One of the main barriers to global health outcomes, a priority for Dutch development aid, is the lack of financing. Without effective financing, the poorer health outcomes translate into higher economic losses and in the inability to harness the potential of the world’s young people for sustainable development to contribute to the country’s prosperity. If the goal is aid effectiveness and the objective is advancing towards Universal Health Coverage (UHC) for mothers, children and young people, then an investment by donors – including the Dutch government - in the Global Financing Facility (GFF) is according to Cordaid a sensible step.

**WHO?**
The Global Financing Facility, GFF, is a financing mechanism that harmonizes aid at country level in a country-led way to close the gap for reproductive, maternal, newborn, child and adolescent health by 2030. Its goal is to end preventable deaths and improve the quality of life for millions of women, children and young people. Including this, the GFF provides a key step towards Universal Health Coverage, a priority in the Sustainable Development Goals (SDGs) agenda. The GFF strives towards strengthened health systems that guarantee equitable access to quality SRH services, critical for achieving SDG 3, with full financial risk protection to service users.

**HOW?**
The GFF has an innovative approach that supports countries to self-identify a set of priority investments in key reproductive, maternal, newborn, child and adolescent health challenges and health systems strengthening. By focusing on the health system, the GFF ensures that the foundation is there to deliver critical health services for overall improved health outcomes. Country leadership and increasing domestic resources for health are key to sustainability. Therefore a GFF investment guarantees a roadmap that within 10 years of implementation, countries will be able to domestically finance their health system, by submitting a healthcare financing strategy that will be able to take over the investment of the GFF.

**Role of Civil Society in the GFF**
It is Cordaid’s conviction – aligned with Cordaid’s core values – that the importance of full and meaningful engagement of civil society cannot be overemphasized. The GFF advocates for a strong role of CSOs in service delivery and advocacy efforts to stimulate accountability of governments towards their citizen in national plans and budgets. Moreover, the GFF views CSOs as an essential partner in ensuring that national responses are responding to the needs of affected populations and service delivery focuses on access, equity and quality. Lastly, civil society engagement is guided by a Civil Society Engagement Strategy and a costed Implementation Plan. Nevertheless, Cordaid is concerned about the ability and willingness of governments to actively promote civil society empowerment. In Cordaid’s view it is essential to promote downward accountability in the health system as well as offering CSOs a say in fund allocation. The GFF and its funding mechanisms are about systemic transformation of governance in a country, that is part of a development trajectory which is rooted in a cultural and political reality. It is against this reality that Governments and CSOs need to engage. Cordaid, based on its experience for over 100 years, is prepared and able to play its role here.

**WHAT?**
Now is the time to invest in the GFF. The first replenishment for the GFF Trust Fund has been launched to respond to the demand from countries that strive to be part of the GFF. We are of the opinion that Dutch government, with a view to the intensification of means for development cooperation for the coming years, should increase its investment in the GFF in a substantial manner as an add on to current contributions to development cooperation.

The Global Financing Facility, GFF, adopts the following Development Effectiveness Principles:
- **Ownership:** The GFF puts developing countries in the driver’s seat, in setting their own priorities in reproductive, maternal, child and adolescent health.
- **Alignment:** The GFF strengthens local, national dialogue among key stakeholders including civil society under the leadership of governments and supports the identification of a clear set of priority results that all partners commit their resources to achieving.
- **Harmonization:** The GFF leverages existing resources and increases the financing to ensure donor harmonization. This has helped reduce fragmentation which improves the effectiveness and efficiency of donor health financing.
- **Results:** The GFF utilizes performance-based financing to focus on development results and ensure proper measurement and verification of results achieved.
- **Mutual Accountability:** The GFF national platform brings together donors and partners to increase accountability for development results.
**CASE STUDY 1**

**Country statistics**
- High maternal mortality rates: 846 maternal deaths per 100,000 live births in 2014
- High child mortality rates: For every 1,000 children born, 58 die before their first birthday and 105 die within the first five years of life.
- 42% of women in the poorest wealth quintiles, aged 15-19 years, are mothers or pregnant with their first child.
- Contraceptive prevalence rate is 8 percent and population growth is 3 percent. For every
- In 2015, per capita health spending was US$ 22. One-fourth of the amount necessary to provide basic health services to the population

**GFF in Democratic Republic of Congo**
In 2015, the Government of DRC set up the GFF platform that had representatives from the government, civil society, technical and financial partners. The Ministry of Health, with representatives from the civil society, focused on defining the priorities; UNICEF conducted a health system bottleneck analysis; the World Health Organization provided support in costing the investment framework; and the GFF secretariat helped with the resource mapping. The government has prioritized 14 provinces (out of 26) with the least performing health and socioeconomic indicators as key targeted regions to align and harmonize domestic and external support.

**Health Financing Priorities**
- Enhance domestic resource mobilization in health both at provincial and national levels
- Improve efficiency of domestic and international financing focusing on priorities identified: through donor mapping, performance-based financing, and community engagement.
- The Ministry of Health developed a Health Financing Strategy to improve:
  - Public financial management of budgeted health expenditures
  - Tax collection and administration
  - Financial risk protection
  - Fragmentation in the health insurance system by pooling health insurance mechanisms from both the private and public sector
  - Community-based health insurance to target the informal sector.

**Expected Results**
Its aim is to expand coverage of an integrated reproductive, maternal, children, and adolescent health services package from 27% in 2017 to 40% in 2021 in 14 provinces. This result will contribute to reducing maternal mortality ratio by an average 7% and under-5 child mortality by an average 17%.

**COMPLEMENTARY FUNDING OF THE INVESTMENT CASE**


**QUICK FACTS**

$33.3 billion dollars, gap on maternal, child, adolescent health specifically in lower-income and fragile affected countries. The GFF will work to reduce this gap by 2030.

24 million-38 million deaths of women, children, and adolescents by 2030 would be prevented by GFF’s approach

16 countries have benefitted from the approach


**ABOUT CORDAID**
Cordaid contributes to UHC by improving the quality of and access to health care systems in some of the world’s most fragile countries. Countries like the Central African Republic, the Democratic Republic of Congo and Afghanistan. We do this in close cooperation with local health care providers, national authorities and international stakeholders, like the World Bank. Where feasible we will link to the GFF endorsed programs.

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