Financing Alliance for Health

2023 – 2027

Transforming financing for impact at scale

FAH’s Community health systems strengthening strategy for scale and sustainability

2023 – 2027
FAH’s Strategy for 2023-2027: Transforming financing for impact at scale

WHO WE ARE

We are an Africa-based, African-led and Africa-focused entity that convenes governments, funders, philanthropy, 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.

Financing Alliance for Health (FAH) believes that financing is a key lever in driving greater integration of health services. We will strengthen health services by scaling up and integrating financing for community health, primary health care, global health security and universal health coverage.

OUR VISION

Mobilize financing to improve health for all.

OUR MISSION

We partner with governments on all steps of financing to strengthen and sustain community health systems and integrate primary health care to attain universal health coverage (UHC).

OUR VALUES

• Respect and trust are the basis of our relationships;
• We challenge and disrupt the status quo for impact;
• We are curious, passionate and effective in our approach; and
• We are driven to support the well-being of communities.

OUR VALUE PROPOSITION

Mobilize US $1 Billion of finance to integrate and scale community health into health sector strategic plans, primary health, global health security to advance universal health coverage.
OUR “WHAT”

We are re-orienting health systems to ensure that they are responsive to preventable disease burdens and beneficiaries are active participants and orchestrators of their health journey via community health systems.

We focus on systems, scale and sustainability throughout the cycle of our work by entrenching the role of government as the stewards of public health systems and by serving them exclusively. Through governments, we engage and crowd in other players.

We are challenging the trend of “who should be the drivers of international development in Africa” by ensuring our team is predominantly young, female, and from the global south.

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 the 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. We ensure country experiences are elevated to a global stage and that global best practices are contextualized locally, as exemplified by our Africa Frontline First initiative.
FAH’s Strategy for 2023-2027: Transforming financing for impact at scale

Since our launch in 2016 and full time operations in 2017, FAH has consistently and exclusively focused on systems change - directly serving and embedding teams within African governments to facilitate country led conducive policies and secure domestic budget lines towards increasing access and utilization of quality health services at the community level.

We support Ministries of Health, who set the technical health agenda and Ministries of Finance, who avail the necessary domestic resources for longer term sustainability.

With a laser focus on health financing, we have leveraged our teams’ experience in the public, private, finance, and investment banking sectors to build expertise and a track record on investment case development, resource tracking and mapping, resource mobilization, structuring of financing mechanisms and approaches for at-scale community health financing.

COUNTRIES OF PAST AND ONGOING ENGAGEMENT

Learn more about our country engagement here
In the past five years of existence, we have made strides working with different levels of government to tackle issues using both a country-led bottom-up and a globally supported top-down approach.

In collaboration with the ecosystem, we have focused **US$ 0.5 billion** on community health systems, increased opportunities for **450,000** community health workers in policy and programs, developed **6** community health strategies, **8** investment cases and financing policy briefs while training and empowering approximately **4000 stakeholders** across **90+ countries** on health financing and public finance management.

Partnering with the Global Fund and others to launch the Africa Frontline Fund Catalytic Fund, of **US$ 100 million**, with current investment of **US$ 25 million** from the private sector and future Global Fund (GF) and country match. Furthermore, we have developed in-depth insights by aggregating primary government data on community health systems.

Since our inception, we have supported **17 governments** at the national and sub-national levels, across **12 countries**. Having worked across West, East and Southern African countries, we continue to prove that our model of support is impactful regardless of archetype of country i.e. geographical location, socio-economic status, language etc.

The ecosystem has leveraged our data, **evidence, and publications** to strengthen the case to scale community health systems and to demonstrate that governments have and continue to increase their **financial and in-kind contributions** to this scaling.

As an entity, we have strengthened our institutional capacity to facilitate scaling our impact. In our first 5 years of existence, we have already transitioned out of fiscal sponsorship and registered **2 entities**; our **global headquarters in Kenya** and an office in the USA. The team has diverse skill sets across public, private, finance and investment banking sectors. **80% of the executive leadership** is African and female, and **80% of the day-to-day team** is female and under **35 years**. With a global board and council that represents **5 of the 7 continents** and a Government Advisory Group constituted of former African government officials, we bring the best of global and local insights to the governments we serve.
HEALTH SYSTEM CHALLENGES, TRENDS & OPPORTUNITIES

African countries rely heavily on donor support to finance healthcare systems. International and domestic funding is insufficient and inaccessible, hence many countries’ community health programs remain fragmented and trapped in pilot and sub-scale phases.

FAH demonstrated a **US$ 4.4 Billion** annual funding gap for at-scale community health systems in Africa. Despite their efforts, governments only contribute **40%** of the total funding within the sector. Available donor funding is significantly fragmented across vertical, disease-specific Community Health Worker (CHW) programs that are more costly and less efficient than horizontal, integrated programs.

National governments that seek to streamline and scale CHW programs face significant barriers including building political prioritization, developing policies, mapping resources, and establishing financing strategies.

Trends and Opportunities

Building on our experience and expertise in community health, we are widening our approach to encompass primary health care, which will, in turn, benefit community health. We will anchor much of our strategic vision and roadmap on our financing expertise based on:

- Growing **new sources** of funding for global health, new global financing initiatives and innovative finance.
- Increasing focus on the **social determinants** of health, inter and multi-sectoral health.
- Demand for **improved utilization** of limited funds.
- Strengthen **domestic resource mobilization** and explore diverse funding sources (blended finance, private sector, debt conversion, risk pooling).
- Integrate **community health** into primary health, global health security and universal health coverage to access a larger pool of funding and ease resource tracking.
- Increase **collaboration** across diverse ecosystem players.
VISION & STRATEGIC PRINCIPLES

Over the next five years, we will strengthen community health systems and the continuum of primary health care.

What we want to do:
Over the next five years, FAH will seek to strengthen and sustain its impact on developing community health systems by leveraging the global and country focus on primary healthcare systems.

Why we chose this pathway:
Building on our experience and expertise on community health, we are widening our approach to also encompass primary health care which will, in turn, benefit community health. Given the limited and fragmented resources within the CH space, there is a need to move upstream into primary health care. As a result, more resources will be directed to the community health system.

Strategic principles

These strategic principles are the core guiding elements and underlying assumptions upon which this strategy has been designed on:

**PARTNERSHIPS**
Focusing on sector-level partnerships and collaborations in order to pursue a wider scope of opportunities, and reach impact goals, while maintaining a lean team.

**SYSTEM-LEVEL CHANGE**
Pursuing system-level opportunities that take advantage of the market trends that fosters integration with HRH and wider health space.

**MULTI-SECTORALITY**
Taking an approach that leverages the intersection of community health across multiple ministries and sectors beyond just health and finance.

**STORYTELLING**
Ensuring that the strategic approach leans on effective storytelling and messaging in a way that gives clarity to the full spectrum of FAH capabilities.

**SCALE AND GROWTH**
Scaling in a way that focuses on deepening existing national level growth and expansion of existing country footprint.

**SUSTAINABILITY**
Diversifying fundraising avenues and opportunities, as well as investing in organizational capacity and a strong leadership team, in order to secure long-term sustainability.
FAH’s COMMUNITY HEALTH SYSTEMS STRENGTHENING STRATEGY 2023 -2027

Over the next five years, FAH will seek to strengthen and sustain its impact in developing community health systems by leveraging the global and country focus on primary healthcare systems, global health security and universal health coverage. We will advance community health systems that are resilient, integrated, scaled, sustainable and enabled through:

**Strategic themes**

1. **Strengthen the continuum of the PHC framework** by expanding our service packaging and enhancing community facility referral systems, supply chains and HRH mechanisms.

2. **Catalyze universal health coverage** by using the learning of financing community health systems to fund universal health coverage at large through exploring different sources of financing.

3. **Integrate community health workers into HRH** by elevating community health voices, advocating for community financing and driving community accountability using CHWs in the system.

4. **Contribute to the global health security agenda** by showcasing community health’s value and role in pandemic preparedness & overall disease tracking and management.

5. **Driving knowledge generation** by boosting capacity building and thought leadership efforts internally and more broadly in the ecosystem.

6. **Elevate ecosystem partnerships** by embracing our role as system convener to create stronger ecosystem collaborations.
### FAH’s STRATEGIC PILLARS, STRATEGIC OBJECTIVES & OUTCOMES

<table>
<thead>
<tr>
<th>STRATEGIC PILLAR</th>
<th>STRATEGIC OBJECTIVE</th>
<th>OUTCOMES</th>
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</thead>
<tbody>
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<td><strong>THE MONEY:</strong> the top-down global funding flows, mechanisms and approaches</td>
<td>• Increase the amount, mix and alignment of community health funding to reduce the annual $4.4 Billion funding gap in Sub-Saharan Africa</td>
<td>• US $400M by Africa Frontline First (AFF) mobilized towards community health through:  - successful deployment of AFF Catalytic Fund in 5 new countries with a target of US$ 60-100M  - US $300M mobilized through AFF Phase 2 design and implementation  • US $20M deployed through additional financial mechanisms and approaches</td>
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<td><strong>THE POLICIES:</strong> the bottom-up policies and domestic resources</td>
<td>• Demonstrate practical paths to achieving sustainable community primary and community health financing.  • Drive inclusion of community health systems into the primary health and global health security agenda through financing.</td>
<td>• 3 countries have included community health costs into the UHC, PH and GHS policies.  • US $15 million secured on domestic budgets from Ministry of Finance and from in country stakeholders.</td>
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<td><strong>THE SKILLS:</strong> the health financing thought leadership and capacity building</td>
<td>• Position FAH as go-to expert on primary and community health financing across Africa.</td>
<td>• 3000 new and diverse stakeholders upskilled on health and financing 1 publication that Codifies implementation of AFF into a white paper</td>
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<td><strong>THE PEOPLE:</strong> the partnerships and collaborations</td>
<td>• Embrace our role as ecosystem convenors</td>
<td>• Develop global goods such as roadmaps for community health financing sustainability  • Refining and harmonizing the investment case language for diverse stakeholders</td>
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<tr>
<td>STRATEGIC PILLAR</td>
<td>HIGHLIGHTS OF KEY ACTIVITIES</td>
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<td>PHASE 1: (2023-2024)</td>
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<td>• Implement the Africa Frontline First Catalytic Fund.</td>
<td>• Explore interventions that will contribute to the reduction of Object-oriented programming (OOP) spending on health.</td>
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<td>• Pursue a financial model transaction that leverages private capital by initiating the Community Health Incubator/ Accelerator Challenge Fund.</td>
<td>• Design 1 additional innovative financing mechanisms that are complimentary to Africa Frontline First.</td>
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<td>• Implement the Africa Frontline First Scale Up Fund.</td>
<td>• Influence policies in regional and global implementing agencies by elevating the local/ country level community health experiences to impact system strengthening and finance.</td>
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<td><strong>THE POLICIES:</strong> the bottom-up policies and domestic resources</td>
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<td>• Ensure community health policies and financing exist and are included into the PH, UHC, and GHS policies.</td>
<td>• Integrate community health and primary healthcare interventions into local health insurance/ health risk pooling mechanisms.</td>
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<td>• New engagement strategies defined and deployed for Ministry of Finance, private and multi-sectoral partners.</td>
<td>• Harmonize policy &quot;asks&quot; for community health strengthening at country and regional level.</td>
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<td>• Engagement of 1 new country with continued support to our existing countries.</td>
<td>• Engagement of 1 - 2 new countries with continued support to our existing countries.</td>
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<td><strong>THE SKILLS:</strong> the health financing thought leadership and capacity building</td>
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<td>• Expand uptake and delivery of FAH training curriculum.</td>
<td>• Curate on-demand content for relevant audiences, e.g. masterclasses, trainer of trainers etc.</td>
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<td>• Upskill policy makers and health leaders on public finance management.</td>
<td>• Build out the global knowledge hub with thought pieces, evidence, stories from the front lines.</td>
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<td>• Strengthen cross-country learning through communities of practice.</td>
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<td>• Embrace our role as ecosystem convenors.</td>
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<td>• Refining and harmonizing the investment case language for diverse stakeholders</td>
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*The phased approach is to cater for the transition in the expansion of our scope. The phases will be overlapping throughout the strategy period but with different weighted focus areas*
FAH`s STRATEGY BIG BET:
Africa Frontline First Initiative

As the originator and seed investor in the ideation of the Africa Frontline First Initiative, FAH will continue to co-lead the successful implementation of this tri-phased approach, while still serving as fiscal sponsor of the overall initiative. From our experience, investment and implementation excellence are strongly linked: therefore, the Africa Frontline First initiative will continue to be a key anchor of our work over the next five years as we transform the financing and operational excellence of integrated community health systems in Africa alongside ecosystem partners.

What is the Africa Frontline First (AFF) Initiative?
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 community health workers across 10 African countries by 2030.

AFF was formed with the firm belief that Community Health Workers (CHWs) are the key investment to deliver health for all.

What challenge is AFF trying to Solve?
Three fundamental issues limit the scaling of CHWs, a key driver of universal health coverage:

- Insufficient financial commitments towards community health $2-4 billion annual funding gap.
- Inefficiency of existing financing due to fragmentation across disease programs and siloed projects leading to low value for money for all funders.
- Insufficient global political prioritization of community health and domestic resource allocation.

What will AFF do?
Anchored in each country local context and health reform journey, AFF will:

- Reduce morbidity and mortality through the prevention, vaccination, testing and treatment of infectious diseases.
- Advance health security through integrated digital disease surveillance to prevent, detect and respond to emergent infectious threats.
- Accelerate economic recovery through a compensated workforce that contributes to the formal economy and elevates the role of women.

Impact Goal
AFF Coverage: ~10 countries
New professionalized CHWS: ~200,000
Expand healthcare access: ~100 million people

How will AFF reach these goals?
AFF works across three pillars:

FINANCING
Develop sustainable funding mechanisms that better leverage investments to achieve lasting impact.

POLITICAL PRIORITIZATION
Influence agendas & engage champions to prioritize community health institutionalization & financing.

COUNTRY LEADERSHIP
Partner with countries to align international financing with national community health goals.

Our Africa-led initiative is championed by H.E. Ellen Johnson Sirleaf, the African Union, and AFRICA-CDC

As AFF is a collaborative initiative, partners are invited to join this global initiative. AFF’s core partners are Financing Alliance for Health, Last Mile Health, Community Health Acceleration Partnership and Community Health Impact Coalition.

Phases of AFF Initiative
Phase 1: The AFF Catalytic Fund (AFF-CF) is the first phase under AFF. Hosted by the Global Fund, the AFF Catalytic Fund aims to mobilize $60-100 million in community health investments by 2024, which includes a 1:1 matching funds from Global Fund grants. The fund was publicly launched: https://bit.ly/3T1qYan

Phase 2: Implementation and execution to fund the training and deployment of 200,000 professionalized community health workers across 10 countries.

Phase 3: This will focus on increasing domestic resources and commitments to sustain community health delivery and financing gains.
Our work will **advance resource mobilization** for community health, **create economic opportunities** in policy and practice while increasing **health service access and utilization**. We will measure our performance based on programmatic targets and indicators in order to track our progress and impact. We will leverage quantitative and qualitative data to understand direct attribution as well as contribution to the ecosystem.

### THE MONEY: the top-down global funding flows, mechanisms and approaches

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<tr>
<th>Indicator</th>
<th>Disaggregated by</th>
<th>2023 - 2027 Target</th>
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</table>
| • Reduced annual community health funding gap. | Source of funding, Type of funding | • US $ 400M total directed by AFF towards CH:  
  - 5 new countries of successful deployment of AFF Catalytic Fund, with a target of US $60 - 100.  
  - US $300M focused through AFF Phase 2 design and implementation.  
| • Reduced out-of-pocket spending per household in FAH focus countries. | Country | • 10 qualitative stories from household visits, in 5 countries, 2 per year. |
| • Developed and deployed FAH initiatives, frameworks and mechanisms to increase funding directed towards CH. | Country | • AFF Catalytic Fund successfully deployed in 8 new countries. |
| • Number of diverse CH funding sources and mechanisms developed by FAH. | Country, Type of good and initiative | • 2 developed products: blended finance products, debt conversion agreements) & leveraging private sector/ new pipeline/ risk pooling. |

### THE POLICIES: the bottom - up policies and domestic resources

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<tbody>
<tr>
<td>• Governments and agencies prioritize CH and CHWs in policies, plans and budgets.</td>
<td>Country, Health policies, annual plans &amp; budgets</td>
<td>• 3 new governments specifically referring to CH and CHWs in the budget lines and policies.</td>
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<tr>
<td>• Increase in funding to CH by host governments/ other stakeholders.</td>
<td>Country</td>
<td>• US $15 million secured on domestic budget lines.</td>
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</table>
| • Increased number of CHWs recognized in government policies and programs. | Country, Gender | • 500,000 new CHWs recognized in policies and programs (FAH).  
  • 200,000 new CHWs recognized in policies and programs (AFF). |
| • Increased number of governments with costed CH strategies and policies. | Country | • 3 new governments with costed CH strategies and policies. |
| • Clear and well developed investment case for CH to be used to advocate for CH policy wins and budget lines. | Country, Sector of agency/ ministry, ICs and engagement strategies | • 5 new investment cases developed (ICs).  
  • 1 new engagement strategy defined and deployed for MoH and MoF.  
  • 1 new engagement strategy defined and deployed for multi-sectoral partners. |
<p>| • Number of new partnerships with implementing agencies. | Type of agency, Focus/sector of agency | • 4 new strategic partnerships secured to advance on PHC, UHC, GHS and HR for health agendas. |</p>
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<td>• Actors in CH space equipped with CH and PHC financing knowledge.</td>
<td>• Expanded pool of community health financing experts in a community of practice</td>
<td>• 70% of CH actors integrating CH finance knowledge and understanding in their interventions and reporting (based on survey responses).</td>
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<td>• Results from Kirkpatrick training evaluation model: Level 3 (behaviour) and Level 4 (results) indicators.</td>
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<td>• Developed training content for knowledge sharing with wider ecosystem.</td>
<td>• Size of audience receiving FAH developed on-demand content.</td>
<td>• 2,000 registrations for on-demand content (e.g.: masterclasses, trainer of trainers, etc).</td>
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<td>• Number of stakeholders upskilled including policy makers and health leaders.</td>
<td>• 3,000 new diverse stakeholders upskilled on health financing.</td>
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<td>• Country</td>
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<td></td>
<td>• Base sector of CH financing experts</td>
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<td></td>
<td>• Ministry of origin</td>
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**THE PEOPLE: the partnerships and collaborations**

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<th>Indicator</th>
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<tr>
<td>• Positioning of FAH as systems convenor and thought leader.</td>
<td>• Number of thought pieces, evidence, stories shared &amp; utilized globally.</td>
<td>• 2 third-party referrals of FAH developed content.</td>
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<td>• Number of high-level champions engaged – discussing FAH &amp; AFF work.</td>
<td>• 20% increase in number of third-party engagements through FAH social media channels.</td>
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<td>• Country</td>
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<td></td>
<td>• Type of initiative</td>
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<td></td>
<td>• Social media platform shared</td>
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<td>• Developed and validated global goods and learning engagements.</td>
<td>• Number of governments utilizing CH Financing AIM tool.</td>
<td>• 5 new governments utilizing FAH’s CH Financing AIM tool.</td>
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<td></td>
<td>• Number of cross-country learning engagements.</td>
<td>• 5 new cross-country forum convening actors in the CH space.</td>
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<td></td>
<td>• Number of thought pieces, evidence &amp; stories curated.</td>
<td>• 2 new white paper on AFF/ FAH work.</td>
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<td>• Topic area</td>
<td>• 50 CHW articles, blogs published.</td>
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<td>• Type of journal</td>
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<td></td>
<td>• Theme of written piece</td>
<td>• 1 piece published in academic journal publications.</td>
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<tr>
<td></td>
<td>• Number of FAH pieces published in academic journals.</td>
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**THE SKILLS: the health financing thought leadership and capacity building**

Goal: Position FAH as go-to expert on primary and community health financing across Africa
“In a complex world full of risks, from pandemics to climate change, functioning health systems increase safety, trust and peace in poor communities. But to function well those health systems need appropriate financing. We position ourselves to be next to governments, with one eye on how to best use health financing, and another eye on how to get more financing to build better societies.”

~Anonymous
FAH`s Strategy Implications and Resource Needs

As a **systems orchestrator**, FAH will continue to be **demand-driven** and primarily serve public sector clients (governments, African institutions). FAH will be responsive to government requests while maintaining a lens on geographical, language and socio-economic diversity of the countries we serve.

FAH will continue to be an **African-headquartered** organization, with a team that understands and is **representative of the populations we serve**: predominantly young, African and female.

We will continue to deepen and **diversify our skill sets** across the health systems, health finance and investments value chain. FAH anticipates to have 50 team members by the end of the strategy period.

We will expand and revise our statement of work to provide clarity on our service packages that will integrate community health financing into primary health, global health security and universal health coverage agendas, enabled by technology, while remaining nimble, agile and adaptable to the needs of governments.

FAH will forge new strategic partnerships across bi-lateral & multi-lateral organizations, implementing agencies and funders.

We will refine and communicate FAH’s story and impact consistently, concisely and comprehensively.

FAH will entrench programmatic, operational and financial resilience and sustainability within our Kenyan and USA entities.

We estimate executing this strategy will require approximately **US$ 5.5 -7 million** per year, totaling **US$ 35 million** over 5 years. We anticipate that these costs will be covered by a combination of revenue from philanthropic funders, bilateral and multilateral grants and revenue from on demand content. Allocation of funds across objectives will vary based on funding availability and country priorities.
FAH's Community health systems strengthening strategy for scale and sustainability

We are an Africa-based, African-led entity that convenes governments, donors, private-sector and communities to address systemic financing challenges to scaling primary and community health programs at country, regional and global levels.

Our achievements over the past five years:
- Focused US$ 0.5 Billion to community health systems.
- 450,000 community health workers recognized in policy and programs.
- 6 Community Health strategies developed in 6 governments across 4 countries.
- 8 investment cases and policy briefs developed in 8 governments across 7 countries.
- 4000 stakeholders trained and empowered on health financing and public finance management.
- Launched the Africa Frontline First Initiative, having the AFF Catalytic Fund Phase 1 launched to be US$ 100M, with current investment of US $25M from private sector for Global Fund and country match.

We have learnt that we need to:
- Strengthen domestic resource mobilization and explore diverse funding sources (blended finance, private sector, debt conversion, risk pooling).
- Integrate community health into primary health, global health security and universal health coverage to access a larger pool of funding and ease resource tracking.
- Increase collaboration across diverse ecosystem players.
- Frame and elevate FAH work and impact story better.
- Diversify the skills mix and modus operandi of the team.

We are aware of the need to adapt due to evolving ecosystem trends:
- Increased financing for universal health coverage, global health security and integrated health systems.
- Growing new sources of funding for global health, new global financing initiatives & innovative finance.
- Increasing focus on the social determinants of health, inter and multi-sectoral health.
- Demand for improved utilization of limited funds.

Strength:
- Systems orchestrator particularly focused on public sector strengthening.
- Sector expertise in community health financing and innovative financing design.
- Embedded government support and cross-ministry convening.

Area of improvement:
- Imbalance between outputs and direct resource mobilization.
- stretched team due multiple priorities, leading to burn out.
- Lack of clarity in communication of FAHs value proposition, impact and in-country visibility.
- Sub-optimal sharing of knowledge gained, i.e., primary data collected.

Opportunities:
- Need for broadened FAH country footprint.
- Need for stronger links between community health and global health security.
- Need for strengthened frameworks for government paths to universal health coverage.
- Need for diversified funding options.

Potential threats:
- Decline in government budget support.
- Fragmented funding landscape limiting investment into integrated systems.
- Future pandemics & priorities disruption.
- Change in political leadership.
Financing Alliance

For Health

FAH's Strategy for 2023-2027: Transforming financing for impact at scale

5 Year Strategy Snapshot in Brief

Over the next five years...

FAH will seek to strengthen and sustain its impact in developing community health systems by leveraging the global and country focus on primary healthcare systems

**THE MONEY:** the top-down global funding flows, mechanisms and approaches

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<td>• Implement the Africa Frontline First Catalytic Fund.</td>
<td>• Explore interventions that will contribute to the reduction of Object-oriented programming (OOP) spending on health.</td>
<td>• US $400M by Africa Frontline First (AFF) mobilized towards community health: - successful deployment of AFF Catalytic Fund in 5 new countries with a target of US$ 60-100M. - US $300M mobilized through AFF Phase 2 design and implementation. - US $20M deployed through additional financial mechanisms and approaches.</td>
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<td></td>
<td>• Pursue a financial model transaction that leverages private capital by initiating the Community Health Incubator/ Accelerator Challenge Fund.</td>
<td>• Design 1 additional innovative financing mechanisms that are complimentary to Africa Frontline First.</td>
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<td>• Implement the Africa Frontline First Scale Up Fund.</td>
<td>• Influence policies in regional and global implementing agencies by elevating the local/ country level community health experiences to impact system strengthening and finance.</td>
<td>• 3 countries have included community health costs into the UHC, primary health and global health security policies.</td>
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<td>• Influence policies in regional and global implementing agencies by elevating the local/ country level community health experiences to impact system strengthening and finance.</td>
<td></td>
<td>• US $15 million secured on domestic budgets from Ministry of Finance and from in country stakeholders.</td>
</tr>
</tbody>
</table>

**THE POLICIES:** the bottom-up policies and domestic resources

<table>
<thead>
<tr>
<th>IMPACT METRICS</th>
<th>IMPLICATIONS</th>
<th>RESOURCES NEEDED</th>
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</thead>
<tbody>
<tr>
<td>• Additional funding mobilized for CH systems.</td>
<td>• Develop responsive/ flexible/ expanded service packages into the PHC and health financing space.</td>
<td>Staff requirements</td>
</tr>
<tr>
<td>• Increase in number of frontline health workers institutionalized.</td>
<td>• Forge new strategic partnerships.</td>
<td>35-50 permanent staff</td>
</tr>
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<td>• Increased number of governments institutionalizing CHW compensation in budgets and policies.</td>
<td>• Refine and communicate FAH’s story and impact consistently, concisely and comprehensively.</td>
<td>Partnerships required</td>
</tr>
<tr>
<td>• Increase in Antenatal care (ANC) visits 4th Visit &amp; Increased skilled birth attendants.</td>
<td>• Expand and diversify FAH team's skill sets.</td>
<td>Governments, bi-lateral &amp; multi-lateral organizations, implementing agencies, funders, and more</td>
</tr>
<tr>
<td>• Increased number of fully immunized children.</td>
<td>• Entrench programmatic, operational and financial resilience and sustainability within FAH entities.</td>
<td>US $5.5 - 7 Million per year</td>
</tr>
</tbody>
</table>

**THE PEOPLE:** the partnerships and collaborations

- Develop global goods such as roadmaps for community health financing sustainability
- Refining and harmonizing the investment case language for diverse stakeholders

- New engagement strategies defined and deployed for Ministry of Finance, private and multi-sectoral partners.
- Engagement of 1 new country with continued support to our existing countries.

- Integrate community health and primary healthcare interventions into local health insurance/ health risk pooling mechanisms.
- Harmonize policy “asks” for community health strengthening at country and regional level.
- Engagement of 1 - 2 new countries with continued support to our existing countries.

- Position FAH as go-to expert on primary and community health financing across Africa

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- Curate on-demand content for relevant audiences, e.g. masterclasses, trainer of trainers etc.
- Build out the global knowledge hub with thought pieces, evidence, stories from the front lines.

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