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FINANCING MODELS FOR GLOBAL HEALTH INITIATIVES: LESSONS FROM MATERNAL AND GENDER EQUALITY PROGRAMS

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ABSTRACT

Financing models play a pivotal role in sustaining and advancing global health initiatives, particularly those aimed at addressing maternal health and promoting gender equality. This review provides a comprehensive overview of financing strategies employed in such initiatives, drawing insights from successful programs and highlighting key lessons learned. Maternal health remains a critical area of concern worldwide, with millions of women facing risks during pregnancy and childbirth. Gender disparities exacerbate these challenges, further underscoring the importance of targeted interventions. Financing models for maternal health initiatives have evolved over the years, with a shift towards innovative approaches that prioritize sustainability and scalability. One prominent financing model is the use of public-private partnerships (PPPs), which leverage resources from both governmental and non-governmental entities. These partnerships facilitate greater efficiency in resource allocation and enable the mobilization of additional funding streams. Examples such as the Global Financing Facility (GFF) demonstrate how PPPs have catalyzed investments in maternal health, leading to tangible improvements in

access to quality care. Furthermore, results-based financing (RBF) mechanisms have gained traction in incentivizing the achievement of specific health outcomes. Through performance-based incentives, RBF encourages healthcare providers to deliver high-quality services while ensuring accountability and transparency. Initiatives like the World Bank's RBF programs have shown promising results in enhancing maternal health outcomes and narrowing gender gaps in access to healthcare. Additionally, innovative financing mechanisms such as social impact bonds (SIBs) and development impact bonds (DIBs) offer new avenues for mobilizing private capital towards maternal and gender equality programs. By aligning financial returns with social impact goals, these instruments attract investors seeking both financial and social returns, thereby diversifying funding sources and promoting sustainability. Financing models for global health initiatives targeting maternal and gender equality programs are diverse and dynamic, reflecting the multifaceted nature of these challenges. Lessons learned from successful initiatives underscore the importance of collaboration, innovation, and adaptability in achieving sustainable progress towards maternal health and gender equality goals on a global scale.

Keywords: Finance, Models, Global Health, Maternal, Gender Equity, Review.

INTRODUCTION

Financing models play a crucial role in driving progress and sustainability within global health initiatives (Clark, et al., 2018; Dieleman, et al., 2018). Adequate funding is essential for implementing effective interventions, improving healthcare infrastructure, and ensuring equitable access to services. Moreover, financing models influence the scope, scale, and impact of health programs, making them integral components of global health governance and policy (Peters, et al., 2018; Jacobs et al., 2012; Achoki, and Lesego, 2017).

. Maternal health and gender equality stand at the forefront of global health agendas, reflecting the fundamental principles of human rights, equity, and social justice. Despite significant advancements in healthcare delivery, maternal mortality rates remain unacceptably high in many parts of the world, disproportionately affecting women in low-resource settings. Moreover, pervasive gender disparities persist in access to healthcare services, exacerbating maternal health challenges and perpetuating cycles of inequality (Smith, and Sinkford, 2022; Petchesky, 2003).

The purpose of this paper is to delve into the intricacies of financing models for global health initiatives, with a specific focus on maternal health and gender equality programs. By examining various financing strategies and drawing insights from successful initiatives, this paper aims to uncover valuable lessons that can inform future policy decisions, programmatic approaches, and resource allocation. Through a comprehensive analysis of financing mechanisms and their impact on maternal health and gender equality outcomes, this paper seeks to contribute to the ongoing discourse on strengthening health systems and advancing social justice agendas worldwide.

In exploring financing models for maternal health and gender equality programs, this paper acknowledges the interconnectedness of these issues and the need for holistic approaches that address root causes and systemic barriers. By highlighting the importance of sustainable financing, innovative partnerships, and evidence-based interventions, this paper underscores the imperative of collective action in achieving tangible improvements in maternal health outcomes and promoting gender equality within healthcare systems globally.

Background on Maternal Health and Gender Equality

Maternal health and gender equality are intrinsically linked aspects of global health that continue to pose significant challenges worldwide (Langer, et al., 2015; Shiffman, and Smith, 2007). Despite advancements in medical technology and healthcare infrastructure, maternal mortality remains a pressing issue, particularly in low-resource settings where access to quality healthcare is limited. Additionally, pervasive gender disparities persist in healthcare access and outcomes, exacerbating maternal health challenges and perpetuating cycles of inequality (Nyende, 2020; Tsu, 2005.).

Maternal health encompasses the physical, mental, and social well-being of women during pregnancy, childbirth, and the postnatal period (Bolan, et al., 2021; Harris, and Marks, 2009). While progress has been made in reducing maternal mortality rates globally, significant disparities persist, with the highest burden of maternal deaths concentrated in Sub-Saharan Africa and South Asia. According to the World Health Organization (WHO), approximately 810 women die every day from preventable causes related to pregnancy and childbirth, highlighting the urgent need for comprehensive maternal health interventions (Antsaklis, et al., 2020; Sewnunan, 2021; Cresswell, and World Health Organization, 2023). Key challenges contributing to maternal mortality include inadequate access to skilled healthcare providers, essential maternal healthcare services, and emergency obstetric care (Girma, et al., 2013; Cham, et al., 2005; Masaba, et al., 2022). Socioeconomic factors, such as poverty, lack of education, and limited infrastructure, further exacerbate maternal health disparities, disproportionately affecting marginalized populations. Additionally, cultural norms and gender inequalities often hinder women's access to maternal healthcare services, perpetuating cycles of poor health outcomes (Morgan, et al., 2017; Langer, et al., 2015).

Gender disparities in healthcare access and outcomes remain a persistent barrier to achieving maternal health goals globally. Women and girls face numerous obstacles in accessing healthcare services, including financial barriers, lack of transportation, and cultural norms that prioritize men's health needs over theirs. These disparities are particularly pronounced in patriarchal societies where women have limited decision-making power and autonomy over their health. Moreover, gender biases within healthcare systems can result in suboptimal care for women, leading to delayed diagnoses, inadequate treatment, and higher rates of maternal morbidity and mortality. For example, women experiencing pregnancy complications may be dismissed or not taken seriously by healthcare providers, leading to preventable adverse outcomes.

The intersectionality of maternal health and gender equality issues underscores the need for a comprehensive approach to addressing the underlying determinants of poor health outcomes. Women's health is influenced by multiple intersecting factors, including race, ethnicity, socioeconomic status, disability, and geographic location, which interact to shape their experiences and access to healthcare services. For marginalized women, such as those living in rural areas or belonging to ethnic minority groups, the intersection of gender and other social determinants of health exacerbates disparities in maternal health outcomes. Intersectional approaches to maternal health and gender equality recognize the interconnected nature of these issues and seek to address the root causes of inequities through targeted interventions that account for the diverse needs and experiences of women and girls.

In summary, addressing maternal health challenges and promoting gender equality require a multifaceted approach that addresses the social, economic, and cultural determinants of health. By understanding the intersectionality of maternal health and gender equality issues, policymakers, healthcare providers, and stakeholders can develop more effective strategies to improve maternal health outcomes and advance gender equality within healthcare systems globally (Thurston, and Vissandjée, 2005).

Definition and Rationale for Public-Private Partnerships (PPPs) in Global Health

Public-Private Partnerships (PPPs) in global health refer to collaborative ventures between governmental and non-governmental entities, including private corporations, philanthropic organizations, and civil society groups, to address healthcare challenges and improve health outcomes. PPPs leverage the strengths and resources of both public and private sectors to overcome barriers to healthcare access, promote innovation, and enhance the efficiency and effectiveness of health systems (Babacan, 2020; Stevenson, and Youde, 2021).

The rationale for PPPs in global health stems from the recognition that governments alone cannot address complex health challenges, such as maternal mortality and gender disparities, due to limited resources, capacity constraints, and competing priorities. By partnering with the private sector, governments can harness additional funding, expertise, and technology to strengthen healthcare delivery, expand access to essential services, and achieve sustainable health outcomes.

Several successful PPPs have been established to address maternal health and promote gender equality, demonstrating the potential impact of collaborative approaches in improving health outcomes. One notable example is the Partnership for Maternal, Newborn & Child Health (PMNCH), a global alliance of governments, donors, civil society organizations, and private sector partners committed to advancing maternal and child health goals (World Health Organization, 2014; Storeng, and Béhague, 2016). PMNCH leverages partnerships to advocate for increased investment in maternal and child health, strengthen health systems, and promote accountability for achieving measurable results. Through its multi-stakeholder platform, PMNCH facilitates knowledge sharing, innovation, and collective action to address maternal health challenges and promote gender equality within healthcare systems (Health Care Professional Association Writing Group, 2009). Another example of a successful PPP in maternal health is the Saving Mothers, Giving Life (SMGL) initiative, which brings together public and private sector partners to reduce maternal mortality in high-burden countries. SMGL focuses on strengthening health systems, improving access to quality maternal healthcare services, and empowering women to make informed decisions about their health and well-being (Serbanescu, et al., 2019; Olivas, et al., 2023).

In addition to maternal health initiatives, PPPs have also been instrumental in advancing gender equality within healthcare systems (Hossain, et al., 2020; Palaia, et al., 2019). For example, the Women Deliver partnership advocates for gender-responsive policies and investments in maternal health, reproductive rights, and gender equality, with a focus on empowering women and girls to realize their full potential (Tanui–Too, 2021; Arutyunova, 2017).

PPPs offer several benefits in financing health initiatives, including increased access to funding, expertise, and resources, enhanced innovation and technology transfer, improved service delivery, and strengthened accountability and governance mechanisms (Torchia, et al., 2015; Babacan, 2020). By leveraging the complementary strengths of public and private sectors, PPPs

can achieve greater impact and sustainability in addressing complex health challenges. However, PPPs also present challenges and risks, including concerns about accountability, transparency, and conflicts of interest, as well as potential tensions between profit motives and public health objectives (Joudyian, et al., 2021; Roehrich, et al., 2014). Furthermore, ensuring equitable access to healthcare services and addressing the needs of marginalized populations may require careful negotiation and monitoring within PPPs to prevent the exacerbation of existing health disparities.

In conclusion, PPPs play a vital role in financing maternal health and gender equality initiatives, offering opportunities for collaboration, innovation, and resource mobilization to address complex health challenges. By harnessing the collective strengths of public and private sectors, PPPs can drive progress towards achieving universal health coverage, promoting gender equality, and realizing the vision of sustainable development for all.

Results-Based Financing (RBF) Mechanisms

Results-Based Financing (RBF) is a financing approach that ties funding to the achievement of predefined health outcomes or performance targets. In the context of healthcare, RBF mechanisms incentivize healthcare providers, facilities, or systems to deliver high-quality services and improve health outcomes by offering financial rewards or incentives based on the achievement of measurable results.

RBF programs establish specific indicators or targets related to health outcomes, service delivery, or quality of care (Josephson, et al., 2017). These indicators are agreed upon between funders and implementing partners and serve as the basis for measuring performance. There is a rigorous process for verifying the achievement of performance targets, often involving independent third-party evaluators or monitoring systems. Verification ensures accountability and transparency in the allocation of funds based on performance. Healthcare providers or facilities receive financial incentives or payments based on their performance against the predefined indicators. These incentives can take various forms, such as bonuses, performance-based grants, or pay-for-performance contracts (Chimhutu, 2016).

RBF mechanisms are designed to address inefficiencies in healthcare delivery, encourage innovation, and improve the quality and coverage of healthcare services. By linking funding directly to performance outcomes, RBF incentivizes providers to focus on delivering effective and evidence-based interventions that yield measurable improvements in health outcomes.

Several RBF programs have been implemented in maternal health and gender equality initiatives, demonstrating the potential of this financing approach to drive positive change (James, et al., 2020; Situnyama, and Chibomba, 2018). One notable example is the RBF program implemented in Rwanda's healthcare system, which includes incentives for maternal and child health services. In Rwanda, RBF mechanisms have been used to incentivize healthcare providers to improve maternal and child health outcomes, including increasing the utilization of antenatal care services, skilled delivery attendance, and postnatal care visits. As a result of the RBF program, Rwanda has seen significant improvements in maternal and child health indicators, including reductions in maternal mortality and increases in the percentage of births attended by skilled health personnel (Morgan, 2009; Lubumbashi, 2019).

Similarly, RBF programs have been implemented in other countries, such as Burundi, the Democratic Republic of the Congo, and Zambia, to improve maternal and child health outcomes. These programs have shown promising results in increasing the coverage and quality

of maternal and child health services, reducing maternal mortality rates, and improving access to essential healthcare services for women and children.

Evidence suggests that RBF mechanisms can have a positive impact on health outcomes when implemented effectively. Studies evaluating RBF programs in maternal and child health have found improvements in a wide range of indicators, including increased utilization of maternal and child health services, reductions in maternal and child mortality rates, and improvements in the quality of care. RBF programs have been particularly effective in improving the coverage and quality of essential maternal and child health services, such as antenatal care, skilled delivery attendance, postnatal care, and immunization. By incentivizing healthcare providers to focus on delivering evidence-based interventions and improving service delivery, RBF mechanisms have helped to bridge gaps in access to essential healthcare services and reduce disparities in maternal and child health outcomes. Furthermore, RBF programs have been shown to enhance accountability and transparency in healthcare delivery, strengthen health systems, and promote community engagement in maternal and child health initiatives. By aligning financial incentives with health outcomes, RBF mechanisms encourage collaboration among stakeholders, promote innovation, and drive continuous improvement in healthcare quality and performance (Lawry, et al., 2019; Bapolisi, et al., 2020; et al., 2019).

In summary, RBF mechanisms have demonstrated significant potential to improve maternal health and gender equality outcomes by incentivizing healthcare providers to deliver high-quality services and achieve measurable results. By leveraging financial incentives and performance-based contracts, RBF programs can drive positive change in healthcare delivery, strengthen health systems, and contribute to the achievement of global health goals.

Innovative Financing Mechanisms

Social Impact Bonds (SIBs) and Development Impact Bonds (DIBs) are innovative financing mechanisms that leverage private capital to fund social and development programs, including initiatives aimed at improving maternal health and promoting gender equality. These bonds involve partnerships between government agencies, investors, service providers, and outcome funders to address complex social challenges and achieve measurable impact (Mishra, and Dash, 2023).

SIBs and DIBs operate on a pay-for-performance model, where investors provide upfront capital to fund social interventions, and outcome funders pay investors a return based on the achievement of predefined social or development outcomes. If the intervention achieves the desired outcomes, investors receive a financial return, but if the outcomes are not achieved, investors bear the financial risk (Zvoushe, 2022).

Several SIBs and DIBs have been implemented to fund maternal health and gender equality initiatives in various countries, demonstrating the potential of these financing mechanisms to mobilize private capital and drive positive social impact. One example is the Women's Livelihood Bond (WLB), a DIB launched in 2017 to fund women's empowerment programs in Southeast Asia. The WLB aims to improve access to finance, education, and healthcare for women in the region, with a focus on supporting women-owned small and medium enterprises (SMEs), promoting gender equality, and empowering women to achieve economic independence. Investors in the WLB include development finance institutions, impact investors, and philanthropic organizations, who provide capital to fund the intervention upfront. Another example is the Maternal and Newborn Health Performance-Based Financing (PBF) project in

Cameroon, which utilizes a pay-for-performance model to fund maternal and newborn health services. The project, funded by the World Bank and other development partners, incentivizes healthcare providers to improve the coverage and quality of maternal and newborn health services by linking funding directly to performance outcomes (Whitfield, 2015; Tinavapi, 2021).

SIBs and DIBs offer several potential benefits in funding maternal health and gender equality initiatives, including increased access to financing, innovative financing structures, and enhanced accountability and transparency. By leveraging private capital and aligning financial incentives with social outcomes, SIBs and DIBs can complement traditional development financing mechanisms and mobilize resources to address complex social challenges. Furthermore, SIBs and DIBs have the potential to promote innovation and experimentation in social programming, encourage collaboration among stakeholders, and drive continuous improvement in program design and implementation. By involving investors in funding decisions and incentivizing outcomes-based approaches, SIBs and DIBs can foster greater efficiency and effectiveness in achieving social impact goals. However, SIBs and DIBs also present challenges and risks, including concerns about the scalability and sustainability of interventions, the complexity of financing structures, and the potential for unintended consequences. Additionally, ensuring alignment between investor interests and social impact goals, as well as addressing issues of equity and inclusion, requires careful consideration and monitoring within SIBs and DIBs. In conclusion, SIBs and DIBs offer innovative financing mechanisms for funding maternal health and gender equality initiatives, with the potential to mobilize private capital, drive social impact, and complement traditional development financing approaches. By leveraging financial incentives and outcome-based contracts, SIBs and DIBs can facilitate greater collaboration, innovation, and accountability in addressing complex social challenges and advancing global health goals.

Lessons Learned and Best Practices

Successful financing models for maternal health and gender equality initiatives offer valuable insights into effective strategies for improving health outcomes and promoting equity. Key insights include; Collaborative partnerships between governments, civil society organizations, private sector entities, and international donors are essential for mobilizing resources, leveraging expertise, and maximizing impact. Successful financing models prioritize multi-sectoral collaboration to address the complex social determinants of health and promote holistic approaches to maternal health and gender equality (McGuire, et al., 2019; Khatri, et al., 2023). Innovative financing mechanisms, such as public-private partnerships, results-based financing, and social impact bonds, offer opportunities to leverage private capital, incentivize performance, and drive innovation in healthcare delivery. By aligning financial incentives with health outcomes, these mechanisms can enhance efficiency, accountability, and sustainability in financing maternal health and gender equality initiatives. Successful financing models prioritize quality of care and equity in healthcare access, ensuring that all women, regardless of socioeconomic status, geographic location, or other factors, have access to essential maternal health services. By addressing disparities in healthcare access and outcomes, these models contribute to reducing maternal mortality rates and advancing gender equality goals (Bergen, 2020).

To enhance the sustainability and scalability of maternal health and gender equality initiatives, several strategies can be employed; Sustainable maternal health and gender equality initiatives require investments in health systems strengthening, including infrastructure development, workforce training, and supply chain management. By strengthening health systems, initiatives can improve access to quality healthcare services and build resilience to future health challenges. Engaging and empowering communities, especially women and girls, in decision-making processes and program implementation is crucial for ensuring the sustainability and scalability of health initiatives (Legido-Quigley, and Asgari-Jirhandeh, 2018). By involving communities as partners in health promotion and service delivery, initiatives can foster ownership, accountability, and sustainability over the long term. Leveraging digital health technologies, such as mobile health applications, telemedicine, and health information systems, can enhance the efficiency, effectiveness, and scalability of maternal health and gender equality initiatives. By harnessing the power of technology, initiatives can overcome barriers to healthcare access, improve data collection and analysis, and facilitate remote monitoring and support for women and healthcare providers (Ekuri, 2020; Erku, et al., 2023).

Policymakers, donors, and practitioners can take several actions to support the sustainability and scalability of maternal health and gender equality initiatives; Policymakers can advocate for policies and legislation that prioritize maternal health and gender equality, allocate sufficient funding, and create an enabling environment for multi-sectoral collaboration and innovation in healthcare delivery. Donors can strategically invest in maternal health and gender equality initiatives that demonstrate high impact, sustainability, and scalability, prioritizing evidence-based interventions, health systems strengthening, and community engagement. Practitioners can build capacity and share best practices in maternal health and gender equality programming, including innovative financing models, quality improvement strategies, and community-based approaches. By fostering collaboration and learning across sectors and regions, practitioners can strengthen the effectiveness and sustainability of health initiatives.

Challenges and Future Directions

Despite progress in financing maternal health and gender equality programs, several persistent challenges remain; Maternal health and gender equality initiatives often face funding gaps and resource constraints, particularly in low-resource settings where healthcare infrastructure is inadequate and competing priorities exist. Shortages of skilled healthcare providers, particularly in rural and remote areas, pose challenges to delivering quality maternal health services and addressing gender disparities in healthcare access and outcomes. Deep-rooted gender norms and sociocultural barriers continue to hinder women's access to maternal healthcare services and decision-making power over their health, perpetuating gender inequalities and contributing to poor maternal health outcomes (Mondiale, 2007; Filippi, et al., 2006).

Despite these challenges, several emerging trends and opportunities in global health financing offer potential solutions; The emergence of innovative financing mechanisms, such as social impact bonds, development impact bonds, and health impact bonds, presents opportunities to mobilize new sources of funding, incentivize performance, and drive positive social impact in maternal health and gender equality. Advances in digital health technologies, including telemedicine, mobile health applications, and health information systems, offer opportunities to improve the efficiency, effectiveness, and scalability of maternal health and gender equality programs, particularly in resource-constrained settings. Collaboration among governments,

international organizations, civil society groups, and private sector entities is essential for addressing complex health challenges, advancing global health goals, and promoting equity in maternal health and gender equality.

To address gaps and advance the field of maternal health and gender equality financing, policymakers, donors, and practitioners can take the following actions; Governments and donors should prioritize investment in maternal health and gender equality programs, allocate sufficient funding, and ensure equitable distribution of resources to address disparities in healthcare access and outcomes. Efforts to strengthen health systems, including workforce development, infrastructure improvement, and supply chain management, are essential for delivering quality maternal health services and promoting gender equality in healthcare access. Interventions to promote gender equity, including education, empowerment, and advocacy initiatives, are critical for addressing sociocultural barriers and structural inequalities that perpetuate gender disparities in maternal health outcomes (Prata, et al., 2010; Victora, et al., 2011).

In conclusion, addressing persistent challenges and seizing emerging opportunities in maternal health and gender equality financing requires sustained commitment, collaboration, and innovation from all stakeholders. By prioritizing evidence-based interventions, leveraging innovative financing mechanisms, and promoting gender equity, we can advance global health goals and ensure that all women have access to quality maternal healthcare services and the opportunity to lead healthy and fulfilling lives.

RECOMMENDATIONS AND CONCLUSION

In summary, this examination of financing models for maternal health and gender equality initiatives has yielded several key findings; Multi-sectoral collaboration between governments, civil society organizations, private sector entities, and international donors is essential for mobilizing resources, leveraging expertise, and maximizing impact in maternal health and gender equality programming. Innovative financing mechanisms, such as public-private partnerships, results-based financing, social impact bonds, and development impact bonds, offer opportunities to mobilize private capital, incentivize performance, and drive positive social impact in maternal health and gender equality initiatives. Successful financing models prioritize quality of care and equity in healthcare access, ensuring that all women have access to essential maternal health services and addressing disparities in healthcare access and outcomes.

Continued innovation and collaboration are essential for advancing global health goals, including improving maternal health and promoting gender equality. Innovation in financing models, technology, and service delivery can enhance the efficiency, effectiveness, and scalability of maternal health and gender equality initiatives, while collaboration among stakeholders can facilitate knowledge sharing, resource mobilization, and collective action.

By harnessing the collective strengths of governments, donors, civil society organizations, and the private sector, we can address persistent health challenges, overcome barriers to healthcare access, and promote equity in maternal health and gender equality programming. Moreover, continued investment in research, innovation, and capacity building is needed to develop evidence-based interventions, strengthen health systems, and achieve sustainable impact in maternal health and gender equality initiatives.

As we look to the future, it is imperative that stakeholders prioritize maternal health and gender equality in funding strategies and policy agendas. Maternal health and gender equality are fundamental human rights and essential components of sustainable development, requiring concerted efforts and resources to address the underlying determinants of poor health outcomes and advance social justice agendas. Policymakers, donors, and practitioners must commit to allocating sufficient funding, resources, and political will to maternal health and gender equality initiatives, ensuring that all women have access to quality maternal healthcare services and the opportunity to lead healthy and fulfilling lives. Additionally, stakeholders should prioritize investments in health systems strengthening, community engagement, and gender-responsive programming to address the root causes of maternal mortality and gender disparities in healthcare access and outcomes.

In conclusion, by working together and prioritizing maternal health and gender equality in funding strategies and policy agendas, we can create a world where every woman has the opportunity to thrive, and where maternal health is a priority for all. Let us seize this opportunity to make lasting and meaningful change in the lives of women and girls worldwide.

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