TERMS OF REFERENCE

RBM

MALARIA FINANCE TASK FORCE

(MFTF)

A INTRODUCTION

Aim: For the RBM partnership to assist national health sector leadership in the development of a robust “investment case” to seek increased fiscal-space for malaria funding, to apply innovative financing solutions and mobilize influential leadership.

Following the endorsement of the Draft “A Comprehensive Approach to Malaria Financing” Concept Note by the Advocacy and Resource Mobilization Partner Committee in July 2017, it was decided that a Malaria Finance Task Force (MFTF) be established to design and implement the proposed approach outlined in the Concept Note. The Concept Note was prepared for PCARM review in line with the strategic pillar for increased investment through domestic financing, as defined in the RBM Partnership Strategic Plan 2017-2020. The following MFTF TORs set forth the tasks, responsibilities and envisaged output of the Task Force.

B BACKGROUND

In 2015, malaria funding totaled US$ 2.9 billion, representing only 45% of the WHO Global Technical Strategy 2016-2030 (GTS) funding milestone for 2020. Governments of malaria-endemic countries provided 32% of total funding. Considering the current and significant gap for malaria financing, the total funding of $2.9 billion level achieved thus far, falls significantly short of the envisaged $6.4 billion requirement for the WHO GTS estimate for the 2020 and 2030 targets. Therefore, if the WHO 2020 targets of the GTS are to be achieved, total funding must increase substantially. ¹

In line with the RBM Strategic Plan 2017-2020, the Partnership’s work will focus on the new malaria elimination Agenda, structured around three major strategic priorities:

1. **Keeping malaria high on the political agenda** to ensure continued commitment and investment to achieve our common goals.

¹ WMR 2016
2. **Addressing the gaps and maintaining the gains through regional initiatives** which ensure collective progress

3. **Advocating for sustained and increased financing for malaria, including domestic financing.**

Strategic Priority 3: In order to address this significant funding gap, and with the visible pattern of leveling-out-of-ODA, it becomes vital for the RBM partnership to advance forward more targeted approaches to increase funding levels for Malaria programmes on the national level, particularly in view of attaining the 2030 Sustainable Development Goals (SDGs). The Concept Note put forward a specific focus on seeking ways to expand the fiscal negotiations space for health sector financing. The impetus for this is based on extensive experience and knowledge amongst partners of the pivotal role of health sector leadership, political will and astute negotiations with the Ministries of Finance during the national budgeting and planning processes. In this regard, there is ample evidence where these factors have played a key role in some countries advancing and achieving increased financial investment for the health sector, and for Malaria programmes. The Africa Leaders Malaria Alliance was born out of this important consideration – the important role influential leaders can have in elevating the Malaria debate to the highest levels in the continent, and helping to increase the financial investment targets.

**C The RBM Malaria Finance Task Force (MFTF)**

**I PURPOSE**

*The MFTF will help advocate for increased fiscal space and will assist malaria endemic countries to drive high level political, technical and financial support for malaria programmes.*

For the RBM partnership to successfully support increased level of financial investment for Malaria programmes, 3 principle results are foreseen:

1) Enabling a more conducive policy environment at the national and international levels for health Malaria financing

2) Improved level of health sector leadership-capacity to support negotiations, increased domestic resource generation, performance monitoring and innovation.

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2 The Terms of Reference of the MFTF are derived from the Concept Note “A Comprehensive Approach to Malaria Financing” and, therefore, should be considered in parallel with the Concept Note.
3) Rapid “business case” development methodologies for policy analysis and decision-making to promote innovative financing options.

II Objective

How can national authorities expand their options to create fiscal space?3

Following the selection of and confirmation from the Ministries of Health of four pilot endemic countries, the MFTF objective will be to develop a Country Situational Analysis, which will aid in the development of a robust investment case for the malaria sector’s consultative process in each country. In consultation with the Ministries of health in the four pilot countries, the MFTF will support at the global and country level a vigorous process for country-situational analysis, that will help determine the financial trajectory for Malaria programmes and will define practical tools to achieve these ends. With this robust and evidence-based information at hand, RBM partners can, thereafter, effectively mobilize influential leadership that can support the Health Sector in galvanizing increased fiscal space for malaria financing and programming.

In consultation with RBM Committees, the MFTF will:

1. Consult with Ministries of Health officials and confirm the 4 malaria endemic countries to initiate the pilot exercise.
2. Identify and gather global data in consultation with country level partners.
3. Engage with local RBM partners, as necessary, during the development of the country situational analysis and the investment case consultative process, under the leadership of the Ministry of Health.
4. Identify influential domestic and international leaders to assist in the investment case consultative process.
5. Support the organization of the side event at UNGA September 2017 led by RBM Partner Committees
6. Oversee the “model” methodology development for domestic financing for sharing with and potential application by other malaria endemic countries. (DF Tools-Box)

III Oversight Support – RBM Partner Committees.

The RBM Partner Committees (PCs) are intended to formalize, consolidate and amplify the Partnership priorities of advocacy, resource mobilisation, and country/regional support. The work of these Partner Committees is expected to align with the priorities outlined in the Global Technical Strategy 2016-2030 and Action and Investment to Defeat Malaria (AIM) 2016-2030, as well as with the Partnership Strategy and its Annual Budget and Work Plans.

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3 “Fiscal space, in its broadest sense, refers to ‘the capacity of government to provide additional budgetary resources for a desired purpose without any prejudice to the sustainability of its financial position’” –Heller PS (2006) the prospects of creating ‘fiscal space’ for the health sector. Health Policy and Planning, 21(2): 75-79
The purpose of the Advocacy & Resource Mobilisation Partner Committee (ARMPBC) is to design, and subsequently support implementation of the Partnership Advocacy Strategy (see below) related to advocacy & resource mobilisation at global & regional levels. The anticipated outcome of the ARMPBC is increased political will and linked financial commitment for a malaria free world in the Sustainable Development era. The ARMPBC aim is to address (1) identified resource gaps, and (2) broader partnership advocacy activities, including multi-sectoral outreach. The purpose of the Country/Regional Support Partner Committee (CRSPC) is to provide a platform to engage the RBM Partnership community in co-ordinating support to countries and regions as they execute their malaria control and elimination implementation programs.

Both the ARMPBC and the CRSP Partner Committees will oversee the work of the MFTF with work streams to be developed in support of the selected pilot countries around domestic and international resources mobilization support and regional/country implementation support, respectively. It is also envisaged that the Strategic Communications Partner Committee (SCPC) will also be called upon to support key communications and media outreach, as necessary.

**Process Principle**

Recognizing a critical mass of data may be readily available at the global and country levels, the MFTF will ensure, as a first step, to utilize the comparative advantages of each partner organization current, by ensuring that the data gathering and analysis processes carried out through the use of the respective Agency’s knowledge library and sharing and/or developing assessment guidance to in support of the National Situational Analysis.

**IV Roles and Responsibilities**

Keeping in mind the selected pilot countries, the MFTF will oversee a two-tiered process for data gathering and analysis. First, and keeping in mind the comparative advantage of each RBM partner operations’ knowledge, the MFTF would first organize the gathering of critical mass of information that can be drawn from the existing knowledge “library” at the international level. In principle, rapid and substantial information can be gathered at this phase, with emphasis on existing tools, existing assessment methodologies, quantitative data, etc. The MFTF, must also maximize this opportunity to gather best case examples on successful innovative financing methodologies and/or examples to be readily shared with the Ministries of Health and Finance – at a later stage, and specifically as part of the fiscal-space negotiations led by the Ministry of health. This early analysis for innovative instruments is critical to ensure a ready “options approach” to share with the Ministry of Finance as part to leverage various malaria financing opportunities that may require policy changes. The second tier, will require that RBM local partners take the lead in the 4 pilot countries with the implementation of the Situational Analysis process and provide direct support to Ministry of Health officials at the country level. The MFTF, in consultation with the RBM Partner Committees will delineate and agree the distribution of the Specific Tasks and support...
functions necessary to development the comprehensive country investment case. (outlined below)

* Important here, is that the gathering of information by the MFTF in collaboration with all RBM partners, must not only ensure that the collated i.e. data, tools, appropriate methodologies applied to the selected 4 pilot countries, but that the process and methodology applied is well documented by RBM to ensure the development of an RBM Domestic Financing Toolbox. Thereafter the process implemented and the Domestic Finance Toolbox developed by RBM can be shared with and applied by Ministries of Health, as relevant. to other countries.

Specific Tasks

1. Consult with Ministries of Health officials and seek confirmation for 4 malaria endemic countries to initiate development of the Investment Case, ensuring to capture the multi-sectoral basis for the pilot exercise.
2. Identify and gather global data in consultation with country level partners.
3. Engage with local RBM partners, as necessary, during the development of the country situational analysis and the investment case consultative process, under the leadership of the Ministry of Health.
4. Identify influential domestic and international leaders to assist in the investment case consultative process.
5. Support the organization of the side event at UNGA September 2017, led by RBM Partner Committees, to leverage global advocacy and seek national commitments.
6. Ensure capture of comprehensive exercise and methodologies used for an RBM Domestic Finance Toolbox for global dissemination.

Specific Objectives include:

Phase I:  Situational Analysis

In order to better understand the financial “environment”, and with the leadership of the Ministry of Health, the MFTF and RBM partners will conduct a country-specific Malaria Situational Analysis. The MFTF, in consultation with RBM Partner Committees, will determine the distribution of tasks must first be undertaken to determine:

- Consult with Ministries of Health officials and seek confirmation for 4 malaria endemic countries to initiate development of the investment case, ensuring to capture the multi-sectoral basis for the pilot exercise.
- MFTF, through its global partnership network, will identify and collate country specific data, including most current health sector-wide and malaria specific
information i.e., gap analysis, health sector costed plans, national strategic plans, procurement efficiency plans/gains, current publications of relevance to health financing, health efficiency gains, etc. (as available).

- Where relevant malaria sector data is unavailable, the MFTF will review and recommend specific methodologies and/or tools that country level partners can specifically develop in support of the Ministry of Health to seek or update available analytical data on malaria.

- Identify and collate specific global examples of successful innovative financing mechanisms (i.e. regional banks, policy reforms for tax reforms/earmarking, health bonds, diaspora bonds, debt conversions, tourism taxes, etc.) as appropriate for selected pilot country.

- Review country-specific WHO GTS milestones gaps and determine the funding required to attain the GTS targets on an incremental basis.

- Identify and define the strategic issues and priorities to be addressed, with the Ministry of Health, to deliver effective and efficient Malaria Programmes.

- With the Ministry of Health and Ministry prioritize funding and what is required to attain the fiscal space to increase resources Malaria, without impacting other sectors.

- Develop a draft “options- approach” with potential innovative financing options and specific examples of private sector collaboration initiatives/programmes targeting malaria financing.

- Define the comprehensive investment case and determine what will be the realistic ‘take’ from the fiscal space - integrating innovative financing proposals and private sector engagement for Ministry of Finance consultations.

- Identify and invite influential political and eminent leaders to help advocate for and mobilize resources in line with the defined comprehensive investment case.

- Develop and launch “honest brokers” eminent leaders’ communication strategy. (local media, TV, social network and international outreach as relevant).

- Ensure completed process is well documented for further potential RBM advocacy and its replication in other countries.

- Organize a High-Level Event on Malaria at the UN General Assembly in September 2017, under the auspices of the ARM Partner Committee oversight.

Phase II   Defining the New Approach:  MFTF and Country Partners

Innovative Financing Options

To expand the options for creating the fiscal space necessary to raise revenues for malaria, countries would need to engage themselves with a mix of approaches that combine tested innovative mechanisms, pilot initiatives that experiment with novel applications and that must be underscored
by tax revenue generation. A combination or an “options-approach” is necessary to create the most pivotal element for Ministries of Health and health advocates during their bid for increased resources from the national basket. Current initiatives and methodologies exist globally which range from accessing transitional resources to accessing new financing such as, i.e. regional banks, tax earmarking, health bonds, diaspora bonds, debt conversions, tourism taxes (refer to DM Concept Note) should be specifically integrated to the investment case development process -- as appropriate to the selected pilot country at this phase.

**Multi-sector Consultations and Methodology Application:**

To facilitate the county level Situational Analysis and investment case development in support of the Ministry of Health assessment’s, the RBM Working Group country level partners will ensure follow-up and the provision of:

- **Direct support** to the Ministry of Health for the development and/or application of existing tools, technical support and health sector analysis.

- **Rapid access** to and collation of country information on Malaria programmes situational analysis conducted in other countries, regional and global (see MFTF for global)

- **Tools (WB)** for creating “fiscal space” -- How to effectively develop the “business case” for fiscal space negotiations?

- **Innovation Tools:** Consult on and apply Best Practices on innovative instruments and/or initiatives in other countries, from regional banks, private sector, etc. (see MFTF for global)

**Phase III  Advocacy and Leadership Support**

*Aim: Lead High Level advocacy for the assessed investment case - to influence policy change, promote leadership, applicable financing innovations and technologies to increase domestic funding for Malaria.*

Consultations between the MFTF members and the country partners will need to identify and invite influential political and eminent leaders from the national and international levels, to help advocate for and mobilize resources in line with the finalized investment case completed during Phase II above. Notably, this should be initiated in parallel with the establishment of the Task Force membership to ensure a timely process in line with the initiation of the Ministry of health fiscal space negotiations. The MFTF is also charged with ensuring the development and launch of an “honest brokers’ eminent leaders’ communication strategy, utilizing local media, TV, social network and international outreach activities, as relevant.
As honest brokers for the Ministry of Health, these influential Leaders mandate is to help expand the financial landscape for Malaria programmes through their direct in-country engagement to drive:

- **Leadership** – Ensure that malaria eradication remains high on Country, Regional and Global agendas seeking strong political commitment from leaders at all levels. Country level bargaining power and lobby directly with related Ministries (i.e. joint projects.).
- **Financing** – Ensure sufficient funding to sustain momentum to eliminate malaria through resource mobilization and through innovative and concrete financial instruments, including engagement with the business sector.
- **Technology** – Support the introduction of new technologies that can accelerate the path to eradication.
- **Academia** – Partner with the local scientific community as key collaborator for evidence-based scientific analysis and link to global scientific expertise.

**V Membership**
Membership invitees in the MFTF is expected to include: The Global Malaria Programme, WHO, WHO AFRO the World Bank, The Global Fund, AfDB, ALMA, ALPMA, Private Sector representative, Regional Economic Communities (RECs) of the AU, Malaria No More/US Chairs of the ARMPC and CRSPC.

**Chair:** Will be selected immediately following the establishment of the MFTF.

**A Modality of work**

The Committee will consist of those Partners who indicate their commitment to its work and preparedness to commit some resources to its work. Other partners or expertise may be called upon to assist in the review and sharing of global/country data or specific assessment tools successfully used by countries in their support to Ministries of Health.

**RBM Team Coordination:** RBM Secretariat in Geneva, Switzerland will act as the global coordinator and has primary responsibility for the day to day coordination support of the Task Force activities. The Secretariat will work with the co-chairs of the RBM Partner Committees to lead and manage in achieving the MFTF objectives and ensure the capture and completion of the final DF Tools Box.

**B Meetings and Communications.**

- The Task Force will convene meetings once every two weeks beginning August 2017 for the first two months and thereafter, will meet monthly.
- The Task Force will meet as a whole group will meet at least once a year for planning purposes. Regular meeting minutes will be draft.
ed by the Chair and circulated among the Task Force and all three RBM Partner Committee members.

C Timing

- **1 August** - Confirm full MFTF Membership
- **7 August** - Confirm 4 Selected Pilot countries with National Authorities and define pilot country exercise rollout-timing, per country. Duration of each country exercise is expected to be 4 months for investment case finalization.
- **5 September** - Launch at least 1 country Situational Analysis.
- **30 September** - Identify eminent individuals locally/internationally
- **21 September** - Organize High Level Event on Malaria at UN GA.
- **5 December** - Completed 1 Situational Country Exercise.