Feedback and Inputs on the World Bank’s new Financial Intermediary Fund (FIF) for Pandemic Prevention, Preparedness, and Response (PPR)

The World Bank’s efforts to increase investments in PPR and to bring additional, long-term, dedicated resources to PPR are exciting and critical for international preparedness efforts. The White Paper lays out the urgent need for resources and coordination with governments, the WHO, and other partners. DAI has reviewed the document and would like to provide inputs, feedback, and suggestions for the World Bank to consider.

Whole of Society Approach
DAI agrees the FIF should balance inclusivity with efficiency but is recommending the use of a ‘Whole of Society’ approach. The White Paper indicates that non-decision-making members in the observer pool “could be broadened as needed.” In DAI’s experience implementing multisectoral coordination mechanisms (MCM), DAI recommends that this pool should intentionally include civil society organizations and the private sector. It is not clear where the representation of CSO (civil society organization) observers will be on the FIF governing board. A constituency-based approach should be used by nominating local organizations to be representatives that are engaged in PPR, nationally or regionally. DAI also recommends eligibility for financing private sector activities should be determined through the Implementing Entities and reflect both existing and emerging donor agency implementing partners to ensure appropriate coordination and expansion of local capacity.

Inclusivity and Equity
The COVID-19 pandemic has shown the international community and Multilateral Development Banks (MDBs) how important localized investments and strategies are for effective outbreak PPR. A One Health approach should be integrated into the FIF to ensure that PPR efforts address human health, animal health, and the environment. The FIF’s strategy ends at the “country-level,” but an additional component should be added that presents a localization approach. These stakeholders along with Implementing Entities should sustainably invest in PPR systems that prioritize impacts at the local level. Equity should be holistically integrated into the strategy to reach vulnerable communities and groups that are often overlooked. This is particularly true in complex humanitarian emergencies because there is an increased risk of infectious disease outbreaks for large populations, often without access to quality healthcare.

Efficiency vs. Long-term PPR Needs
DAI recommends the FIF be efficient to ensure funding moves swiftly for immediate capacity needs, but also recognize the longer-term commitments to the development of PPR systems. Through Implementing Entities, clear timeframes should be agreed upon to ensure efficiency and responsiveness in PPR capacity development. The use of more agile funding mechanisms within the Implementing Entities should be prioritized and rewarded, given both existing and emergency PPR development needs. The White Paper states that $10.5 billion per year for five years will be dedicated to PPR. Systems should be created now to ensure sustainability and that investments are protected after the five years have expired. Finally, FIF learnings need to be integrated with existing systems like the Joint External Evaluation (JEE), Global Health Security Agenda (GHSA), etc. Annual reporting on lessons learned and how these lessons are improving both the practice of PPR, but also how the FIF mechanism is adapting and responding to learning should be shared across the PPR community of practice.