

Domestic Resource Mobilization for SRHR – The Role of Donors

TERMS OF REFERENCE

June 2020

1. Introduction

Countdown 2030 Europe (C2030E) is a consortium of 15 NGOs in twelve European countries working to hold European donor governments and the European Union institutions to account for their policy and funding commitments on sexual and reproductive health and family planning. The consortium's advocacy efforts are supported by several evidence-gathering activities, including a tracking of European donor spending on sexual and reproductive health and family planning. The International Planned Parenthood Federation (IPPF) is one of the consortium's partners.

To strengthen the expertise and advocacy capacity of C2030E on donor support for domestic resource mobilization in relation to sexual and reproductive health and rights (SRHR), IPPF, on behalf of C2030E, is looking to engage a consultant to **undertake a review and analysis of the ways in which European donor governments seek to support and incentivise domestic resource mobilization for SRHR and health more widely and produce a report summarising findings and providing recommendations for further advocacy.**

2. Background

Donor funding has been stagnant in recent years and is unlikely to increase beyond current levels over the next decade, and a growing number of recipient countries will lose eligibility for donor support in the years ahead. Increased domestic resource mobilization will be needed to achieve sustainable development objectives, including on health and SRHR, and has become an area of growing emphasis among donor governments and international institutions. This is reflected in the Addis Ababa Action Agenda, which points to mobilization of significant additional domestic public resources as essential for sustainable development and calls for strengthened international cooperation to support this.¹

Development funding has the potential to positively affect domestic resource mobilization capacities in a range of ways, including through impacts of development spending on countries' economic growth. Yet, in recent years, donors have increasingly sought to encourage and support domestic resource mobilization – both generally, and for health and SRHR specifically – through more direct efforts.

Donors have provided support for domestic resource mobilization through both bilateral and multilateral channels. Activities have included support for general domestic resource mobilization efforts, such as tax reform, as well as initiatives aimed at increasing resources available for and allocated specifically to the health sector or SRHR.

Global initiatives such as the Global Financing Facility and the Global Fund seek to support countries to move towards increased domestic financing of health. Mechanisms such as UNFPA Supplies and FP2020 aim to increase domestic government investments specifically for family planning. Modalities employed include technical assistance, different co-financing models and requirements, encouragement of government funding pledges, as well as support for civil society advocacy and accountability work on government budgets.

Linked to this, universal health coverage, which will require significant increases in domestic public health spending, has gained growing momentum at international levels, with donors committing to support national efforts in achieving universal health coverage, including through financial and technical assistance.²

The longer-term impacts of the current COVID-19 crisis on the above trends are yet to be seen but ensuing declines in economic growth can be expected to affect countries' capacities for domestic resource mobilization while also putting further strain on already tightening donor budgets.

C2030E released a report on the role of donors in contraceptive supplies financing in 2018, which touched upon some mechanisms aiming to encourage greater domestic investments in this field.³

3. Scope of work

To strengthen C2030E partners' understanding, expertise and advocacy capacity on donor support for domestic resource mobilization, the consultant will **undertake a review and analysis of the ways in which European donor governments seek to support and incentivise domestic resource mobilization for SRHR and health more widely and produce a report summarising findings and providing recommendations for further advocacy.**

The focus of this piece of work will be on domestic *public* funding. C2030E will release a report on donor support for private sector engagement in relation to sexual and reproductive health later this year. Domestic resource mobilization is understood as covering the generation, allocation and spending of domestic public resources.

Development of methodology:

The consultant will be expected to develop a methodology note for the review and analysis for discussion and agreement with C2030E. It is expected that this will include a desk-based review of existing resources, research and grey literature, as well as other materials on the topic from sources including donors and implementing agencies (with a focus on European donor governments); multilateral institutions (e.g. World Bank, WHO, UNFPA); global health initiatives (e.g. Global Financing Facility, Global Fund); NGOs; advocacy groups and partnerships (e.g. FP2020); think tanks; and relevant journals and databases.

A small number of key informant interviews can be considered on a case-by-case basis, as needed.

Once the methodology has been agreed, the consultant will undertake the review as set out in the methodology note.

Development of report and related materials:

Following the review, it is expected that the consultant will produce a report, which will outline findings of the review, and which should include sections covering the following:

- 1) Executive summary
- 2) Introduction and methodology
- 3) What is domestic resource mobilization – definition and breakdown; equity considerations.
- 4) **Current environment and discourse on domestic resource mobilization, including for health and SRHR** – trends in development finance; move towards transition away from donor support; specific challenges in ensuring domestic public funding for health and SRHR; possible impacts both on donor funding and domestic resource mobilization of COVID-19 crisis.
- 5) **Current levels of domestic public funding, in general and for health and SRHR specifically**, in low- and middle-income countries; **trends and outlook.**
- 6) **The role of donors in supporting and incentivising domestic resource mobilization, with a focus on SRHR and health.** The section should address donor support for wider domestic resource mobilization measures, and their possible implications for SRHR/health funding. However, its emphasis should be on forms and modalities of support aimed specifically at increasing public funding available for and invested in SRHR, and health more broadly. The focus should be on European donor governments. The section should include the following:

- Overview of main donors, and modalities they employ.
- Description and explanation of the different modalities through which donors provide support for or look to incentivise domestic resource mobilization.
- Critical assessment and comparison of these different methods, based on findings of the review, highlighting positive and negative elements, best practices, and concerns and criticisms.

7) **Recommendations for donor advocacy:** providing recommendations for civil society advocacy towards European donor governments based on the review findings.

The consultant would also be expected to develop a **shorter version** of the above report, a **comprehensive reference list** inclusive of all materials examined as part of the review, as well as a **power point presentation** summarising main findings.

The primary target audience of the report, and related materials, will be the partners of the C2030E consortium and other civil society advocates working on SRHR. The report, and related materials, should be written for publication. However, C2030E will decide at a later point whether to publish the report, and related materials, in the submitted or a modified form, or whether to keep them as internal documents.

Planning and facilitation of webinar:

The consultant would further be expected to plan and facilitate a half-day webinar for C2030E partners and possible other participants, in collaboration with C2030E, to present and discuss the review findings.

4. Deliverables, and level of effort

- Development of draft methodology note for review and analysis, to be reviewed by C2030E; finalisation of methodology note following input received by C2030E (+/- 2 days).
- Literature and document review as outlined in agreed methodology note; key informant interviews as agreed (+/- 11 days).
- Analysis and development of report (approximately 30-40 pages), short version of the report (approximately 10 pages), comprehensive reference list, and power point presentation (+/- 10 days). A draft outline and draft versions of the report and short report are to be shared for review and input by C2030E ahead of finalisation.
- Planning and facilitation of webinar, in collaboration with C2030E (+/- 2 days).

Total level of effort: approximately 25 working days.

5. Profile of consultant

Essential

- Knowledge and understanding of domestic resource mobilization and public finance issues, including for health and SRHR
- Understanding of health financing, financing for SRHR and broader financing for development discourse
- Familiarity with donor policies and procedures
- Excellent, demonstrated research skills
- Excellent, demonstrated analytical and report writing skills
- Native-level English skills

Desirable

- Previous research work and/or publications on domestic resource mobilization for health/SRHR
- Working knowledge of other European languages

6. Application process

To apply for this consultancy, please send an expression of interest, demonstrating how you meet the above requirements, and briefly detailing how you would plan to carry out this assignment, the estimated duration of the assignment, your times of availability for undertaking the assignment and your daily rate. Your application should also include your CV, including contact details of two referees, a list of previous publications and research work and two writing samples.

Please submit your application to Raffaella Dattler at rdattler@ippf.org.

Deadline for submission is **Wednesday, 15 July 2020, COB.**

For more on Countdown 2030 Europe: <http://www.countdown2030europe.org>.

For more on the International Planned Parenthood Federation: <http://www.ippf.org>.

¹ See Addis Ababa Action Agenda of the Third International Conference on Financing for Development. Available at: https://www.un.org/esa/ffd/wp-content/uploads/2015/08/AAAA_Outcome.pdf.

² See UN General Assembly Resolution A/RES/74/2: Political declaration of the high-level meeting on universal health coverage. Available at: <https://undocs.org/en/A/RES/74/2>.

³ Countdown 2030 Europe (2018). Contraceptive supplies financing: what role for donors? A guide for advocates. Available at: https://www.countdown2030europe.org/storage/app/media/uploaded-files/C2030E_Contraceptive%20Supplies%20Financing_Donors.pdf. Short version: Countdown 2030 Europe (2018). Contraceptive supplies financing: what role for donors? A brief guide. Available at: https://www.countdown2030europe.org/storage/app/media/uploaded-files/C2030E_Contraceptive%20supplies%20financing_a%20brief%20guide%20FINAL.pdf.