



2017

REIMAGINING THE GLOBAL HEALTH CONVENING: WHAT'S NEXT?



CONTENTS

- 3** INTRODUCTION
- 5** LOOKING AHEAD: WHAT COULD A REIMAGINED GLOBAL HEALTH CONVENING LOOK LIKE?
- 19** IN FOCUS: FINANCING AND INNOVATION IN GLOBAL HEALTH 2016 FORUM
- 28** WHAT'S NEXT?

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INTRODUCTION

The global health community is at a unique turning point. While health around the world has improved rapidly in recent decades, several fundamental shifts are changing global health as we know it and bringing new challenges to light.

Health agendas no longer revolve solely around infectious diseases – for example, tackling the “big three” of HIV/AIDS, tuberculosis, and malaria – but rather emphasize improving healthy life expectancy by addressing non-communicable diseases and neglected areas such as mental health. This shift has led to a tension between horizontal efforts and vertical efforts, as many health leaders say it is time to view health systems holistically and build strong primary health systems rather than merely building programs to tackle specific diseases. Amid these changes, the question of how we finance sustainable health systems has become more important than ever. With the recognition that grant funding for health is flattening – and that we still face an estimated \$2.5 trillion annual funding gap to achieving the Sustainable Development Goals – countries and programs are searching for ways to reduce their dependence on donors by mobilizing new sources of funding such as private sector and domestic investment.

What does this all mean? New challenges require new thinking – beyond “business as usual.” More than ever, we see an urgent need to bring together diverse and disruptive groups of people from across sectors to join the conversation around solutions. By linking these perspectives and approaches, we can identify new models and collaborations that

will thrive in this new environment and enable us to drive progress towards our long-term collective global health goals.

One way to activate these groups is through convenings. Convenings have the potential to spark conversations among diverse voices that can ultimately become collaborators in change. 2016 in particular saw some major

“Many global health convenings focus on policy. That is critically necessary...but we need more San Francisco and less Washington.”

– Gerhard Pries, Sarona Asset Management

changes in the global health convening space. One critical convening – the Clinton Global Initiative (CGI) – wound down, leaving behind an important legacy of driving powerful players towards commitments to action around social, economic, or environmental progress.

Other new models of convening were tested in 2016, including the **Financing & Innovation in Global Health (FIGH) forum**. Initiated by Johnson & Johnson and supported by the

Global Development Incubator and Dalberg Global Development Advisors to create the neutral platform, FIGH was an attempt to bring diverse groups together to ask hard questions about the long-term outlook of global health. Partners included traditional and non-traditional groups that came together to spark the deployment of blended finance, creativity, entrepreneurship, and technology to unlock greater resources for public health.



FIGH saw Ministers of Finance in conversation with Ministers of Health, investors speaking with social entrepreneurs, and business executives building relationships with global health practitioners, among other atypical combinations. Ultimately, we were thrilled to see the richness of discussion and live, concrete opportunities that came out of FIGH, and we left with the feeling that it had the potential to act as a blueprint for future global health convenings.

Together, the void left by CGI and our learnings from FIGH give us the opportunity to step back and consider thoughtfully: **How can a “reimagined” convening most effectively drive financing and innovation in global health?** In this report, we’ve gathered responses to this question from leading thinkers across global health in hopes that future convenings can incorporate this feedback and more effectively activate participants for change.

To capture the diversity of perspectives critical to global health today, we spoke with over 30 people from different sectors and roles – from a sustainable finance leader at JPMorgan to a social entrepreneur increasing access to

medical oxygen in Kenya – and have presented their ideas in their own words.

Our interviewees shared a common sense of urgency around the need to set catalytic, transformative change in motion. Among other themes, they told us:

- The best convenings avoid becoming echo chambers – a truly diverse group of perspectives in one place can go a long way
- Neglected health challenges benefit enormously from the “stage and spotlight” convenings can offer, especially if events can facilitate connections to new resources
- Openness around failures and lessons learned is critical to a productive convening – safe spaces should be interspersed with opportunities for visibility

Of all the perspectives in this report, though, one message came through most strongly – the long-term outlook of global health hinges on the field’s ability to link new resources to new opportunities. The challenges global health efforts face in today’s rapidly changing market are enormous, ranging from high barriers to scale, a tendency to work in silos, and the lack of a well-functioning marketplace. Reflecting these challenges, we see a unique opportunity to take a global health convening to the next level – a convening of the future could play several roles, including driving more grassroots engagement, creating neutral collective action platforms, facilitating physical marketplaces, and curating investment-ready opportunities to mobilize resources more quickly. Now more than ever, it is critical to unlock the financing and innovation needed to reach our collective goals. We come from a variety of sectors, disciplines, institutions, and locations but together can move closer to a world in which all sectors come together to play an active and informed role in addressing the world’s most urgent health challenges.

Moitreyee Sinha
Director, Beyond Health
Global Development
Incubator

Erin Barringer
Associate Partner
Dalberg Global
Development Advisors



Dalberg

LOOKING AHEAD

WHAT COULD A REIMAGINED GLOBAL HEALTH CONVENING LOOK LIKE?

Understanding what can make a convening truly beneficial to global health is not an easy task. The Global Development Incubator shared some initial perspectives in a recent article titled [Rethinking the Global Development Convening](#), which included the idea that future global convenings will be most successful if they embrace their role as galvanizing events for multi-stakeholder initiatives, harness a multipolar power dynamic to spark creativity, and try blended funding commitments.

Those ideas were a start, but with this report we've gathered input from thought leaders across sectors – including government officials, investors, corporations, donor institutions, foundations, academic institutions, think tanks, developing country health practitioners, and technology innovators – to understand their

perspectives on two questions:¹

- What are the biggest challenges in global health today that you are working to address?
- How can a reimagined global health convening bring the most value to tackling those challenges?

As many of our interviewees spoke at or participated in the Financing & Innovation in Global Health 2016 forum, we also asked them to reflect on how FIGH 2016 did or did not meet their criteria for a valuable global health convening. For reference, the section of this report starting on page 19 provides more detail on the structure, content, and participants of FIGH.



“Global health research from an academic or NGO perspective is deeply embedded in the tradition of public health – which is appropriate, but also limits the ability of the community to leverage partnerships with for-profit companies that are responding to market opportunities.”
–Beth Kolko, Shift Labs

¹Interviews have been edited and condensed for clarity



GLENN ROCKMAN

Partner

Global Health Investment Fund

On the biggest challenges in global health today:

I'd say it's binary. You have big challenges like ending mother-to-child transmission of HIV, reaching the 90-90-90 AIDS goal, combating antimicrobial resistance – those that get enormous attention from donors – and on other side you have the neglected issues that are affecting people dramatically in poor places around the world. These ones don't receive much money or attention, but could be eradicated with a concerted effort. We see opportunities to channel resources to both of those two ends on the barbell.

On how a convening can bring the most value to tackling these challenges:

I liked the idea at FIGH of bringing financiers and global health professionals together in same room to talk about where their respective puzzle pieces might actually fit together. In my experience, that's rare. In traditional biotech, you see several big events per year, with startups talking to investors, and that's the source of pipeline and investor activity for funds and VCs, and the source of capital for companies. FIGH seemed to be the first attempt at lightly doing that with a focus on global health.

We hope future convenings can ensure that innovative finance – even though it's becoming hackneyed – is something people are talking about and looking for ways to apply, simply because of how limited donor funding is. The more convenings can advocate for commercial and quasi-commercial approaches, the better.

ADRIAN THOMAS

VP, Global Market Access, Commercial
Strategy Operations & Global Public Health

Johnson & Johnson



On the biggest challenges in global health today:

A significant challenge that we face in improving global health is financing the investments required to drive innovation in technologies and delivery that are needed to drive health outcomes in resource limited settings. Incentives are required to fully bring private sector capabilities to address the long term investment needs. We need to design technologies and delivery programs that are not only sustainable but also flexibly can take into account issues that may not arise as crucial until many years down the line. Johnson & Johnson Global Public Health strives to make change in this space by engaging in R&D that is targeted against the needs of people in resource limited settings from an early stage, by planning for sustainable access through strong infrastructure and reliable country-level funding, and by working with partners to help strengthen community and national health systems required for delivery. Importantly, it is critical to develop the evidence base to support investment in long term solutions.

On how a convening can bring the most value to tackling these challenges:

We find that convening is most effective when the right players are at the table uniting for a common purpose and bringing a critical mix of expertise, experience, authority, and financing to emerge with a clear set of actions. Convening is typically a precursor to the formation of collaborations. Throughout history, the most challenging public health threats were overcome through collective action and collaborations. No one government, organization, or company can solve the complex challenges we face. Sustainable solutions that improve global health can be developed by converging on goals, leveraging experience, streamlining approaches, incentivizing investment, and sharing information transparently.

**KATIE TAYLOR**

Former Deputy Child and Maternal Survival Coordinator

Bureau for Global Health, USAID

On the biggest challenges in global health today:

Sustainability – it's going to sound trite, but global health is still a predominantly grant-based system. I love that FIGH was focused on financing, because we need to figure out how to support improvements in health and wellbeing in ways that mobilize

domestic financing and private sector resources. The core approach to date do not do that, and the prototypical "global health" people come at it from a health perspective only. They're amazing experts in different health subjects but don't necessarily speak finance – one of biggest issues is how you bridge that gap.

On how a convening can bring the most value to tackling these challenges:

Full disclosure: I used to be allergic to the word "convening." I didn't understand what people got out of them, but now I've discovered that there are at least three ways to make convening useful. First, you can have a convening for political motivation. It's important to get political people, heads of state, celebrities, etc. to make a public commitment to something at a convening; it allows you to hold their feet to the fire. Second, you can have a pledging convening, or a conference that creates momentum through money – an example of this is how GAVI got started. Third, you can have a technical convening, focused on one specific issue – for example, the Global Maternal Newborn Health Conference that was in Mexico City in 2015. If you're not committing to one of those, I don't think broad convenings are that effective. It's important to confirm what you're really trying to do.

SARAH MARCHAL MURRAY

Former Chief Operating Officer

The END Fund

**On the biggest challenges in global health today:**

While we're focused on a vertical track at the END fund – controlling and eliminating neglected tropical diseases – we try to also under-

stand what we can leave behind that's not just vertical but what can influence health at more of the systems level. We're trying to humbly recognize that we were set up to focus on a narrow set of diseases, but with humans at the center of what we do, we're trying to participate in those larger broader conversations.

On how a convening can bring the most value to tackling these challenges:

We put a high priority on face to face time – that's high stakes time. We still feel like that's most powerful way to create partnerships and our whole model is about partnerships. We're also always looking for core speaking opportunities especially when it's not just the same old audience. What I liked about FIGH was that it wasn't just a DC NGO talk fest, which can happen easily. In that same vein, future convenings should feel more like a symbiotic thought process with people who attend, with the goal of elevating consciousness a bit. Conferences are challenging if you think efforts are going to end at the conference. The conference should just be the beginning.

BERNARD OLAYO

Founder & Chairman

Center for Public Health & Development



On the biggest challenges in global health today:

The biggest challenge is not a lack of knowledge or of medicine development, but rather a lack of coordination to effectively address the issues. The major problem we're facing is the fragmented approach to health we currently see. With more coordination, we could dramatically improve the efficiency of our work, but we have too many parallel processes running but not talking to each other, from inefficient governments, especially in developing countries, to donors with various issues they're trying to invest in.

If we were more efficient, we could solve maybe 80-90% of our problems –including child survival and maternal health. Only around 10-15% of health issues require complicated solutions – for example, there is nothing unknown about how to prevent women from dying; it's just a matter of linking the women at risk with the right services. That's why we're failing.

On how a convening can bring the most value to tackling these challenges:

As you go into many conferences, you hear the same loud voices over and over again. If FIGH or future convenings could avoid that, and could bring something new, then that would be great.



LESLIE HARWEL

Vice President, Sustainable Finance

JPMorgan

On the biggest challenges in global health today:

We sit within CSR at JPMorgan, but many of my colleagues and I have banking and finance backgrounds. Many people who work in typical global health are policy and grantmaking people. We see a good part

of our role as being a resource for field building, and for being there when people need to pull us into conversations to help them think through funding side. We try to be a bridge builder in those types of dialogues with our clients. In a convening setting, we've found it can help to have the "let's be real here" conversations – some financing ideas in health are conceptually beautiful, but need grounding. We try to help folks figure out what we actually can do, realistically.

On how a convening can bring the most value to tackling global health challenges:

Going to Clinton Global Initiative events, I always felt they were trying to do everything, be everything to everyone. There is an opportunity with CGI dissolving to create a convening that is more sector- and challenge-driven. I think that's gotten lost a bit. There is a need to understand commitments and encourage different institutions to make those, but there are so many challenges to doing those successfully. If these commitments are going to be successful, they are going to need to be multi-stakeholder partnerships, and those may take 1.5-2 years if you really want to be effective and get to point where you're not just talking but actually doing.

One approach could be to insert global health more into the agendas of the bigger healthcare conferences, like the JPMorgan Healthcare Conference. This would mean bringing global health more to the mainstream and getting people in those settings to talk about the issues we care about.

KARLEE SILVER

VP, Programs

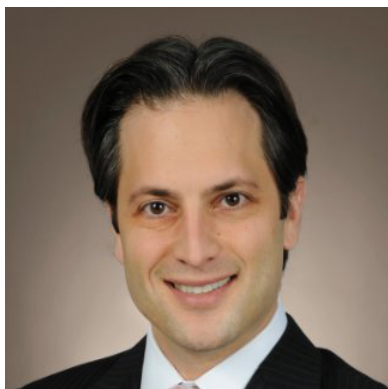
Grand Challenges Canada



On how a convening can bring the most value to tackling global health challenges:

There are too many convenings out there. I tend to prioritize opportunities where our innovators are getting good facetime with real investors – people actually prepared to make a deal on the spot or at least start a serious conversation about business being done. For us, investors include other foundations, but also angel investors and governments and local demand-creation groups – those are the groups that are a little more unique. It would be great if you had a convening that could truly make those productive connections happen, for example, to have a country's minister of health there with its minister of finance and to have them say we want 15,000 of these interventions in our country in the next 6 months.

I'd also be interested in hearing from people who are properly playing with new financing models or activating capital that is not usually in global health – but not just the nicely polished ones; I'd also want to see the deep and dirty side to understand what mistakes were made and which should never be made again, through the practitioner lens.



JONATHAN KFOURY

Managing Director

L.E.K. Consulting

On the biggest challenges in global health today:

Antimicrobial resistance is most important global health issue to me at the moment. It's a top-of-mind issue for NGOs and governments, as it should be, but is also an issue they can't solve without finding ways to partner successfully with pharmaceutical companies. At the

same time, pharmaceutical companies can't really solve the problem effectively without NGO and government support. It's a unique situation in which the private and public sectors have to come together or the situation will be completely broken. We see doomsday predictions of the number of people who will die from infection, and the costs that will continue to rise unless there's something done. Rampant antimicrobial-resistant infection could undermine all the progress we've made towards the SDGs, so action now is critical.

On how a convening can bring the most value to tackling these challenges:

On the issue of antimicrobial resistance, there is not a lack of interest but a lack of coordination and a market failure. Convenings have the potential to help facilitate the conversation and push the thinking forward around this ticking time bomb.

ASHA VARGHESE

Director of Global Health Portfolio

GE Foundation



On the biggest challenges in global health today:

There is no shortage of initiatives in global health today; the unfortunate part is that with too many initiatives we tend to lose focus. Think about polio, for example. It's great how close we are to eradicating it but it required creative collaboration, focused effort, and committed financing to get it done! Perhaps it's my systematic approach on strategy to execution – imagine a world with dedicated multi-sector partnerships and collaboration focused on specific priority areas in the global health space. We've certainly gotten better at this as we've gone from the MDGs to the SDGs but the gap will not get closed unless we stop duplicating efforts, which leads to wasted resources.

On how a convening can bring the most value to tackling these challenges:

Convenings should focus on deliberately bringing unlike minds together and provide a platform to curate partnerships with purpose. There are so many convenings in the space – to me personally, listening to panels, it seems like everyone has the same goal but different approaches to it. I don't want to sit through another conference talking about partnerships and breaking silos but not see it materialize. They are all great platform to share successes and failures but there should be a way to take it beyond the walls of the gathering to making impact on-the-ground. For example, CGI had a purpose – it definitely held people accountable to commitments in addition to creating a fun environment that promoted partnerships. Lately, it is great to see more and more conferences that are entrepreneurial in nature. So I think the core question is: how do we

make a convening more action-oriented?



CARA BRADLEY & ELAINE GIBBONS

Director & Executive Director of
Global Corporate Engagement

PATH

On the biggest challenges in global health today:

Elaine: We see a few key trends influencing global health generally: urbanization, changing populations, climate change, food security and nutrition, the massive humanitarian and refugee issues, and more. But if you look a level above the front lines at broader global health systems, we see a huge challenge of funding. The ecosystem that would normally support global health does not function properly – there are a lot of distractions, and many significant health trends put pressure on that system, whether noncommunicable diseases, pandemic preparedness, or other more traditional infectious diseases like malaria or TB.

If you look at the more material challenge, we have the SDG framework operating in that environment. We're being challenged at the macro level on a number of significant fronts and still have some very concrete objectives to achieve by 2020. From a health perspective, we're more integrated and connected than we've been before. The MDGs, for example, had very clear health goals, but now we just have one, SDG 3: Good Health and Well-being. But across all 17 of course so many impact health. So, we have a clear framework but we're operating in a more challenging environment with slightly less clear objectives.

Cara: Where we see promise is in the multisectoral efforts, whether they're innovative financing or partnerships that help deliver the SDGs. We have space for collaboration that hasn't necessarily been fostered before, and a lot of those are taking place for first time. With that framing you get into challenges at the operational level.

On how a convening can bring the most value to tackling these challenges:

Elaine: Convenings can bring some value to us as individuals, and some to us as organization. Where we've seen value at the institutional level is in traditional convenings that bring together panels of thought leaders to share their perspectives.

But in that segment the ones that are most useful have been the ones that bring together the most different group of players. Devex World was one of the most effective one recently because it had some of the usual players with good, credible thought leadership but also did a really nice job of bringing in new players, such as the technology sector, for example, who aren't always as visible. Impact-wise, we have had successful convenings of coalitions with a strong country focus – in other words, convenings that bring together cross-sector players all focusing on the same country.

Cara: I have a personal preference for events that are outcome-oriented. We spend a lot of time in the global health space talking to the same people in the same circles again and again – those

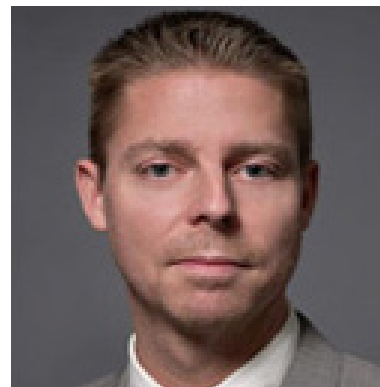
will happen organically. Successful events can go beyond sharing what's going on in the space, and elevate to actual actions or commitments.

There would be enormous value in a convening that could have a truly productive dealmaking feature with investments that are investment-ready and a high caliber of investors. Of course it takes a lot of prep work to identify the deals and get the right people in the room, which requires a lot of discussions beforehand so you can make actual announcements there. The convener would need to segment the opportunities – either by focus on a particular society or a particular health area, and also by stage of opportunity, whether startup or scale. That articulation of funding tranches would allow you to actually demonstrate a couple deals at each stage and help connect those with investors.

MARK ALLEN

Senior Program Officer

Merck for Mothers



On the biggest challenges in global health today:

The biggest challenge to me is always the financing piece – it permeates across all sectors of global health, and you always see a stronger push for mobilizing and catalyzing domestic resourcing and international resourcing. The desire for assisted support continues to grow fatigued and everyone is asking, how can it be used more catalytically to get more out of investments?

As more innovative financing and development impact bonds come out there and get tested, it does a couple things: first, it hopefully attracts new money to fill those gaps and second, hopefully that money aligns incentives in terms of design of intervention and motivates better outcomes. There is real potential in terms of how we use health financing as a means to reimagine development and get away from the older ways of doing it. We've seen some good results but if we use the same metric of getting ROI as we used before, we'd fall short in the global health space – it's a matter of changing expectations.

On how a convening can bring the most value to tackling these challenges:

I think the most value of a convening comes from exchange of ideas, some new insights, and connecting people so you can broker some partnerships. In terms of content, we're always looking for speakers to include a specific example that can underscore their point. When you attract some of the bigger names at conferences, they tend to speak at the 30,000-foot level with a lot of rhetoric. Those remarks might be nice and polished but then the audience is still left wondering, "How?" Examples always help support that – I'd love to see a convening where every panelist must come with a specific example that illustrates their point. Ideally then you could also force panelists to draw implications – it's easy to speak about the issue and what the outcome was, but it's important to dig deeper and ask "so what?" and "what does that mean for the broader community?"

This also leaves room for sharing failures in an honest way. Many public health folks or donors have an aversion to declaring their efforts didn't work, as if it's somehow an indictment on the approach or they're worried about other funding in future. But pushing a failures agenda is interesting and we can learn a lot of lessons from failures. At the end of an investment, if the answer is no, we should find that helpful.



PRIYA SHARMA

Policy and Innovative Financing Advisor

Center for Accelerating Innovation and Impact, USAID

On the biggest challenges in global health today:

The biggest challenge we're facing right now is the shifting donor landscape where we're seeing actual aid (from the likes of USAID and bilateral sovereign donors) leveling off and in some countries decreasing, but we're still seeing a lot of need in the places where we're working. There is tremendous economic growth in many countries we're working in, and we're also seeing FDI dwarf ODA in many countries. With these trends, our position as a traditional donor changes a little – before, it was good enough for us to just buy commodities, now our funds are making up a smaller portion of the pie.

So, as we're becoming a smaller player, how do we continue to have an impact? We have a seat at the table to make sure primary health care gets the attention it needs even in countries that can now afford things like oncology treatment centers or top-notch hospitals. How do we make sure the poorest of the poor are still getting served? How do we use what we have – grant funding, with some flexibility – to leverage more money and retain that focus on core areas?

On how a convening can bring the most value to tackling these challenges:

Usually at convenings, I leave with a feeling like, "Wow, that was really cool," or, "It was really great to have that group of people in the room." I've never really walked out of the room and said "I see what's going to come out of this."

One of the things I liked about FIGH was to see the increasing sophistication of the financing dialogue even since I joined USAID. Four years ago, it would have been me on a panel with five other donors talking about financing, whereas at FIGH I was the donor voice. It's great to see new players who usually wouldn't be involved, and awesome to be able to both have that conversation with them and show the rest of the more traditional health space that there is a lot to be accomplished on the health side if you can leverage financing to do it. We're now able to more clearly make that link and underscore why it's important to bring in new funding not just from donors.

It would be useful for a future convening to get that same group together discuss how health outcomes are improved by what they do through financing – or in other words, to take that conversation down another level to understand what each group's end motivations are for getting in the blended finance space.



DORJE MUNDLE

Director, Healthcare

BSR

On the biggest challenges in global health today:

We're part of a core global health team at BSR that works with over 20 healthcare companies on an individual basis but also on a collaborative action basis...This year, our strategic focus is on innovative financing as a scale-enabler for driving systems-level action on global health.

One key challenge we see is a critical deficiency of awareness among senior decision-makers in health care and beyond about the potential for innovative development financing and impact investing too. We're trying to highlight the potential intersections with their impact agendas, both commercial and philanthropic, and trying to unpack that at a sectoral level.

On how a convening can bring the most value to tackling these challenges:

Some major benefits of convenings are the ability to network and hear from others, especially in nascent fields that are still undeveloped. Everyone is learning, and everyone is experimenting, so it's still valuable for everyone to come together periodically and hear from others. It can also be useful for informal benchmarking, or giving people a chance to judge how far along they are on some sort of spectrum. Both of these are more effective when you're able to bring together unlikely players – a great success of FIGH from what I heard from colleagues was that it got a lot of the unusual suspects in the room – pharma, government, social enterprises, and more – so the attendee list proved helpful for everyone. It's important to have this breadth of stakeholder types represented, but also helpful to have a more focused thematic context.

ANDREW STERN

Founder & Executive Director

Global Development Incubator



On the biggest challenges in global health today, and how a convening can bring the most value to tackling those challenges:

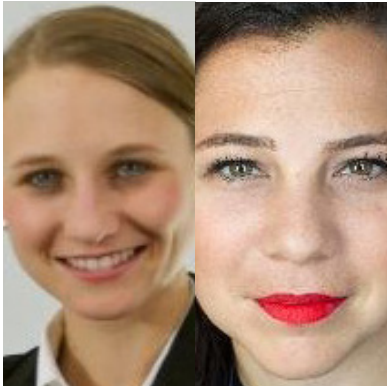
This isn't to diminish the great health progress made over the last 20 years, but if you look at some key efforts, they've been very focused, and that's why they've been successful – think vaccines, for example.

At its simplest, a vaccine is getting people to administer one or two doses, and this effort can almost run like campaign or militaristic effort. This sort of job is important, and best suited for an individual organization. We've made good progress on those types of efforts, but where we're going now with a focus on healthcare systems requires a significant level of complexity – for example, when dealing with chronic disease or other broader health outcomes.

These sorts of challenges require both behavior change, preventative medicine, and medical treatment – we're talking about a complexity that requires multiple interventions and several actors. That act of bringing a lot of people together is hard to do. We saw from our recent study called "More Than The Sum of Its Parts: Making Multi-stakeholder Initiatives Work" that we need various factors to build these efforts successfully, such as forcing events, forums, and places for people

to come together. That's where convenings like FIGH can step in. Mental health, for example, is a complex issue that stretches far beyond health to touch everything from economics to education and everywhere in between. There's no way you could run a single campaign around that.

One obvious example that we can learn from today is HIV/AIDS and the complexity there. After several efforts the movement was able to reach something through collective action that can provide us with a blueprint or template of sorts, especially for issues today that are neglected or not considered "sexy."



CLAIRE QURESHI & PHYLLIS HEYDT

Office of the UN Secretary-General's Special Envoy for Health in Agenda 2030 and for Malaria

On the biggest challenges in global health today:

Claire: The challenge of financing is one of our key priorities, for all manner of programs but especially for community health in unstable environments. We see the need for domestic resource mobilization and for donors to align and be more transparent in their commitments. Capacity is also a big challenges we see, especially among teams in ministries that are tremendously stretched. It's hard to handle the changing environments when they're very thinly staffed. Finally, a key challenge is the gap between health and other sectors, even when they're so interconnected. We're thinking about synergies between health and fields like agriculture and education, and trying to find donors who are willing to invest in those overlaps

Phyllis: In the transition from the MDGs to the SDGs, which from a health perspective are broader and less focused, the global health world needs to ensure continued collective focus on key interventions and geographies that will reduce child and maternal mortality rates. In doing that, the ongoing work on balancing disease-specific programs and overall system and platform strengthening, such as for community health, will be important. But the biggest challenge is probably the integration of and sustainable long-term financing for all health systems work.

On how a convening can bring the most value to tackling these challenges:

Claire: Both FIGH and CGI have been important for the global health world as forcing moments to make announcements, and bring initiatives we all work on to the light – they're useful for that. They're also helpful to meet with people and engage in person. For future convenings, I would focus on a chance for partnerships to be discussed, built, and announced, and to have a lot of time for informal discussions among partners. The structured content is better in smaller groups than in large formats.

Phyllis: In our experience convenings can be very effective when they happen as part of an overall strategy or plan for a certain agenda. They can then be used as action-forcing events which create a rush to get work outputs, commitments, partnerships, political decisions and more done in time for a convening, and make the convening as such catalytic.

AMANDA GLASSMAN

Vice President for Programs, Director of
Global Health Policy, and Senior Fellow

Center for Global Development



On the biggest challenges in global health today:

I focus mainly on the challenge of improving the value for money in health systems. I bring the lens of effectiveness, efficiency, and resource allocation to various issues. Globally we're looking at thematic areas including public goods in health, outbreaks, drug resistance, and outbreak preparedness and specific health problems including noncommunicable diseases and mental health.

On how a convening can bring the most value to tackling these challenges:

At a minimum, convenings should be good entertainment. We do so many meetings in our field that speakers need to bring new ways of presenting, otherwise people just end up on their phones. I find the standard speech and panel routine is getting a little old. A lot of events are about getting people talking about certain issues, and I think that can have value.

Overall, though, it's about going back to the basics and thinking about what you're trying to accomplish, and shaping the event with that in mind. I tend to attend a couple different kinds of events. First, there are some that are about elevating the profile of an issue for policymakers in DC, in which case I'll try to bring the people whose behavior I'm trying to change. Second, you have events that are about understanding an issue better, for example with new analysis or a new perspective. Third, there are the events that are simply advertising what a specific group did or accomplished – I'm trying to get this kind of event to be more entertaining. And finally there are meetings where I'm trying to get something done – whether getting commitments, securing funding, or influencing policy – and in those the setup of the convening will look different.



ERIN BARRINGER

Associate Partner

Dalberg Global Development Advisors

On the biggest challenges in global health today:

Health financing is definitely one of the toughest challenges we're facing. The problems we're trying to tackle in health are so huge, and we recognize we don't necessarily have the money to tackle them, so we need to figure out creative ways to finance them. Building out universal health coverage, for example, requires bringing primary health care to over 7 billion people. How do you even think about financing that in a way that's sustainable?

On how a convening can bring the most value to tackling global health challenges:

A good convening can promote a new level of understanding. If we can understand our different worlds, we can more effectively find relationships and opportunities to collaborate across them. I was struck at FIGH by how differently the global health and financing communities talk about

the challenges we're facing and the solutions we could bring to bear on those challenges, even when we're all working towards the same impact.

It became apparent watching FIGH panels how different the languages are that we speak, and how differently we think about the path to impact we hope to see. On one panel, for example, the moderator had to ask financiers explicitly to walk through what they meant when they said terms like equity, market-rate returns, and blended finance. It led me to realize, first, that even though we're all working towards the same end, we're still very siloed. And second, that we need to be better about simplifying – on both sides – how we talk about the work we're doing. Both health people and finance people can be very technical, and this makes it so hard to collaborate in a meaningful way.

FIGH represented an opportunity to bring people from both finance and health fields together in a safe space to air our lack of understanding of each other's worlds – and most importantly, start to chart our collective path forward. I remember seeing a USAID grand challenge innovator from a small scale startup talking to someone from a corporate team and planning a meeting the following week to talk about how they could scale the product in sub-Saharan Africa. Moments like these show the power of bringing together people who are working towards the same end goal but are moving in different orbits.

DANNY EDWARDS

Research Programme Manager
Access to Medicines Foundation



On the biggest challenges in global health today:

A recent but growing challenge we see is the increasing shift towards nationalism away from multilateralism (for example, the UK and US's changing political landscape). This overarching challenge links to other health threats, which an inwards-looking approach from states has the potential to magnify, such as antimicrobial resistance, accelerating climate change, emerging infectious diseases, and more. States may move more towards a security-based model when considering these health threats (for example, bolstering their own security against antimicrobial resistance or emerging infections) which, while it may result in additional security-related funding, would also undermine states' ability to collectively and diplomatically communicate and respond to such threats, and could also affect cooperative opportunities for R&D.

This move towards nationalism has at least in part influenced by a reaction of the working classes and the poor to growing inequity, which is itself an additional multi-faceted challenge to global health. There is ample evidence that growing social inequity (e.g. education, income, gender, and ethnicity) all have a significant influence on the health of a population.

Finally, it is clear that the growing burden of noncommunicable diseases in low- and middle-income countries – connected to increased urbanization, changing lifestyles, and an aging population – is clearly going to be one of the significant global health challenge in the coming years.

On how a convening can bring the most value to tackling global health challenges:

Given this retreat behind borders, it seems that encouraging convening of groups with different

interests but shared goals in global health is particularly important now. The kinds of challenges we are facing need to be considered by all actors with a stake. Take the impact of climate change on health, for example. This is obviously a cross-sectoral challenge (it doesn't simply include the pharma sector, but rather includes pharma and other sectors including businesses working with civil society, governments, and academics.) Given constraints on funding sources, sustainable business models need to be identified to address these challenges.

Convening is also a way to share successes – it's important for others to learn from effective, scalable, and sustainable practices so we can understand the underlying challenges apply those lessons to other contexts. However, convening as a way of tackling challenges bears the greatest chance of impact if people with the ability to finance and scale-up are also in the room – this means getting banks, investors, ministers of finance, and others like that in the room.



IN FOCUS:

FINANCING AND INNOVATION IN GLOBAL HEALTH 2016 FORUM

As several interviewees noted in the previous section of the report, the Financing & Innovation in Global Health (FIGH) 2016 forum represented one approach to gathering unusual groups of people together to discuss hard questions around the future of global health. This section provides an overview of the structure, content, and participants of FIGH 2016.

FIGH, initially conceived by Johnson & Johnson, was held April 14-15, 2016 in Washington, DC, where it was hosted by the Global Development Incubator and Convergence. The forum drew over 250 participants including government officials, investors, corporations,

“One of the things about FIGH that was refreshing were the new faces and organizations represented... We need to amp up the diversity.”

–Peter Vanderwal, Palladium

donor institutions, foundations, academic institutions, think tanks, developing country health practitioners, financing and technology innovators, and more. FIGH speakers included Dikembe Mutombo (humanitarian and former NBA star), Dr. Isaac F. Adewole (Minister of Health, Nigeria), Anca Dragu (Minister of Finance, Romania), and Dr. Paul Stoffels (Chief Scientific Officer, Johnson & Johnson).

FIGH benefited from a robust and cross-sectoral group of sponsors – Johnson & Johnson, Dalberg Global Development Advisors, PATH, L.E.K. Consulting, JPMorgan Chase & Co., PwC, and GE Foundation – and partners –

Center for Strategic and International Studies, Elizabeth Glaser Pediatric AIDS Foundation, EngenderHealth, Funders Concerned About AIDS, GBCHealth, Global Health Council, Grand Challenges Canada, Harvard Global Health Institute, Johns Hopkins Center for Bioengineering Innovation & Design, Office of the UN Secretary-General’s Special Envoy for Health in Agenda 2030 and for Malaria, and USAID.

Participants joined a variety of action-oriented town halls, interactive workshops, investment circles, interviews, and plenaries at the forum, with the hope that they would leave with:

- New exposure to the latest tech, business, financial, and partnership models improving global health
- New connections with thought leaders, innovators, and investors across sectors thinking differently about global health who can partner with them in the future
- A plan for how they would contribute their unique position and expertise to the broader collective action driving global health progress in innovative ways

Standout discussions and plenary sessions zeroed in on a variety of critical but often neglected topics in financing and health, including:

- Trends and Disruptive Innovations in Global Health Technology, Finance, Policy and Partnerships
- Making the Case for Investment in Mental Health
- Beyond Health: Social and Economic Determinants of Health
- Making the Right Investments to Support Innovation and Pandemic
- Simplifying to Scale: Reflections on the Promise of Innovation in Global Health

Other notable features of FIGH included:

SESSION SPOTLIGHT: DEVELOPING BLENDED FINANCE SOLUTIONS FOR HEALTH

FIGH 2016 shed new light on the burgeoning field of blended finance, which refers to the strategic use of public and philanthropic funds to attract private capital towards investments that can deliver development impact in emerging and frontier markets. Blended finance is more important than ever as the global development community looks to use creative financing approaches to close the estimated \$2.5 trillion annual funding gap needed to achieve the Sustainable Development Goals.

One session titled “**Developing Blended Finance Solutions for Health**” explored the need and case for blended finance for health, and sought practitioner and investor insights on best practices in terms of design, structuring, fundraising and investment for projects and funds that involve blended finance. The discussion was moderated by Joan Larrea (Convergence) and featured participants Gerhard Pries (Sarona Asset Management), Matt Arnold (JPMorgan Chase), Peter Vanderwal (Palladium), Priya Sharma (USAID) and Richard Greenberg (OPIC).

Joan Larrea serves as CEO of Convergence, a platform that connects and supports private, public, and philanthropic investors for blended finance deals in emerging and frontier markets. She noted that FIGH had a particular emphasis on blended finance, which was likely “a function of the fact that only a portion of the healthcare universe is investable on typical commercial grounds; the rest needs the blend.”

Reflecting on the discussions around blended finance at FIGH 2016, Larrea commented, “It was notable how broad the range was across transaction types, from a tiered-capital PE fund (the Global Health Investment Fund) to a program of grant-based interventions to grow out a network of pharmacies (USAID). That is likely a reflection of the relative commercial viability of different parts of the healthcare value chain – different components need different blended finance approaches to attract the relevant investors.”

She added that beyond helping educate participants on the potential of blended finance for health, the experience at FIGH 2016 was also particularly useful for Convergence as the organization aims to build the blended finance market. “Overall from some of the comments on the panel, we saw that there remains a gap between what investors are willing to take on and what their philanthropic or public counterparties assume is investable.” Larrea also noted that for a convening to truly drive blended finance forward as a health solution, a convening must have significant participation from the private sector and for-profit investors: “Unless you get fund managers, banks, and others of that sort into the conversation what you end up with is a healthcare event.”

- **The Innovation Galaxy:** a gallery highlighting the cutting-edge thought leaders across sectors who are taking innovative approaches to drive progress in global health, through new technological developments, new business models, blended finance transactions, unorthodox partnerships, and more.
- **The Marketplace:** a networking lounge for investors and deal sponsors who would like to discuss health-related transactions in emerging markets. The goal of this Marketplace was to facilitate deal making and cross-sector learning on financial instruments and structures.
- **Health Investment Books:** All participants at FIGH 2016 received two health investment books that aimed to anchor conversations in real, live investment opportunities: 1) an Early Stage and Growth Stage Investment Book prepared by the Global Development

Incubator to showcase health-related early and growth stage private finance transactions – including innovators, businesses, projects and social enterprises that have raised, or are looking to raise primarily private capital through equity, debt, or grants – and 2) a Blended Finance Investment Book prepared by Convergence that featured health-related blended finance transactions including funds, projects and businesses that have raised, or are looking to raise, a mixture of private and public capital.

FIGH also provided important spotlight to several multi-stakeholder initiatives at various stages of their launch and growth, including **Safe Surgery 2020** (p. 22) and **mhNOW** (p. 22-23).



SAFE SURGERY 2020

THE CHALLENGE

The need for surgical care is massive. For the first time in history, surgically-treatable conditions cause more deaths than infectious diseases. Responsible for one-third of the global disease burden, surgically-treatable conditions kill 17 million people each year and cause or prolong disability for millions more. And access is deeply unequal: Over 95% of people in South Asia and much of Africa cannot access surgical care, compared with about 5% in high-income regions like Western Europe.

THE OPPORTUNITY

Surgery is often the best option for a patient's survival and quality of life, and innovators are already devising solutions. In the face of major resource constraints, most hospitals already problem solve on a daily basis to save lives. What if we could harness the innovation taking place today, and further support hospitals with effective, low-cost solutions to improve conditions at their hospital - like electricity, skills training, safe water, and more?

THE SOLUTION

To harness the momentum behind global surgery, Safe Surgery 2020 aims to design and support programs that make surgery safe, accessible, and affordable. Safe Surgery 2020 is currently working in Ethiopia to further expand its reach.

WHO'S INVOLVED

Safe Surgery 2020 is made possible with the support of GE Foundation, is hosted by Dalberg Global Development Advisors, and is implemented by Jhpiego, Assist International, Harvard Program on Global Surgery and Social Change, and the G4 Alliance. The initiative's local partners in Ethiopia include the Federal Ministry of Health, the Surgical Society of Ethiopia, and Mekelle University, among others.

SAFE SURGERY 2020 AT FIGH

Safe Surgery 2020 was featured at FIGH as a new frontier in health, and served as the focal point for a roundtable exploring innovative partnerships, programs, and financing to promote and deliver safe surgeries to address maternal health outcomes, road injuries, and other traumatic conditions in emerging and frontier markets. Following FIGH, the initiative had several groups reach out to them to learn more or to partner on specific components.

mHNOW – "MENTAL HEALTH NOW"

THE CHALLENGE:

The mental health gap is one of the world's most devastating and under-resourced problems, affecting more than 450 million people worldwide and stretching far beyond the narrow boundaries of health. Mental illness will make up more than half of the economic burden of disease over the next two decades – more than cancer, diabetes, and chronic respiratory diseases combined – and the global cost of all mental disorders combined is estimated to reach \$6 trillion by 2030. Additionally, mental disorders are a particular challenge for youth – suicide is a top-three cause of death among youth worldwide, and 90% of children who die by suicide have a mental illness.

THE OPPORTUNITY:

Because the effects of mental illness touch livelihoods, productivity, and even whole economies, mhNOW is taking a cross-sector and city-driven approach to close the mental health gap. Cities – with their inherent networks, density, creativity and entrepreneurial capacity – bear the highest

SESSION SPOTLIGHT: DATA REVOLUTION IN HEALTH

Addressing global health challenges requires better data generation, analytical capability, and sophistication. One session at FIGH, titled “Data Revolution in Health” set out to examine how to harness the impact of the data revolution to support better resource allocation and health delivery in emerging economies. Robert Fabricant, Co-Founder of Dalberg Design Impact Group, moderated the discussion, which also included Eric Osiakwan (Chanzo Capital), Patty Mechael (HealthEnabled), Dr. Prabhjot Singh (ATLAS), and Steve Davis (PATH).

In reflecting on the session, Fabricant said that its success came from balancing health and technology thinking in a unique way. “The panelists didn’t just come from one or the other. For example, often you see panels only with people who are data crazy or people who come from a clinical health background or focus on M&E. There are few places where that conversation comes together well, but I felt fortunate during my FIGH session to have the true mix.”

Throughout the discussion, Fabricant intentionally pushed each panelist to ground their comments in specific use cases around who would interact with their health technologies and how the technologies would change the status quo. “All three panelists were comfortable talking about work-in-progress projects, which made the conversation more meaningful. In the health world, it’s not always easy to get people to do that. The panelists also struck the right tone of sharing details without getting too self-promotional – another balance that is hard to strike,” he said.

Fabricant noted that the audience group was small enough to foster a lively Q&A session. At the end of the discussion, he also led an exercise in which each audience member shared something they’d learned with their neighbor, in an effort to drive more connection among the group members. He added, “If we had more time, it would’ve been great to bring more examples from the audience to the front for some productive sharing.”

burden of mental health but also have the highest potential to achieve meaningful mental health impact.

THE SOLUTION:

mhNOW is an unprecedented challenge to cities around the world to close the global mental health by providing resources, recognition, and technical assistance for outstanding initiatives in three target areas: (1) scaling local evidence-based innovative programs; (2) mobilizing youth leadership; and (3) improving the evidence base for the return on investment in mental health using city-level and global data indicators.

WHO'S INVOLVED:

The group of over 30 organizations behind the broader initiative includes BasicNeeds, Grand Challenges Canada, Harvard T.H. Chan School of Public Health, International Medical Corps, Johnson & Johnson, King's College London, Orygen Center of Excellence in Youth Mental Health, StrongMinds, Verily Alphabet, the World Bank, and the World Psychiatric Association, among others. The Global Development Incubator is incubating mhNOW.

MhNOW AT FIGH:

Global and community leaders came together to announce mhNOW on stage at FIGH 2016. The spotlight from FIGH, and the productive discussions spurred by the mental health roundtable that followed the mhNOW announcement, have been critical to refining mhNOW's strategy and building momentum for the initiative.



WHAT DOES IT MEAN TO HAVE A FORUM LIKE FIGH?

We asked participants, speakers, and sponsors across the public, private, and philanthropic sectors to share their reflections on FIGH. What does it mean to have a forum like FIGH? Looking back at the FIGH 2016, what was valuable? What was missing?

"I liked that FIGH was trying to bring together three worlds that might not necessarily co-mingle normally – blending financing, innovation, and global health. The mix of more traditional players with people who would never think to step foot in a global health conference before was unique."

– **Priya Sharma, USAID**

"Part of what I found refreshing about FIGH was that it wasn't just about preaching to choir but rather about saying, 'Hey, here are communities that need to interact and find opportunities for collaboration.' A convening can't be all things to all people, but it's great to provide space for cross-sharing and learning."

– **Sarah Marchal Murray, formerly the END Fund**

"I loved that there was a strong focus on Africa and South Asia. However, it would be nice to compare initiatives and best practices with other developing regions, such as Latin America. I hope the next one can bring more participants from the front lines along with more diversity of gender, race, and nationality."

– **Alisha Rahemtulla, Yale MBA and MPH candidate**

"I was happy to see small companies get the chance to pitch and get feedback from the global health community and investors."

– **Kurt Grela, APICS**

"I appreciated hearing about the issues facing different types of capital in the sector, including corporate, impact funds, VCs, and DFIs"

– **Paul M. Sacks, MNS International, Ltd.**

EXHIBIT SPOTLIGHT: GROUND MEDIA'S DOCUMENTARY PHOTO PROJECTS ABOUT HIV AND TUBERCULOSIS

One exhibit in FIGH's Innovation Galaxy featured documentary photo projects about people living with HIV and Tuberculosis, produced by Ground Media. Founder and Creative Director David Rochkind shared reflections on the purpose of these photos, seen on the following page, below:

Throughout history we have confronted, and defeated, some of our most complex health challenges - but there is never a straight line from discovery to defeat.

When dealing with public health issues, especially in the developing world, the lives of the vast majority of patients are complicated by economic concerns and social responsibilities that turn this linear path into a circuitous journey fraught with obstacles. I've seen how becoming sick can impact an individual patient, as well as their family and community. Likewise, getting healthy can help families regain their footing and continue on a path to success for generations. It is vital that we communicate this generational impact. We must show the faces behind the numbers, and tell the stories behind the statistics.

At FIGH, Ground Media produced several documentary photo projects about people living with HIV and Tuberculosis. We wanted attendees to come face to face with the heroes, survivors and victims of these two pressing public health issues.

As we build on that success, we are developing a traveling exhibit that blends immersive storytelling with targeted education and advocacy initiatives. The exhibit is an interactive experience that tells a story about the human impact that lies behind the hard science of public health. We are using innovative techniques, like group virtual reality and sensory storytelling, to take our audience on a journey through space and time, during which they learn about the development, discovery and eventual defeat of an ancient disease: tuberculosis. This is an experience that will teach public health topics through empathetic storytelling, and will educate as it inspires.

People respond most powerfully to hope and inspiration. When communicating about public health we can't get lost in the data, and we can't focus on tragedy alone. Authentic visual media storytelling is one of the most powerful tools we have to educate, engage and, ultimately, inspire people to act.



Photos from documentary project about people living with HIV and Tuberculosis, produced by Ground Media

WHAT'S NEXT?

With health challenges looming large and traditional approaches to financing breaking down, it's easy to feel concerned about the future of global health. Our interviews with thought leaders led us to believe otherwise, however – that the shifts going on right now offer a unique opportunity to start fresh and build something better.

We hope this report will help the global health community (including finance professionals, tech innovators, and other non-traditional players) develop a better understanding of how to design a reimagined convening that will spark productive conversations and lead to concrete results. Our conversations brought to light many insights, including:

- **Convenings of diverse groups are paramount** – to improve coordination and reduce fragmentation in global health, especially on complex issues that require multi-stakeholder engagement, we need to “expand the tent.” Bring in disruptive thinkers (especially global health outsiders) as much as possible.
- **Financing is a critical piece of any global health conversation** – with a shifting donor landscape and looming funding gap, we need to figure out how to translate between the financing world and the health world to ensure our plans and ideas are practical.
- **Specificity and honesty will make convenings more valuable** – speakers should provide concrete examples when discussing broad topics, and, yes, share their failures openly where possible. Agendas can facilitate openness by balancing sessions that offer public visibility with sessions that are designated “safe spaces,” ensuring the conversation will not always leave the room.

- **Convenings should provide space not just for educational panels, but also for the announcement or launch of large-scale initiatives** – this role of “forcing mechanism” is essential to building momentum for good.
- **Sometimes smaller conversations can drive big action** – convenings should make time and connections to facilitate one-on-one meetings that are more grounded in concrete opportunities than in theory.

Now, for the next step. We hope to take these perspectives from leading thinkers in global health and use them to reimagine what's possible to build a convening that will help us drive transformative change. Achieving this goal will not be possible without the engagement, expertise, and dedication of leaders across sectors, however, so we hope you will join us.

Moitreyee Sinha

Director, Beyond Health
Global Development
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Dalberg

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FIGH TEAM

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The Global Development Incubator, or GDI, is an organization that builds startups, incubates partnerships, and strengthens existing organizations for social impact around the world. Learn more at www.globaldevincubator.org or on Twitter at @GlobalDevInc.

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