build on existing structures while ensuring that these embody two key principles: **inclusiveness and transparency**
- ↓
- Diversity in frontrunner countries:
 - Ethiopia and Tanzania used existing structures
 - Kenya established a new national steering committee

Roles

- Preparation and finalization of Investment Case and health financing strategies
- Complementary financing
- Coordination of technical assistance and implementation support
- Coordination of monitoring and evaluation

- Eligibility
 - 62 low and lower-middle income countries
 - Must be willing to commit to increasing domestic resource mobilization and interested in using IDA/IBRD for RMNCAH
- Resource allocation
 - Three criteria: need, population, income
 - Range of US\$10-60 million per country
 - No repartition by issues/target population
 - CRVS fully integrated but additional funding of up to US\$10 million if country includes in Investment Case and uses IDA/IBRD
- Roll-out
 - \$800 million pledged to date
 - Four frontrunner countries (DRC, Ethiopia, Kenya, Tanzania)
 - Additional 5-10 countries to be selected as a next step

Integrated governance of GFF as a financing facility and of the GFF TF



Structurally linked governance of the financing facility and of the trust fund

- **GFF Investors Group** ensures effective co-financing of RMNCAH Investment Cases in GFF countries
- **GFF TF Committee:** subset of the Investors Group with devolved decision-making on GFF TF allocations
- **GFF Secretariat** manages TF and provides support to Investors Group and TF Committee
- **WB Board:** final commitment of TF and IDA resources; fiduciary oversight