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Agenda Item: 7.8

Report on LSIF Engagement in the World Bank Health Security Financing Technical Task Force

Purpose: Information
Submitted by: Victoria University



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World Bank Health Security Financing Technical Task Force

Report to LSIF SOM 1 Meeting February 2018

Pandemics such as Ebola and influenza can impose significant financial costs as well as health impacts. For instance, the H1N1 2009 Mexican influenza crisis cost \$600m and caused 6.8% drop in GDP. The purpose of the Task Force is to develop a financial capacity assessment tool for health security risks for countries in the Asian region.

The WHO, World Bank and other multilateral and bilateral agencies have developed a health assessment tool known, as the Joint External Evaluation (JEE) tool, for countries to evaluate the capacities of their health systems to handle such crises. Over 60 countries have used the JEE to undertake such a review. However, the JEE does not address how countries would finance the health and other costs of pandemics.

In response to these concerns, the World Bank, in association with the WHO and other multilateral and bilateral agencies, has established a Health Security Financing Technical Task Force to develop a health security financing assessment tool (HSFAT) and build consensus around the methodology and process to develop the draft tool.

The World Bank approached an initial group of countries, Vietnam, Indonesia, Cambodia, Lao PDR and Myanmar to provide representatives (finance, human and animal health experts). A number of Pacific nations has since joined, with Australian Department of Foreign Affairs and Trade support. In addition other multilateral agencies, including the WHO, FAO, OIE, bilateral agencies USAID and AUS AID and a range of regional organisations were invited to send representatives.

LSIF Academic Co-chair Prof Bruce Rasmussen has participated on behalf of APEC LSIF. There have been to date, three face to face meetings, in Bali, Da Nang and Bangkok. In addition, a Tool drafting sub-committee, on which LSIF was represented, met by tele conference a number of times to revise initial drafts of the Tool.

The main objective of the Tool is to identify critical constraints and opportunities to building financing systems that accelerate and sustain progress towards effective health security systems.¹

It was agreed by the Task Force in Da Nang in April 2017 that the tool was sufficiently well developed to be piloted by Vietnam. The meeting in Bangkok, 30-31 January this year, received a report from Vietnam on its progress in completing the Tool. This raised a number of practical issues, especially relating to the collection of data from budget systems, which were input rather than output focussed. This made some of the required information difficult or impossible to collect. A number of suggestions was made, ranging from greater country customisation(Vietnam) to less detailed data collection.

¹World Bank, Conceptual framework for the HSFAT, December 2016

The focus of current work is to help countries identify their domestic financing capacity especially for planning and preparedness, largely by mobilising budgetary resources. There is less emphasis, at least at this stage, on defining possible international resources, contingent or otherwise, to help finance pandemic response.

There are links in this work to LSIF efforts to encourage economies to explore alternative methods to finance health more generally. External funding sources, including those of the private sector, have received only modest attention at this stage

Prof. Bruce Rasmussen

Co-Chair (Academic)

3 February 2018