

FOREWORD FROM OUR LEADERS

2022 was an inflection point for Financing Alliance for Health (FAH): we were closing out the last year of our Growth for Impact Strategy and we were laying a strong foundation for our 2023 -2027 strategy.

We deepened our country engagement - supporting sub national governments, embedding for longer and securing additional budget lines.

We widened our financing solutions, designing and launching the ~\$100M Africa Frontline First Catalytic Fund (AFF-CF). We diversified our engagements with ~15 African member states through our collaboration with Africa CDC.

It was a year full of impact and learning! **Onwards to 2023.**









Nan Chen Board Co-Chair

Phyllis Heydt Board Co-Chair

Angela Gichaga

WHO WE ARE

We are an Africa-based, African-led and Africa-focused entity that convenes governments, funders, philanthropists, the private sector and communities to address systemic financing challenges to scaling community health systems for delivery of integrated primary healthcare services through country, regional and global partnerships.

OUR "HOW"

FAH addresses systemic financing challenges in evidence-based, highly impactful and scalable community health systems in Africa to improve access and utilization of health services, especially for women and children.

As trusted strategic and technical advisors, we have long-term partnerships with both Ministries of Health and Finance to develop different and changing financing sources that empower them to steward their local health systems to reach scale and sustainability, especially if we are to achieve universal health coverage.

We work at a country level through embedding teams and at the regional and global level through evidence generation, designing financing solutions and advocacy.



Partnered with the Global Fund and others to launch the Africa Frontline First Catalytic Fund, of

\$100M

that aims at creating 200,000 professionalized and integrated Community Health Workers (CHWs) across 10 countries by 2030 to expand healthcare coverage to 100 million people

KES 963M/

\$9.6M

Community Health Domestic

Nithi, Nakuru and Makueni)

Collaborated with Africa CDC as a technical partner to

capacity build government officials from

Budgetary Allocations in 5 Kenyan

counties (Laikipia, Nairobi, Tharaka

secured on FY 22/23 on



5,877

and receiving stipends in 3 Kenyan counties (Laikipia, Tharaka Nithi and Makueni)



145%

increase in Financial year (FY) 22/23 Community Health Domestic Budgetary Allocations in 3 Kenyan counties (Laikipia, Tharaka Nithi & Makueni)



\$123,000

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Domestic Budgetary allocations for CH and

1,160

CHWs recognized and paid in Togo



Governments engaged across Kenya (6 sub-national level governments), Zambia and Togo in empowering them to be the lead stewards of their Community Health (CH) systems.



community health strategies and

community health policy co-developed and used to advocate for CH policy wins and budget lines.



~1,000

Community health leaders capacity built through in person trainings on domestic resource mobilization



~ 1,300

online course enrollees from across 90+ countries equipped with the tools they need to build robust and sustainable community health programs





(including 3 executives) new core team members added to the team



AU member states on community health systems strengthening



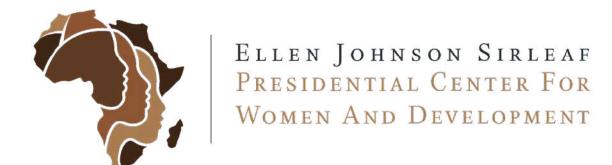
BIG PUSH TOWARDS CLOSING THE \$4.4 BILLION FINANCING GAP

We continue to dream big and advance our big ideas toward closing the community health financing gap, which is currently estimated at **\$4.4 billion**. We have made remarkable progress with the **Africa Frontline First Initiative** (**AFF**), our front-runner idea that will get us one step closer to bringing this gap down to zero.

AFF is a collaborative initiative that supports the financing and strengthening of integrated and sustainable community health service delivery to achieve *health for all*. Through unique partnerships between governments, donors, implementers and technical allies, AFF will institutionalize and scale **200,000 professionalized community health workers (CHWs) across 10 African countries by 2030.**



The AFF is championed by H.E. Ellen Johnson Sirleaf, the African Union and Africa-CDC







200,000
New professionalized
CHWS

100 Million

people with expanded Healthcare access

AFF Coverage in

10 countries

The core coalition members of AFF are the **Financing Alliance for Health, Community Health Impact Coalition, Community Health Acceleration Partnership,** and **Last Mile Health.** Financing Alliance for Health is AFF's originator and host organization.









PROGRESS MADE TO DATE

H.E. President Sirleaf in March 2022 officially launched AFF.

Since then, we have made significant progress:

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Africa Frontline First Launch

Africa Frontline First Initiative was officially launched by Her Excellency Ellen Johnson Sirleaf and Coalition of Partners at the second Global COVID-19 Summit and shared at World Malaria Day in Washington DC.



VAVAVAVAVAVAVA Financing

Initiated, designed and launched the AFF Catalytic Fund (Phase 1), reaching \$100M, funded by Johnson & Johnson and Skoll as philanthropic anchor donors with a Global Fund contribution and match.





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This fund will strengthen health systems supporting existing community health service delivery to improve quality and scale-readiness in up to 10 countries. (Press release & AP article, CGI commitment).

Scaling CHWs

Held a Scaling Community Health across Africa workshop with key stakeholders, including CHWs and representatives from the African Union, Africa-CDC, and Mastercard Foundation, to co-shape the concept of AFF's Phase 2 Scaling Mechanism.









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Political Prioritization

Shaped and agreed with the Africa-CDC



A Memorandum of Understanding on technical guidance, joint advocacy, and champions mobilization was signed with the Africa CDC.



Current AFF Partners

























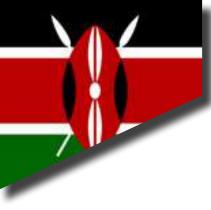
2022 COUNTRY ENGAGEMENT

We continued supporting governments in **Kenya, Zambia** and **Togo** as they move towards streamlining and scaling their CHW programs. Like many other African governments, these governments face **significant barriers**, including **building political prioritization**, **developing policies**, **mapping resources**, **establishing financing strategies to mobilize resources**, and **scaling** robust, sustainable primary healthcare systems.

We also continued to support these governments to leverage the existing community health funds better and mobilize new funding for solid and effective health systems.

In 2022, FAH expanded to **three** more sub-national governments in **Kenya**; Nakuru, Nairobi and Nyeri, and continued to support Laikipia, Tharaka Nithi and Makueni, bringing our total engagement of sub-national governments in Kenya to **six**.





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Makueni County



In 2022, FAH supported the finalization of the **County** Community Health Policy and the County Community **Health Strategy.** These 2 documents further institutionalize community health within the health system in the following ways:







Filmed a docuseries to amplify the CHV voices 'a day in the work of a CHV" Allocation of motorcycles for promotion of rural transport network for the CHVs



3,512 Community Health Volunteers (CHVs) were recognised and professionalised through payment of a stipend amount of KES 2,000 (\$20) per month and all equipped with reporting tools and service delivery



Promotion of income-generating activities for Community Health Units e.g. the establishment of a savings and loans association for the CHVs

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Laikipia County



In 2022, FAH supported the finalization of the Laikipia County community health strategy **plan 2021-2025**, which led to:



+42% in CH budget allocation in FY 2022/23 to KES 45.5M (\$455K)





600 Smartphones allocated



650 CHVs trained

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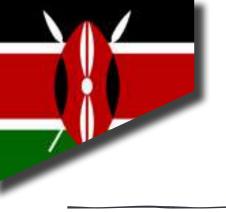


CHVs were recognised, professionalised through payment of a stipend amount of KES 2,000 (\$20) per month and all equipped with reporting tools and service delivery



Formation of a community health technical working group

of households enrolled to the NHIF



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Nairobi County



The gap: Nairobi County has a total of 6,250 community health workers who work in the more than 1,000 health centers across all 85 wards in the capital city. The county has made and continues to make significant progress in its community health work with the passing of the Nairobi City County Community Health Services Act, which stipulates

that CHVs within the county are to get at least KES 500 per month for the NHIF cover and a monthly stipend of KES 3,000.

Despite the efforts made so far in streamlining CHW in the county, **robust** policies and implementation plans are needed to ensure continuity, sustainability and proper governance.

In 2022, FAH thus:



Supported in validating the **draft community health implementation plan and costing** which will further cement the strides made in the county toward achieving UHC



Supported consolidating of the draft Nairobi County
Integrated Development Plan (CIDP) 2023-2027,
putting together sector priorities for the
next five years. Investment in community health
featured prominently in the CIDP



Tharaka Nithi County



In 2022, FAH supported the finalization of the **Tharaka Nithi County community health strategy plan 2021-2025**, which led to:





1,265CHWs trained

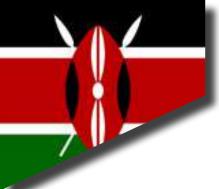
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1,265
were recognised professionalised through

CHVs were recognised, professionalised through payment of a stipend amount of **KES 3,000 (\$30)** per month and all equipped with reporting tools and service delivery



Partnership coordinating committee engagement framework developed



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Nyeri County



Despite the advanced efforts in ensuring the county achieves its UHC agenda, the county is in need of an implementation plan, an investment case as well as a resource mobilization strategy and thus where FAH is engaged.

In 2022, FAH:



Secured the engagement letter and signed an MoU with the county



Facilitated an **entry meeting** with the county executives to discuss CHS intervention areas



Facilitated a **stakeholder's forum** to align on the county's health priorities and stressed on the need to have CH at the center of it

>> This sets the pace for FAH to begin its foundational work with the county, which involves co-developing a **Community Health Strategy** and **Policy** to ensure the effective administration of CHWs in the county.







Nakuru County

In 2022, FAH:



Provided technical support in the development of the draft community health implementation plan 2022-2027

Facilitated a stakeholders' forum of

70

participants to conduct CH situational analysis, resource mapping and mobilization, investment case development, advocacy for CH financing and capacity strengthening in CH financing and Public Finance Management (PFM)

Developed and held a validation workshop of

54

☐ ☐ participants constituting partners and the **county department**of health for the five-year costed community health implementation plan



Finalised costing of the five-year implementation plan

>> The community health implementation plan is ultimately set to provide more structure to the CHW program and streamline policies such as the amount of stipends the CHWs should receive as well as the frequency.

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Togo

In Togo, FAH supported:

>> User fee elimination for maternal healthcare services through the 'Wezou' program: The 'Wezou' Program is a Togolese government initiative through the Ministry of Health that seeks to increase access to health care for expectant mothers and young children by removing the cost of care for maternal and child health services – a critical barrier to access. At the initiation stages, FAH, through an ecosystem of partners, supported the Ministry of Health to co-develop a detailed road map for the user-fee elimination program.

Further, we have proposed a catalog of indicators for regularly monitoring the implementation of the "Wezou" Program.

As at the end of December 2022, 100% of health facilities in Togo were offering the program services and had enrolled 99,760 pregnant women. Additionally, 138,623 women benefited from the program services.

- >> Community health systems strengthening: FAH supported the data entry, cleaning, and analysis collected by the Community Health and Elderly Division as part of the mapping of CHWs in preparation for the implementation of a pilot CH approach in two regions of the country.
- >> Further, FAH has supported the Ministry of Health in carrying out the **technical and feasibility study options for professionalising**CHWs in Togo to develop a strong investment case for institutionalising CHWs in the country.
- >> At the request of the Minister of Health in charge of Universal Access to Health Care, FAH **studied community health in Burkina Faso**, intending to inform the Government's analysis of CHW professionalization options for Togo.
- >> FAH, alongside the Togolese Government and other partners such as UNICEF, Integrated Health, Malaria Consortium, AMP Health and Global Fund, organized a workshop to analyze the CHW harmonization and optimization process results. They also identified options for the new CHW format in Togo.











99,760 pregnant women enrolled

100%
health facilities
offering Wezou
program services

138,623
women benefited from
Wezou Program

COLLABORATION WITH THE AFRICA-CDC

FAH continues to gain recognition and cement its position as a **thought leader** in Community Health Systems strengthening in the continent and beyond. The year 2022 has seen us gain recognition as the go-to experts on CH financing:





At the sidelines of CPHIA 2022, AFF and ACDC signed a Memorandum of Understanding formalizing a partnership that will expand the professional community health workforce across Africa. Together with Africa CDC, the African Union's Department of Health, and the African Union Covid-19 Commission, we hope to advance the African Union's 2 million Community Health Worker initiative. Our joint efforts will hopefully catalyze a new level of investment in community health, secure and sustain political commitments to community health across African Union Member States, and bolster Africa CDC's role supporting member states to build high-quality community health systems at the national level.



Operationalization of the Lusaka Call-To-Action to Strengthen Public Health Emergency Operations Centers in African Union Member States

Despite progress in CH programming and systems strengthening, financing and sustainability remain significant challenges. Only some Africa-CDC member states have investment cases to support resource mobilization efforts. Over half of the member states still use paper-based systems for data collection, few have cost policies and guidelines to support implementation. Member states also have different understandings of the policy utility of each policy document required to guide the implementation of CH programming.

With this highlighted need for technical and financial support in strengthening and building resilient community health systems for its member states, the Africa-CDC thus called on FAH to participate in two workshops held in Libreville, Gabon and Lusaka - Zambia on strengthening public health emergency operations centers.



At the workshop, FAH presented the case for investing in Community health workers/programs, the crucial role CHWs play in improving healthcare and why investing in CH is essential to any country working towards achieving UHC.

To further build the capacity of its member states in strengthening integrated and sustainable community health systems and workforce in the African continent, the AU and the Africa CDC called on FAH, in collaboration with regional partners (UNICEF, Last Mile Health, Living Goods, & TIP Global Health), to steer a five-day capacity-building workshop in Accra, Ghana and another one in Nairobi, Kenya. Each of these workshops workshops were organized for over 15 AU member states, including Burundi, Congo Republic, Cotedlyoire, DRC, Egypt, Gabon, Ghana, Guinea Bissau, Saotome Principe, and Sierra Leone.

Some countries have since sought FAH's assistance, e.g. Mali directly requested the help of FAH in developing their CH Investment case, while other countries like Senegal and Liberia also asked for the support of FAH in developing their CH investment cases and resource mobilization strategies.









+30
AU Member States
Capacity Built

Addis Ababa High level meeting on Community Health

The ACDC invited FAH to participate and engage in a high-level meeting with the **Ministers of Health from the member states** and share experiences on community health financing, including our support and approach to developing unique models for community health financing.

This engagement focused on rallying member countries to invest in strengthening community health systems by professionalising the community health workforce. All the 50-member states were represented, and there was also representation from several other partners - Living goods, Last Mile Health, Tip Global Health, IFRC, Roche, UNICEF, WHO, and UNAIDS.

















INSTITUTIONAL CAPACITY & SUSTAINABILITY

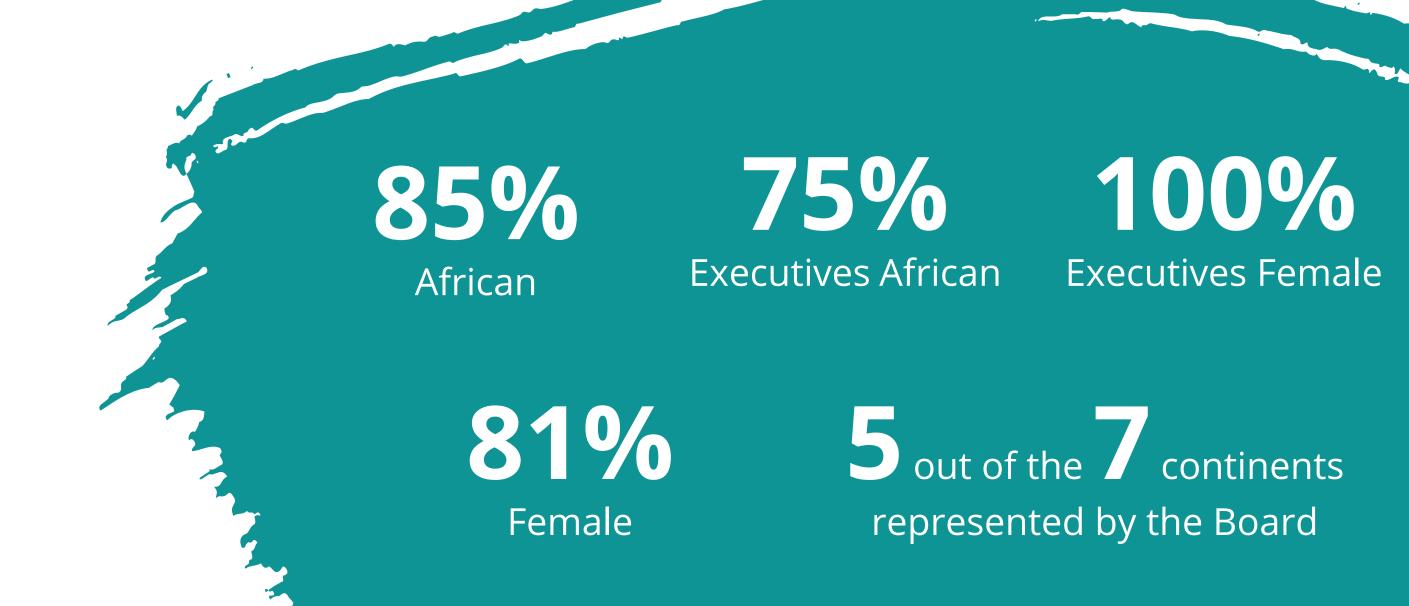


Our success depends on the quality of our people. That's why we've made it a priority to build a culture that rewards high performance, nurtures talent, and encourages everyone to bring their best and authentic self to work. From an initial team of 3 employees, we have grown over the years to the current diverse team of ~30 spread across Kenya, Nigeria, Côte D'Ivoire, Burkina Faso, Zimbabwe, Cameroon, China, India, USA and Canada.

As at the end of 2022, our core executive team included an executive team of 4 members composed of the AFF Chief Operating Officer, Head of Country Programs, Head of Operations & Risk and Head of Partnerships, Development & Advocacy.

FAH staff have great professional and technical skills drawn from first-hand life experience, public and private sector experience as well as health and finance experience in a developing context.

But more importantly, we ask questions, get things done and work together. Our work environment is fun, flexible, and inclusive with plenty of opportunity for growth.



EAH AWARDED 2022 SKOLL AWARD



In 2022, the Financing Alliance for Health was one of the five organizations to win the prestigious **2022 Skoll Award for Social Innovation.** The Skoll Foundation is known for its incredibly thorough due diligence and they verified that we are on a path to create as much human impact as the best organizations in the world.

Beyond this incredible boost of assurance, it's a great honor and an equally great responsibility that was bestowed on us. This award signals that the work of bringing healthcare closer to communities matters.

Additionally, it recognizes that with the right mix of public, private and philanthropic funding options, governments who are the stewards of the

public health system can and will continue to **invest in strong community health systems** as a scalable and sustainable pathway to achieving universal health coverage.

Further, it underscores the incredibly important work of community health workers who are **communities' first line of defence** against death, disease and pandemics. It's a huge responsibility because it means that FAH's work to narrow the ~\$4.4B funding gap for community health must continue in earnest. We are energized by this responsibility and continue with a laser focus towards expanding our footprint and to serving African governments in their quest to ensure **#health4all.**



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