

IDA in FOCUS How #IDA works for Health

June 25, 2024 8:30-9:30am EDT



IDAM Without action, the number of people without access to health services will increase from 4.5 bn to 5 bn by 2030

New threats to access to health systems

Fiscal challenges

 Spending on health systems falling

Bilateral aid to developing countries' health systems more than halved between 2019 and 2022

Disease challenges

- Pandemic risk rising
- AMR spreading

70-100 million people live in extreme poverty compared to pre-pandemic years

Demographic challenges

Populations aging

The proportion of the world's population over 60 years will nearly double between 2015 and 2050



Transforming Challenge to Action: New health targets and increased ambitions with countries, partners and CSOs





Moderator Shakuntala Santhiran, Ajay Banga, World Bank Group President and Dr. Tedros Adhanom, Director-General, World Health Organization (WHO) at the World Bank in Washington, DC on April 18, 2024. Phoro: Dasan Bobo/World Bank.

New Health Targets and Ambitions:

Provide quality health services to an additional 1.5bn people over the next five years

- Global Challenge Programs on Strengthening Pandemic Prevention, Preparedness and Response and on Nutrition and Food Security
- Mainstreaming climate across all health system investments as part of the target of 45% climate financing
- Partnerships: This new ambition will take new ways of working with partners, including CSOs, UN agencies, academia and global health agencies.



The World Bank's increased ambition in Health support its wider Evolution

VISION	To create a world free of poverty on a livable planet	
MISSION	To end extreme poverty and boost shared prosperity on a livable planet	
	Doubling down on impact	Modernizing our approach to delivery
WB PLAYBOOK	 Knowledge Compact Global Challenge Programs Crisis Preparedness and Response Toolkit Concrete goals: 45% climate financing; 1.5bn people reached with health services 	 Working as One World Bank People and Culture Operations Efficiency and Effectiveness Partnerships for Impact
FINANCIAL MODEL	IBRD - IDA - IFC - MIGA - Concessional Finance	
	HNP contributes to and tracks indicators on 'Healthier Lives':	
RESULTS SCORECARD	 Millions of people receiving quality health, nutrition and population services Number of countries benefitting from strengthened capacity to prevent, detect and respond to health emergencies 	

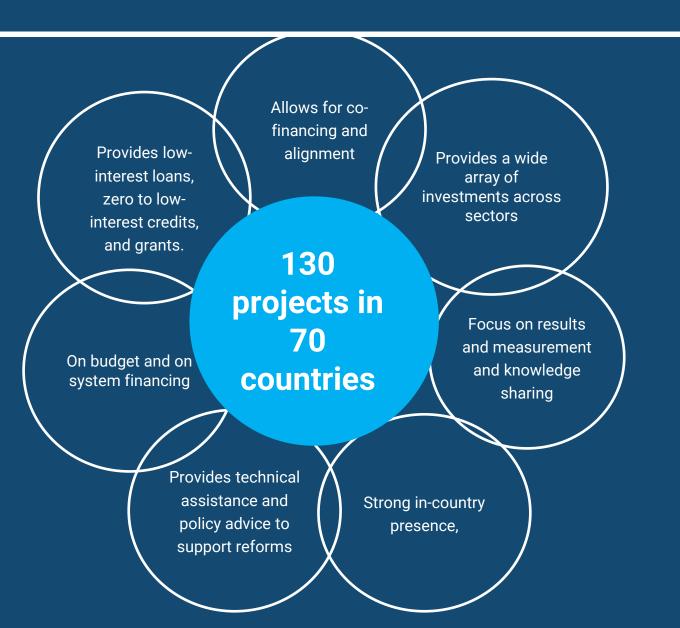


Building resilient health systems, governance and policies

- Global knowledge
- Lending, relationships with health and finance ministries,
- Investments in other sectors

\$16.8 billion (IDA)

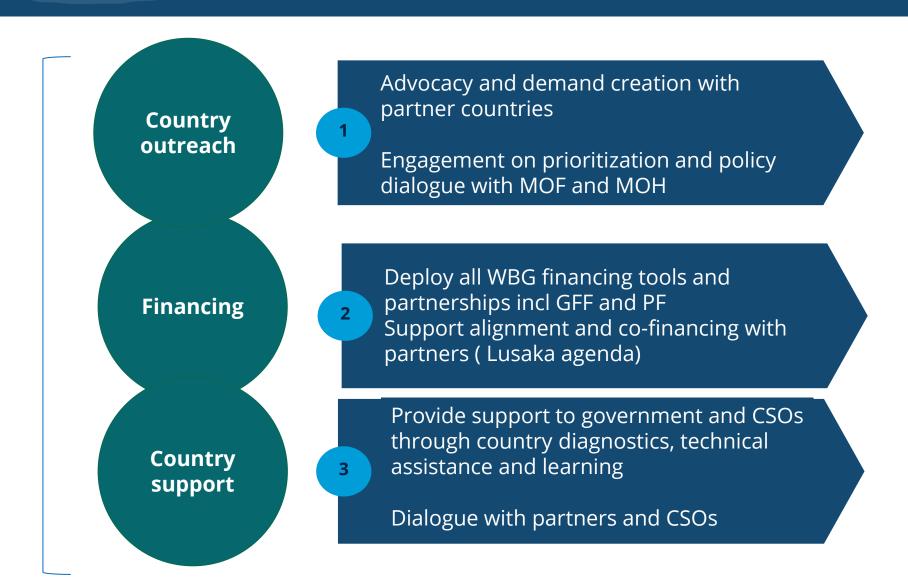






Engaging countries, partners and CSOs to identify bottlenecks and prioritize health systems investments

This will require engagement with countries analytical/diagnostics support, capacity building.





IDA 21 will pursue UHC by focusing on three pathways to reach more people

Expand geographical coverage

Expand scope of services to reflect new disease burden and demographic changes

Lower financial barriers to health care

With continued efforts to strengthen countries capabilities to better be prepared and respond to shocks and pandemics



As well as ensuring continued prioritization for financing at scale

HNP IDA commitments by year (US\$ billion)



Health operations have grown including post-covid

Active HNP portfolio =\$34 billion in over 100 countries

Active IDA portfolio in health= \$16.8 billion 130 projects in 70 countries

Geographies: 74 % towards Africa, 14% towards South Asia 14%



This will require a unique set of tools and instruments





IDA system efforts will be focused on helping countries achieve UHC goals

Goals

1. EQUITY

2. QUALITY COVERAGE AT SCALE

3. SUSTAINABILITY

Objectives

- Reduced financial hardship from out-ofpocket health care payments
- Hardest to reach accessing high-quality systems and services
- Policies in place that promote inclusivity
- Integrated delivery systems and services
- Adequate resourcing (incl. staffing, and commodities)
- Effective clinical care
- Well-managed, efficient, predictable and targeted financing for health
- Robust health systems governance and organizational capacity
- Risk-responsive and resilient systems

Desired impact

- Improved access, utilization, and financial protection, particularly for most vulnerable
- Reduced risk factors for health

 Improved coverage of quality essential health and nutrition services

- Health systems more resilient, adaptive and low-carbon
- More and better financing for health
- Enhanced institutional capacity



Differentiated approach based on country context

Lao PDR



- <u>Lao PDR Health Governance and Nutrition Development Project</u> helped increase coverage of reproductive, maternal and child health, and nutrition services in selected regions.
- **Tackled inequity** by boosting vaccination rates in 50 remote districts
- Increase in vaccinations rates (22% of measles and a 30% increase of DTP and hepatitis B).
- Following project Health and Nutrition Services Access Project (HANSA II) cofinanced by Gavi, the Global Fund and DFAT to promote alignment of partners

Nigeria



- The <u>Nigeria States Health Investment Project</u> contributed to significant improvements in maternal and child health services in participating states.
- Demonstrated **Results Based Financing** approaches can accelerate progress on health outcomes in Nigeria.
- Built **social accountability** through community management of health facilities and performance measurement of health outputs; and
- Invested in strengthening **monitoring and evaluation** (M&E) mechanisms



Differentiated approach based on country context

Mozambique



- Mozambique <u>Primary Health Care Strengthening Program</u> contributed to improving utilization of RMNCAH-N services.
- In 2022/23, the Ministry of Health reported that:
 - 67% percent of pregnant women had at least four antenatal visits during their pregnancy compared with 42% in 2017.
 - 58% of secondary and technical schools offered SRH services, compared to 32% in 2019.
- Supported health systems:
 - Incentivized **protecting government spending** in health, also in historically underserved areas.
 - Increased the number of **community health workers**, from 1,000 in 2018 to 8,300 in 2022.
 - Community access to health services expanded four-fold, from nearly 240,000 households in 2018 to an estimated two million in 2022.

Haiti



- Following earthquakes and hurricane, lingering political and institutional crisis
- Strengthening of <u>Primary Health Care and Surveillance in Haiti</u> Project (PROSYS) supported **rehabilitation of 180 health facilities**, reopened with improvements.
- Also included access to water and sanitation resources, the restoration of the cold chain material supplies, incinerators, a clean energy system, and a residence to house personnel working at night.
- Resulted in 3.5 million children being immunized, while also offering four prenatal visits and assisting deliveries to pregnant women in the targeted departments.
- Reinforced the epidemiological surveillance in the country at large.



Measuring outcomes, managing results and fostering accountability

More and better services

Policy Commitment (under draft)

Support at least one quarter of IDA countries to build human capital in the critical early childhood and adolescent years.

- Brings health within a broader Human Development agenda
- Focus on the two critical points in the life cycle for human capital accumulation: early childhood and adolescent years.
- Early Years: maternal and child health, nutrition in the first 2000 days.
- Adolescents: sexual and reproductive health services, keeping girls in school, support for disadvantaged youth

Corporate scorecard and target

Millions of people receiving quality HNP services

- Clear target: Provide 1.5bn people quality affordable health care services.
- Operationalizes a shift from # services to # people
- Expands the scope of services counted (in line with changing disease burden and commitment to universal health coverage)
- Introduces accountability to demonstrate quality of WBG investments



Measuring outcomes, managing results and fostering accountability

Better Pandemic and Crisis Preparedness and Response

Policy Commitment (under draft)

Support all active IDA countries to improve the crisis-readiness of health, education or social protection systems to limit disruptions in service delivery during shocks

- Crisis readiness of systems to shocks includes health emergency preparedness, prevention and response; of services and adaptive social protection
- Focus on the resilience of the underlying systems to support outcomes for People.

Corporate scorecard and target

Number of countries benefitting from strengthened capacity to prevent, detect and respond to health emergencies

- Measures progress at country level
- Eligible activities based on international recommendations AND WBG 'know-how'
- Includes strengthening country and regional core public health capacities, emergency-ready health care, regional manufacturing, and enhanced readiness
- Leverages Crisis Preparedness & Response Toolkit, IDA Crisis Window etc.)



Time bound opportunity to work with CSOs for the largest available global source of concessional financing to support health for all

Securing an ambitious IDA replenishment

Ensuring health is prioritised in budgets and policy dialoguewith countries

Enabling alignment of external financing behind country led plans incl multistakeholder engagement

Promoting system investments while prioritizing agendas (lagging behind (SRH, NCD)

