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* Sub-Theme 3: PHC and Healthcare financing

**The Global Financing Facility Investment Case - a PHC approach contributing to Madagascar’s UHC initiative.**

**Background:**

Madagascar’s progress on health indicators has stagnated or declined in recent years. Neonatal mortality increased from 24 ‰ in 2008 to 26 ‰ in 2013 (DHS data). The primary healthcare (PHC) system struggles with a low government budget allocation, lack of qualified medical professionals, insufficient supply of drugs/consumables and weak data information systems. In 2017, the Global Financing Facility (GFF), a catalytic funding mechanism, selected Madagascar as one of their third round of countries. The Ministry of Public Health (MSANP) convened stakeholders to develop a reproductive, maternal, neonatal, child and adolescent health and nutrition investment case - a prioritized plan for addressing RMNCAH-N challenges in the country to inform the use of the catalytic funding. In Madagascar, this plan supports strengthening of the PHC system and the recently launched new government health financing mechanism and UHC.

**Objectives:**

Maximize resources available for health, and mobilize domestic resources, by prioritizing specific RMNCAH-N interventions in line with the country’s vision for achieving UHC.

**Methodology:**

HP+ supported the MSANP to convene a technical working group including government, donor, and civil society representatives. Participants used the EQUIST tool, mortality data and coverage rates per region and unit costs to prioritize feasible, highly effective and efficient interventions. Subsequently HP+ used the OneHealth Tool to budget chosen interventions in 12 prioritized regions. The cost will be compared to the results from a resource mapping exercise to determine funding gaps and provide a base for determining roles and responsibilities for implementing the investment case.

**Findings:**

The scenario ultimately chosen for Madagascar focuses on the PHC level with emphasis on strengthening human resource availability, particularly community health workers, and their performance using performance-based financing. The investment case focuses on strengthening high-impact maternal, neonatal and nutrition interventions and increasing financial access to PHC by strengthening the nascent voluntary contribution health financing mechanism and use of vouchers for vulnerable populations. Initial results show that 17,732,644 people in 12 regions will benefit from this approach.

**Conclusions:**

Developing an investment case allows the government, development partners, civil society and private sector partners to align funding priorities for RMNCAH-N and improve the efficiency of limited resources available in Madagascar by targeting vulnerable regions and populations to improve the health of mothers and children.