

International Financing Mechanisms to Support Health Systems Strengthening

Global Fund and GAVI Support for Health Systems Strengthening

What is it?

The GAVI Alliance and the Global Fund to fight HIV/AIDS, TB and malaria (see box) have long recognised weak health systems as a major barrier to achieving their corporate goals. The GAVI Alliance increasingly sees investment in health systems as a way of *protecting* its investments in newer and more expensive vaccines. At the same time they have adopted different approaches to addressing these barriers.

The Global Fund and Health Systems Strengthening

The Global Fund's major objectives in providing funding for health systems strengthening are to: (i) improve grant performance, and (ii) increase overall impact of responses to the three diseases. (The Fund) recognize that supporting the development of equitable, efficient, sustainable, transparent and accountable health systems furthers achievement of these objectives (and) that non-government organizations, the private sector and communities affected by the disease(s) are each an integral component of the health system, as is the government sector".

GAVI and Health Systems Strengthening: By the end of 2005 the GAVI Board recognised that further progress in expanding immunisation coverage could not be sustained without addressing broader health systems constraints and approved the establishment of a separate Health Systems Strengthening (HSS) window. An initial allocation of \$500m was set aside to cover the period to 2010. Countries are eligible to receive \$5 per birth cohort (in low income countries with an average per capita income >\$1 per day) or \$2.50 (for countries up to \$1000 per capita income per annum). The GAVI Board recently approved a further \$300m which should allow all eligible countries to benefit from this funding stream. Countries must have prepared a Comprehensive Multi Year Plan for Immunisation in order to apply for GAVI HSS.

Proposals generally focus on three main priority areas – health workforce mobilisation, distribution and motivation, organisation and management of health services and supply, distribution and maintenance systems for drugs equipment and infrastructure. Funds are targeted on the district-level and below in most proposals. However, other areas can be supported if a case is made. GAVI HSS support aims to align with the period of national plans so funding is typically for a period of 3-5 years. GAVI is considering piloting in a few countries direct support to health plans where a country compact and validated plan is in place (therefore dropping the need for a formal HSS application). The GAVI HSS window of support will be evaluated in 2009.

Global Fund and Health Systems Strengthening: The Global Fund's approach to supporting HSS has changed over time. In round 5 separate HSS proposals were allowed. Thirty proposals were received; the key priorities identified in the proposals received, in order of importance, were human resources, information systems development, facility, lab and equipment upgrade, management strengthening, institutional strengthening and procurement and supply systems. Three proposals – those from Cambodia, Rwanda and Malawi - were successful and this HSS-specific approach was subsequently dropped. Currently the Global Fund allows applicants to apply for funding to respond to health systems weaknesses "either through a program (by-disease) approach, or by a cross-disease approach" recognising that the response may differ substantially in different settings. The Fund plans to accept national health strategy applications provided that they have been properly validated and that civil society and the private sector have participated in the development of these strategies.

What do these mechanisms add?

- **Additional resources:** both GAVI and the Global Fund have been able to attract resources from non traditional sources such as the foundations, the private sector and governments in the south. Funds are supposed to be additional to domestic government contributions and whilst this is difficult to measure there is some evidence this is happening.
- **A flexible response to national needs:** both organisations rely on country proposals. In the case of the GAVI Alliance, there is greater certainty on how much funding is available as allocations are formula based. Countries are given significant freedom over how they programme resources as long as they can show that the support will contribute to efforts to improve immunisation coverage and help combat the three diseases. In the case of the Global Fund countries are requested to set out their own needs.
- **A strong results focus:** In the case of the Global Fund funds are released incrementally based on results against agreed targets with flexibility to accelerate spending as necessary or even to transfer to grants which are performing well

Outstanding Issues and Options

Despite the fact that countries are given flexibility in how they allocate resources support is ultimately tied to progress against the diseases and not against the performance of health systems as a whole. This raises the question as to whether it makes more sense for the GAVI Alliance and the Global Fund to deal with HSS separately or whether it might make more sense to allocate a share of the contributions they receive in an unearmarked fashion to support HSS. Such an approach might apply to all donor financing for health – not just that to the GAVI Alliance and the Global Fund.