

The Global Financing Facility's work in IAP private sector report areas of focus:

1) Private Sector Roles & Accountabilities in Health System Strengthening, Universal Health Coverage (UCH) and Privatization of Health Care, with a focus on women's, children's and adolescents' health.

GFF supports governments to make strategic evidence-based decisions on where to engage with private sector to improve health and nutrition of women, children and adolescents. While GFF partners (e.g., USAID, BMGF, DFID) also have a wide range of activities related to private sector, this summary focuses on the work that is supported through the GFF trust fund; some of the examples have partner financing in a complementary capacity.

- **Data and analytics:** GFF provides funding and technical resources for analysis of private sector role in delivering key RMNCAH-N services. This has been done through various ways- supporting a basic analysis of DHS data (if it is available) for governments to understand care-seeking behavior across public and private sector service delivery, with disaggregation by urban/rural as well as income quintiles to ensure an equity focus; supporting more detailed analysis through private sector assessments that help government and key stakeholders identify a range of opportunities across health system areas, which GFF has supported for Uganda and DRC, and is currently in discussion for additional countries. Attached is a sample DHS analysis country profile on care-seeking across public and private sector. These also help build the overall knowledge base for private sector engagement in health. The Uganda assessment (co-financed by GFF and USAID) is available on the GFF website [here](#) and the DRC one (co-financed by GFF, USAID, IFC and World Bank) is in the final validation stage with government. Countries may also have existing private sector assessments (e.g., Senegal) funded by GFF partners that can be used for decision-making.
- **Capacity building and knowledge exchange:** GFF has adapted the Managing Markets for Health (MM4H) training course (originally created through HANSHEP support) to provide a strategic framework for governments to conduct data analysis, root cause assessments, manage public private dialogue, and design private sector interventions to help achieve their RMNCAH-N objectives. This builds government capacity to better manage their engagement with private sector with a focus on delivering results for underserved populations. The first GFF MM4H online course was held in March 2018 with over 450 participants from across the globe and was a Massive Open Online Course (MOOC) open to all who wished to participate and free of cost, followed by a face to face workshop in Dakar for 8 GFF country teams, which enabled the teams to learn practical application of MM4H principles share their own experiences with private sector across countries. The GFF MM4H course was delivered by the University of Edinburgh. In addition to MM4H, GFF (and partners) support significant capacity building at country level for governments to manage private sector contracts with for profit and not for profit providers (for performance-based financing and other forms of contracting), as well as to better design public-private partnerships with a focus on reaching underserved women and children (e.g., in Vietnam). Please see attached the latest GFF Investors Group private sector update paper (IG-7), which provides more information on this.
- **On service delivery,** a number of GFF countries are using performance-based financing (PBF) contracts with both for-profit and not-for-profit private sector to deliver RMNCAH-N services, often at a national

or multi-state scale. This has been particularly valuable in fragile and conflict affected areas (such as Northwest Cameroon, Northeast Nigeria, and Democratic Republic of Congo) where public infrastructure alone is insufficient or otherwise unable to adequately serve basic health and nutrition needs of women and children. Several other GFF countries including Uganda and Liberia are using private sector capacity and technical assistance for results-based financing projects to deliver essential health and nutrition services. Across the five countries, with approximately US\$733 million in support from GFF trust fund and co-financiers and the participation of the private sector, these projects are expected to have an expected reach of over 31 million beneficiaries.

In middle income countries like Vietnam, the government wants to build capacity to effectively manage and negotiate complex contracts with private sector. Public-private partnerships (PPPs) in the health sector are currently geared towards joint venture models which focus more on revenue-generation for public providers rather than focusing on equity objectives protecting patients from excessive health spending. The GFF is supporting the Government of Vietnam to “do PPPs better” through technical assistance to the Ministry of Health and other relevant government agencies in the process of policy-making, planning, identification, selection, structuring, tendering and implementation of health PPPs in a manner consistent with public health objectives, i.e. improving access to care and providing financial protection from out-of-pocket spending with a particular focus on RMNCAH-N and low income populations. The GFF-funded pilot PPP will serve as a model to build government experience to improve maternal and child health outcomes through partnering with private sector to bridge the equity gap.

- GFF also supports several countries to improve the quality and accreditation systems for private sector, with Kenya and Uganda being two examples (details in IG-7 private sector paper attached). In Kenya, GFF support to the Joint Health Inspection Checklist is helping ensure a more level playing field for both private and public facilities to be held accountable to the same standards of care.
- In the areas of HRH and technology, GFF has supported an Innovation Challenge in Nigeria to bring private sector innovation in the areas of HRH, CRVS, service delivery, etc. to improve health outcomes in north east Nigeria, a fragile setting. This was conducted by the Healthcare Federation of Nigeria and the Private Sector Health Alliance of Nigeria, working closely with the government. Details of the process in attached GFF IG-5 Portfolio Update.

2) Effective Private Sector Accountability Processes & Mechanisms – global, regional, national and subnational levels.

- Global level: GFF Investors Group includes countries, bilateral donors, foundations, UN agencies, and representatives from private sector and civil society. We have previously shared contact information of our private sector representatives on the IG, and can also share that of our CSO representatives if needed.
- Country level: at country level the main accountability mechanism for GFF is through the multi-stakeholder country platforms, which is led by government and includes a range of stakeholders along with private sector and civil society. Due to the diversity of private sector actors at country level, GFF encourages governments to use private sector umbrella associations (either health specific or broader private sector associations) to provide representation on the country platform for the Investment Case and prioritization of RMNCAH-N interventions. Private sector health associations have been engaged in Kenya, Nigeria, Senegal, Uganda, and in Cameroon the MoH engaged with a non-health specific private sector association of major private companies for the Investment Case. Private sector umbrella associations in health can also play an important role in self-regulation as well as partnering with government on developing appropriate regulation and accreditation (as in Kenya).

- The private sector contracting in PBF projects uses various accountability mechanisms. In the performance-based financing system in Cameroon, both public and private providers (for-profit and faith-based) are contacted to deliver an essential package of healthcare services. The system is designed to encourage facilities to offer priority health services and to ensure that they are meeting quality standards. Accountability of the system is ensured in two ways: Firstly, in addition to contracting with facilities, the regional health funds also contract with district health teams to support facility regulation, provide supportive supervision, and conduct quality assessment. Additionally, accountability is ensured by community-based organizations who are also contracted by the fund holder and provide verification of reported results and provide a mechanism for clients and patients accessing care at PBF facilities to provide their perspective on the quality of care.

In addition to supporting accountability through these direct actions, private facilities participating in the PBF are also expected to report data into the national health management information system. The rollout of this system began in 2017 and reporting rates for private-for-profit facilities were much lower than that of public facilities. A gradual expansion of the PBF approach expects to improve reporting rates overall including rates for the private sector which will supply the Ministry of Public Health and regional health funds with information critical for managing this mixed health system. In the PBF in Northeast Nigeria, there is also counter-verification of the results by community-based organizations as part of the strategic purchasing system. Besides PBF, the GFF's support to improving accreditation and capacity building are also expected to lead to increased accountability, through expanding government ability to better design and monitor contracts and PPPs for RMNCAH-N. More information is available in the on the GFF website for [Cameroon](#) and [Nigeria](#).

- CSO and youth organization involvement in GFF:
The GFF engages at the global and country level with diverse CSOs, on issues ranging from advocacy, social mobilization and accountability to service delivery. PMNCH is mandated by the GFF to coordinate a GFF CSO working group, which includes over 800 CSO members, and operates through a number of sub-working groups, including one on accountability. The GFF CSO working group coordinates with other CSO platforms, including health professional associations and academia, all which bring a different perspective on accountability and the roles of private sector. At country level, CSOs engaging on the GFF engage also with the private sector in country platforms, and have in a number of countries co-convened working groups across the CSO and private sector spectrum. CSOs are represented on the GFF Investors Group with two seats, as well as two alternate seats (one of which is for youth), where engagement with the private sector and regular discussions on accountability also take place. Youth is represented on the GFF Investors Group with one seat out of the CSO representatives (one of the two alternate seats), and youth associations are member to the GFF CSO working group. The GFF CSO working group has drafted a youth addendum, which was outlined at the GFF Investors Group in April 2018, and will be submitted for consultation and approval in the next Investors Group meeting. The youth addendum will also be complemented by country guidelines for youth engagement.

3) Private Sector Resource Flows for Women's, Children's and Adolescents' Health

- The first private sector financier to the GFF trust fund was Merck for Mothers, with a US\$10 million commitment in January 2017. Private sector donors to the GFF trust fund undergo a due diligence process, and align their commitment to the GFF's objectives and country priorities.
- GFF also uses innovative financing to mobilize private capital for GFF countries RMNCAH-N objectives. One example is the performance-based IBRD loan buy-down in Guatemala, where a US\$100 million loan

(funded by capital raised by IBRD from financial market investors) to improve nutrition outcomes is brought down by a US\$9 million GFF grant to more concessional terms, provided certain performance targets are met. There is also a domestic resource mobilization component to the innovative financing in Guatemala, where the government of Guatemala has committed to using the resources that are freed up from debt payments and matching them with domestic resources for the nutrition program for pregnant women and children. Thus, the government will reinvest the combined amount of US\$18 million towards the conditional cash transfer (CCT) program, improving sustainability of the CCT program.

- In partnership with IFC, the GFF is in the exploratory phase of developing blended finance investments in GFF countries, by using GFF grant to de-risk private sector investments focused on improving the health and nutrition of poor women, children and adolescents. GFF’s current innovative financing work is summarized in the latest IG private sector paper, and it is expected that GFF will continue to develop innovative mechanisms to crowd in private capital at scale for RMNCAH-N.

For more information on the GFF’s private sector work, please visit our website:

<https://www.globalfinancingfacility.org/our-partnership/private-sector>



www.globalfinancingfacility.org