

# RESULTS

## WRITTEN EVIDENCE BY RESULTS UK TO THE INTERNATIONAL DEVELOPMENT COMMITTEE INQUIRY ON THE EFFECTIVENESS OF UK AID

### About RESULTS UK

RESULTS UK seeks to mobilise the public and political will to end extreme poverty. We undertake strategic policy, parliamentary and grassroots advocacy on three key determinants of poverty: economic opportunities, health and education, with a key focus being placed on child vaccinations, tuberculosis (TB), education and nutrition.

This submission will answer the following questions:

- How is the Department for International Development (DFID) maximising the effectiveness of UK Official Development Assistance (ODA) through its partnerships with multilateral organisations?
- How does the UK's partnership with multilateral organisations complement its bilateral programming, and vice versa?

### Executive Summary

- Global health multilaterals such as Gavi, the Vaccine Alliance (Gavi), the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) and the Global Polio Eradication Initiative (GPEI) have consistently demonstrated themselves to be high quality and effective channels for UK aid.
- Multilaterals not only facilitate the delivery of essential services but also shape markets and secure lower costs for medicines and vaccines.
- As a leading donor, DFID influences the direction, policy and practices of multilateral organisations. In order to respond to global emergencies, cross-border challenges and build pandemic preparedness, DFID needs to have channels to influence multilateral organisations while also being able to work bilaterally with governments.
- In order to ensure the UK's bilateral and multilateral investments complement each other, decisions about ODA disbursement should be taken by a single department.
- To maximise the impact of UK aid, the UK should ensure that investments in multilateral organisations are supported with sufficient bilateral investments in health

and nutrition. DFID's bilateral programmes can increase the effectiveness of multilateral organisations and contribute to building more resilient, sustainable and accessible health systems.

- Health issues such as lack of access to immunisation, services for diseases such as TB and malnutrition do not exist in isolation. These are interconnected challenges that disproportionately affect the world's poorest and most vulnerable people. Therefore, the UK must be willing to utilise its status as a leading donor and ability to influence global development policy to drive a renewed and collaborative approach to global health that adequately addresses all the interventions needed to ensure good health for all, build stronger health systems and end preventable deaths.
- DFID is the only department remitted to "end extreme poverty," and has decades of institutional knowledge. It consistently scores higher than all other UK government departments in the 'Publish What You Fund' index aid transparency and must retain its independence and continue to be the main department with responsibility for ODA.

## **Introduction**

RESULTS UK works primarily, but not exclusively, with multilateral organisations that receive funding from, and partner with, DFID. This submission will therefore focus on how these partnerships maximise the effectiveness of UK aid in four areas: 1) expanding UK aid's reach and scale; 2) allowing UK aid to tackle cross-border and global challenges; 3) providing opportunities for the UK to shape global development policy; 4) aligning and complimenting the UK's bilateral programming.

As a member of Bond, the UK Sustainability and Transition Working Group, and Action for Global Health, RESULTS UK endorses their submissions to this inquiry.

## **How is DFID maximising the reach, scale and efficacy of UK aid through multilateral partnerships?**

1. Global health multilaterals such as Gavi, the Global Fund and GPEI have consistently been demonstrated to be high quality and effective channels for UK aid. The UK Government's own Multilateral Development Review<sup>1</sup> found that these institutions can provide economies of scale and have an ability to spread risk across different projects. The review scored 21 multilateral institutions (out of a total of 38 reviewed) as either 'Very Good' or 'Good' against its 'organisational strength' indices, which includes consideration of whether the organisation is taking action to improve efficiency and value for money. Other independent indicators<sup>2</sup> have shown that funding via these channels is one of the best ways to ensure aid effectiveness.

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<sup>1</sup> Raising the standard: the Multilateral Development Review, 2016, available at [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/573884/Multilateral-Development-Review-Dec2016.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/573884/Multilateral-Development-Review-Dec2016.pdf)

2. The reach and effectiveness of multilateral partnerships can also go beyond the reach of bilateral donors in many circumstances. For example, Gavi's size and scope enables it to support 56 countries across the world<sup>3</sup>. Since its inception in 2000, UK funding through Gavi has helped immunise 67.1 million children against vaccine-preventable diseases, saving 1.4 million lives<sup>4</sup>, out of a total of 10 million lives saved through Gavi's programmes.
3. The Global Fund is the largest multilateral financing mechanism to strengthen systems for health, investing over US\$1 billion per year, including training health workers, improving supply chain and laboratory capacity and strengthening surveillance. The Global Fund supports over 334 grants in more than 100 countries, with joint investments totalling US \$20 billion in the past five years alone. This has enabled the Global Fund to take swift action in response to COVID-19, alongside the World Health Organization (WHO) and other global health partners. Health systems strengthening is a strategic pillar of the Global Fund, which includes promoting equity, providing integrated service delivery and enhancing the health workforce.
4. The global response to polio displays how UK multilateral aid has contributed to both saving lives and had a lasting impact on health systems. GPEI has led the polio response, while the UK, as a founding donor, has assisted in reducing wild polio cases by 99.9%<sup>5</sup> since the organisation's inception. GPEI is able to coordinate polio eradication efforts across country, regional and global levels. This approach, based on collaboration with national governments, UN agencies and major philanthropic foundations has resulted in over 2.5 billion immunised children against polio since 2000 alone, and saved US \$27 billion in healthcare costs since 1988<sup>6</sup>, further underlining the impact that UK aid has.
5. Multilateral institutions are also able to shape markets and secure lower costs for medicines and vaccines. Gavi has helped to ensure the countries it supports pay less than US \$28 for the price of the full course of WHO recommended vaccines, compared with the US price of over US \$1,100 for comparable vaccines<sup>7</sup>. The Global Fund, through its buying power and by using pooled procurement mechanisms, including the Global Drug Facility (GDF), has transformed markets for TB drugs for the better. For example, the GDF is the largest procurer of TB medicines and diagnostics for the public sector, and has saved countries US \$42.3 million, including

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<sup>2</sup> How Do You Measure Aid Quality and Who Ranks Highest? Ian Mitchell and Caitlin McKee, Centre for Global Development, 2018, available at <https://www.cgdev.org/blog/how-do-you-measure-aid-quality-and-who-ranks-highest>

<sup>3</sup> Gavi website, How our support works, available at <https://www.gavi.org/support/process/> and Global Fund website, Grant Overview, available <https://www.theglobalfund.org/en/portfolio/>

<sup>4</sup> UK Government press release, "UK to host Gavi pledging conference in 2020", 13 February 2019, available at <https://www.gov.uk/government/news/uk-to-host-gavi-pledging-conference-in-2020>

<sup>5</sup> [http://polioeradication.org/wp-content/uploads/2016/07/PEESP\\_CH4\\_EN\\_US.pdf](http://polioeradication.org/wp-content/uploads/2016/07/PEESP_CH4_EN_US.pdf)

<sup>6</sup> GPEI Endgame Strategy 2019-2023, available at <http://polioeradication.org/wp-content/uploads/2019/06/english-polio-endgame-strategy.pdf>

<sup>7</sup> UK Government press release, "UK to host Gavi pledging conference in 2020", 13 February 2019, available at <https://www.gov.uk/government/news/uk-to-host-gavi-pledging-conference-in-2020>

saving US \$4.6 million via significant TB medicines price reductions and US \$14.1 million via preventing wastage through technical assistance with order planning.

6. Investing through multilaterals allows for a transparent administrative structure to drive efficiencies and ensure that programme costs are controlled and concentrated on results. Gavi and the Global Fund are increasingly finding ways to become even more efficient in these areas. For example, Gavi has reduced its operational budget, based on DFID's recommendation, the new Global Health Campus has reduced Gavi's ongoing rent by 25%, and savings have been made by downsizing other offices<sup>8</sup>. The Global Fund has seen no increases in its operating expenditure since 2012.<sup>9</sup>
7. It is vital that the UK Government continues to maximise the effectiveness of its aid spending through working with multilaterals to reach those that bilateral aid cannot reach, and utilise the associated economies of scale and efficiencies to do so.

## **RECOMMENDATIONS:**

- To prevent rolling back progress that has been made, the UK must not scale back funding for its multilateral partners and any multilateral funding reallocated for COVID-19 should be used to mitigate secondary impacts of the pandemic on routine programmes.
- Departmental responsibility for the UK's funding pledges to multilateral partners must remain with DFID alone.
- To retain progress on poverty reduction in developing countries transitioning away from aid, DFID should coordinate directly with multilaterals and mitigate the risks of simultaneous transition.

## **How do DFID's multilateral partnerships maximise the impact of UK aid on cross-border and global challenges?**

1. The ongoing COVID-19 pandemic has highlighted the importance of expert staff, institutional knowledge, the rapid sharing of intelligence and of established systems and structures for coordination. Cross-border threats rely on the same basic infrastructures, be they humanitarian crises caused by war, addressing climate change or tackling infectious diseases. Having a single department with responsibility for tackling these challenges will result in more coordinated and efficient responses as DFID has the institutional knowledge and processes for tackling these emergencies. A standalone DFID is therefore critical.

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<sup>8</sup> DFID Annual Review – Gavi – October 2018.

<sup>9</sup> Global Fund, Results Report 2018

2. The UK's investments in health systems strengthening and multilaterals like Gavi and the Global Fund mean developing country health systems are far better prepared for COVID-19 than they might have been. For example, a coherent effort by the Global Fund to scale up TB diagnostic capacity throughout Africa has created a network of GeneXpert machines that are already being redeployed to test for COVID-19.
3. Nonetheless, experts are deeply concerned about the pandemic's impact in low-resource settings which have nowhere near the infrastructure or funding to cope. The 2014 Ebola outbreak caused TB mortality rates in Guinea to double. Cases of COVID-19 have already been identified in 60 Gavi-eligible countries, with serious concerns about the impact on child survival when large-scale vaccination campaigns are rendered impossible. As the crisis develops, the impact of DFID's coordination with bi- and multilateral partners, and national ministries of health, has been clearly demonstrated. The Global Fund was able to support a rapid reallocation of up to 5% of its existing grants, mobilising funds in-country quicker than any bilateral donor would have been able to. The joint DFID/FCO taskforce on COVID-19 has begun issuing guidance to country-programmes on the secondary impacts of COVID-19 on other disease programmes. The rapid response has been heavily reliant on the ability to quickly redeploy expert staff internally, with established relationships, in-depth technical knowledge and decades of experience working within global and domestic health systems. More can and should be done, but in DFID's absence, the UK's impact on controlling the pandemic would be minimised, with the effectiveness of the UK's broader ODA investments seriously undermined as a result.
4. As part of the Global Action Plan for Healthy Lives and Wellbeing, multilaterals such as Gavi and the Global Fund are working together more closely to coordinate and tackle cross-cutting issues collaboratively. Historically, failures to do this have caused a number of challenges and these efforts should be further strengthened.

## **RECOMMENDATIONS**

1. Continue efforts to ensure greater coordination between multilaterals through the Global Action Plan for Healthy Lives and Wellbeing For All, with accountability mechanisms in place to ensure this is done comprehensively.
2. View the UK's aid investment as a central and unique part of the UK's integrated approach to foreign policy which relies on an independent and well-resourced Department for International Development.

### **How do DFID's multilateral partnerships allow its expertise to shape global development policy?**

1. DFID's exceptional rating<sup>10</sup> and the fact that the UK is the only G7 country to meet its target to spend 0.7% of its Gross National Income (GNI) on ODA gives its

developmental diplomacy huge credibility. This, alongside the fact that the UK is a major contributor to many multilaterals, enables the UK to exert significant influence in shaping development policy agendas.

2. This will be critical for improved global health security, mitigating the impact of global emergencies, including COVID-19, and preventing illness and loss of life. The UK has the opportunity to drive renewed commitments to strengthening health systems that adequately encompass the full range of health interventions needed to ensure quality primary healthcare; this must include treating health and nutrition as co-dependent issues.<sup>11</sup>
3. The UK will play a key role in shaping the policy agendas of global health multilaterals such as Gavi, who are currently developing the Gavi 5.0 strategy, determining the organisation's strategic direction for the 2021-2025 period. Helping shape crucial policy improvements will be critical for enabling Gavi to achieve their ambitious targets of immunising a further 300 million children and saving a further 7-8 million lives.

#### **RECOMMENDATIONS:**

- The UK should use its role as an influential global leader to call for increased collaboration and coordination between leading multilateral organisations in responding to global challenges, including the COVID-19 pandemic.
- To improve global health security and mitigate the impact of future pandemics on the world's most vulnerable populations, the UK must highlight the need for collaborative approaches to health systems. This approach should strengthen and encompass the full range of interventions needed to ensure quality primary health care and achieve universal health coverage.
- The UK should use its position on the board of multilateral organisations such as Gavi to drive renewed policy commitments. The development of the Gavi 5.0 policy must include tangible commitments in reaching children currently not receiving basic vaccines. It should also commit to improved policies on transition that ensure a sustainable legacy of Gavi support and facilitate increased access to lifesaving vaccines.

**How do the UK's multilateral partnerships complement its bilateral programming; and why should DFID's autonomy over bilateral spending be preserved?**

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<sup>10</sup> <https://www.one.org/international/policy/real-aid-index-uk-international-development/>

<sup>11</sup> RESULTS UK, Brick by Brick: Accelerating Progress on Global Health. Available at: <https://www.results.org.uk/sites/default/files/files/Results%20Brick%20by%20Brick%20report.pdf>

1. Multilateral organisations can build economies of scale and reduce overhead costs. This makes multilaterals adept at dealing efficiently with particular issues, for example, specific health conditions (such as the Global Fund) or specific health interventions (such as Gavi). However, health issues do not exist in isolation and therefore often require coordinated, cross-sectoral responses. For example, in the case of malnutrition, a combination of all of the following interventions may be required:
  - a. Delivery of iron and folic acid supplements to pregnant women and adolescent girls, to prevent an intergenerational cycle of malnutrition
  - b. Family planning services that reduce adolescent pregnancies, which are more likely to result in stunted children
  - c. Nutrition sensitive agriculture programmes that enable nutritious food to grow
  - d. If in an arid or semi-arid area, irrigation programmes that enable crops to grow, or the roll out of drought resistant crops
  - e. Market access programmes that enable nutritious foods to reach marginalised communities at an affordable price; or schemes that ensure profitability of growing nutritious foods
  - f. Social protection or livelihood schemes, such as cash transfers, that ensure people can afford a healthy diet
  - g. Education programmes or public awareness campaigns that encourage healthy eating and inform people how to prepare healthy meals
  - h. Incorporation of nutrition into maternal, post-natal and early years' health interventions, for example roll out of Ready to Use Therapeutic Food, to prevent irreversible stunting in the first 1000 days
  - i. WASH schemes that prevent diarrhoea and therefore malnutrition
  - j. Health programmes that prevent or treat diseases that cause diarrhoea or otherwise impede mineral absorption and therefore lead to malnutrition
2. All these programmes require different infrastructure and expertise, far beyond the ability of any one organisation. Consequently, there is no single multilateral organisation responsible for nutrition. Instead, programmes are delivered through a variety of multilateral and bilateral channels.
3. To maximise the effectiveness of nutrition interventions that are delivered by various actors, it is important that both donor and aid-receiving governments, as well as multilaterals, strategically align their objectives, policies and financing. Failing to do so can result in piecemeal and inefficient responses.
4. There are two main mechanisms that ensure agencies work effectively in partnership on nutrition. The first is Nutrition for Growth, a summit that takes place alongside the Olympics where participant stakeholders make financial and policy commitments for nutrition. The 2013 London summit mobilised over \$24bn and resulted in a compact that has guided global nutrition efforts in the years since<sup>12</sup>. Most of those who

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<sup>12</sup> Global Nutrition for Growth compact 2013, [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/248760/Endorserscompact\\_update7\\_10\\_2013.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/248760/Endorserscompact_update7_10_2013.pdf), accessed 15/04/20

pledged at Nutrition for Growth report to the Global Nutrition Report<sup>13</sup>, an accountability mechanism that tracks nutrition financing and malnutrition rates globally.

5. The second mechanism is the Scaling Up Nutrition (SUN) Movement, which ensures different stakeholders are coordinated and aligned to the same objectives. It is organised through a series of networks, such as the Business, UN, Civil Society and Donor networks. Additionally, policy targets, such as the World Health Assembly nutrition targets and the SDGs, guide global efforts on nutrition.
6. The nutrition model ensures donors, aid recipients and multilaterals are coordinated and informed as to the most efficient use of funds. It ensures flexibility, allowing different programmes to be implemented in different contexts by different actors while contributing to the same strategic objectives.
7. Meeting objectives on nutrition will contribute to the objectives of health multilaterals. For example, vaccines are less effective on someone who is malnourished. Malnutrition is the number one risk factor for contracting TB. Bilateral investments in nutrition therefore increase the effectiveness of Gavi and the Global Fund.
8. One risk associated with bilateral ODA is that it gives donor governments the ability to spend ODA in a way that is politically beneficial, rather than in a way that reduces poverty. DFID's remit is to "end extreme poverty," whereas the FCO's remit, for example, is to "promote the UK's interests overseas." DFID consistently scores higher than all other UK Government departments in the Publish What You Fund Transparency Index.<sup>14</sup> ODA spent by DFID is therefore less susceptible to political bias than other departments.

### **Recommendations:**

- The UK should continue to channel ODA bilaterally where the same aims cannot be achieved more efficiently through a multilateral organisation.
- The UK's bilateral investments should contribute to strategic objectives that are shared with aid-receiving governments, donor governments and multilaterals.
- DFID should ensure accountability and transparency in its bilateral programming by reporting to accountability mechanisms like the Global Nutrition Report.
- DFID should remain the lead government department with responsibility for disbursing ODA and should retain its independence.
- The FCO should not have responsibility for disbursing ODA bilaterally.

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<sup>13</sup> Global Nutrition Report, <https://globalnutritionreport.org/>, accessed 15/04/20

<sup>14</sup> Publish What You Fund, <https://www.publishwhatyoufund.org/projects/improving-uk-aid-transparency/#>, accessed 15/04/20.

