

Strategic Partnership and resource mobilization for SSC: Perspectives from India

By:

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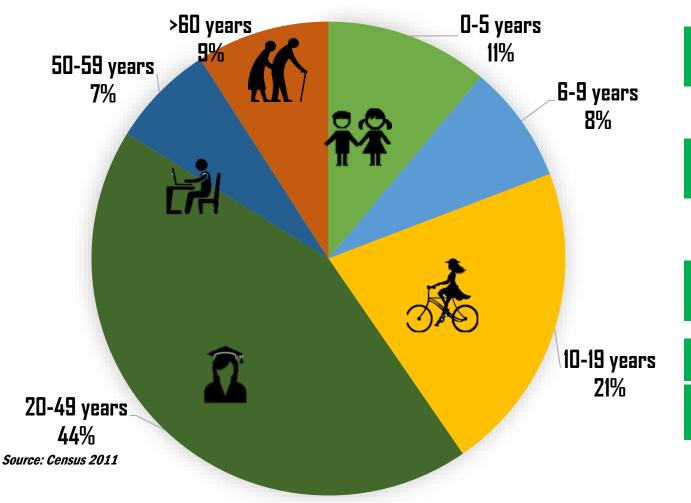






India-Huge population: Strength as well as a challenge





1.3 Billion + People

27 Million+ Deliveries per year

253 Million+ Adolescents

Every minute 38 live births

Every hour 2200 institutional deliveries









For Us Resource Mobilization is a holistic approach involving Strategic Planning



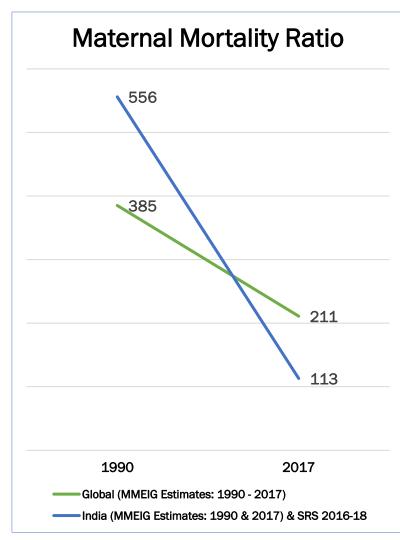








Gains has been substantial in past few years...





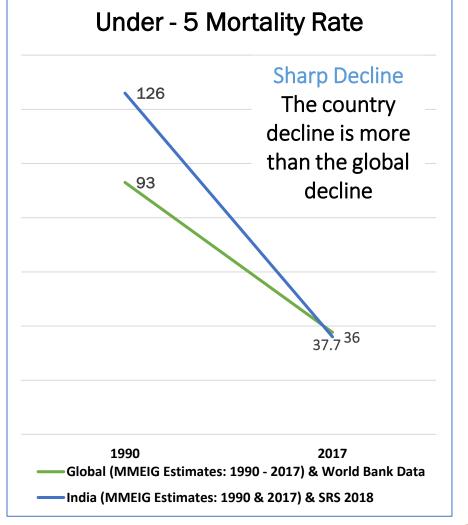
India MMR Decline

71% Between 1990 to 2017

Compound annual rate of decline increased significantly from

5.8% to 8.01%

Between 2007-09 & 2011-13 to 2011-13 & 2016-18



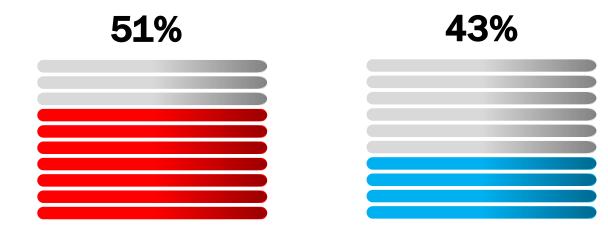






RMNCH+A- Family Planning

Towards smaller, happier, and healthier families



Decline in Teenage fertility (from 16% to 7.9%)*

Decline in Teenage Marriage (from 47.4% to 26.8%)*

*Source: NFHS III and IV)







Decline in **Total Fertility Rate**

NFHS 1 (1992-93) -NFHS 4 (2015-16)



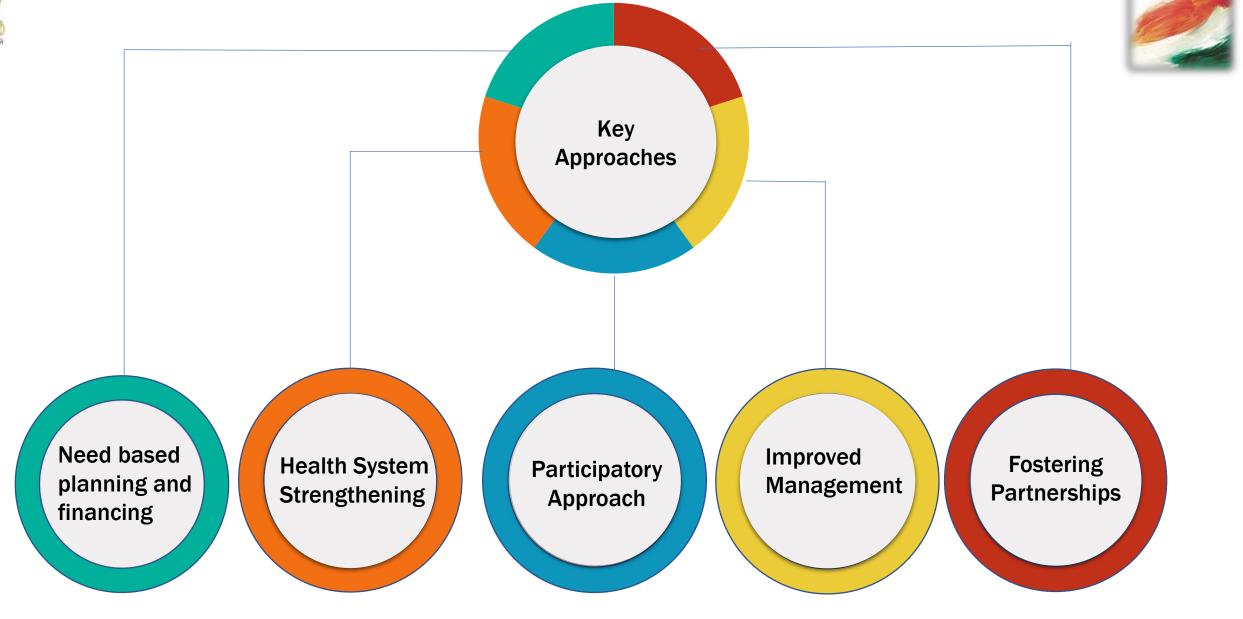
National Family Health Survey IV (2015-16), SRS 2018

















Our Key Principles for ensuring resource



mobilization

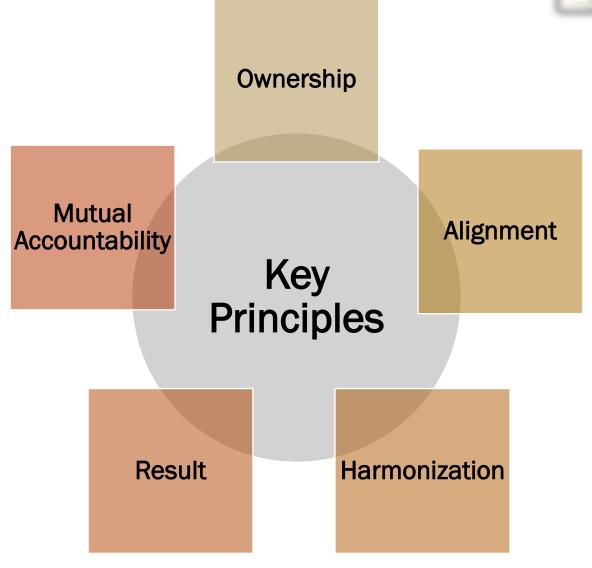
Ownership: Decentralized Planning helps in development of specific strategies by states themselves.

<u>Alignment:</u> Donor partners encouraged to align with these objectives/strategies and use local systems.

<u>Harmonization:</u> Donor partners coordinate, simplify procedures and share information to avoid duplication (regular meetings/discussions)

Results: Overall focus is shifted towards development results and results get measured.

<u>Mutual accountability:</u> Donors and states are made accountable for development results.









India's ongoing efforts



Resource mobilization for the 2030 Agenda: (backed by the strategic planning) (In line with the 70th Session of the United Nations General Assembly- India focused on the 17 SDGs.

- 'Goal 3- Good Health and Well-Being' was prioritized.

 (India is visioning to increase overall health expenditure by 2.5% GDP (National health policy 2017))
- Following strategic actions were envisaged by country for effective resource mobilization:
 - ✓ Optimizing availability of financial resources
 - ✓ Assessment of requirement of financial resources
 - ✓ Effective use of Financing through
 - Outcome Budgeting
 - Expenditure models (PFMS, DBT, e-procurments systems through GeM (Government e-marketplace))-

The systems even worked well during COVID

More than Rs 46,376 Crores (6.6 bn USD) transferred by using Direct Benefit Transfer (DBT) through Public Financial Management System (PFMS) in the Bank accounts of 160 million beneficiaries during COVID 2019 lockdown (Source: pib.gov.in)

❖ Expenditure reforms at state level







Contd... India's ongoing efforts



Resource mobilization efforts during COVID:

Recognizing COVID-19 as a common challenge for the SAARC nations, India proposed the constitution of a SAARC fund for COVID-19 with an initial contribution of USD 10 million.(ndma.gov.in)

Improved supplies for medical equipment and drugs:

- PPE Kits: At the beginning of the crisis, India imported PPE kits. In three months, India became a net exporter of PPE kits (> 20 mn PPE kits exported till Dec 2020)
- N95 Masks: India increased the N95 masks production capacity- now it is more than 500,000 per day (> 40 mn PPE kits exported till Dec 2020)
- **Diagnostic kits:** Initially India imported testing kits for COVID-19. Now almost all components of the diagnostic kits are being made in India
- Covid Vaccine supply: India helped over 150 countries during Covid-19. The Indian private sector vaccine industry is the world's largest supplier of vaccines by number of doses.
- Assistance to SAARC countries during COVID:
 - 20 lakh doses of COVID vaccines, 30,000 RTPCR Kits, 50,000 gloves, 100,000 HCQ to Bangladesh
 - 280 tonnes of oxygen, 26 tonnes of medical supplies and 400mnUSD assistance to Srilanka
 - 550,000 vaccine doses to Bhutan
 - 250 mn USD assistance and 100,000 doses to Maldives
 - Medical oxygen plant, 30,000 RTPCR kits, 23 tonnes of medicines to the Himalayan nation- Nepal.







Strategic partnership and resource mobilization-Additional strategies



- Regular Budget and Earmarked Funding: Decentralized model has been the key to successful implementation capacity building
- Peer to peer learning exchange models are promoted
- Exchange platforms for innovations and best practices
- Involvement of donor partners with a widened donor base
- Setting up National Task Force for Family Planning for advocacy, experience sharing etc.
- Fostering positive political environment
- Universal health coverage with FP as key priority









Key collaboration between MOHFW of India and PPD



- India joined PPD in 1998 at Cairo Board meeting
- India chaired the board of PPD in 2008
- India is providing annually 20 scholarships to PPD member countries from Institute of Health
- India increased its membership contribution from US\$ 40.000 to US\$ 80.000 since 2010.
- India provided US\$ 100.000 for the building construction
- Indian High Commission in Dhaka supported MOHFW of Bangladesh through PPD in building 36 community clinics. With a grant of US\$ 1000,000.









If we want the world to be a better place to live, we have to treat it as one unit.

If we want economic growth to be pervasive, we have to make people its partners.

If we want the process of development to be sustainable, we have to work with the environment.

-Shri Narendra Modi

Thank You



