

# The Program for Humanitarian Impact Investment (PHII, «Humanitarian Impact Bond») EVPA Investing for Development Member Only Deep Dive

REQUIREMENTS (US\$)

\$ 28.8 B

# A changing operating context for humanitarian action...

**1.3** M

Syrian refugee children enrolled in

formal general education in refu-

gee-hosting countries in the region.

GLOBAL 20 OVERVIEW 20

#### aid delivered globally in 2019 Cholera 900 k 28.9 M 238 k people were vaccinated in Beira,

A snapshot of humanitarian

Health Ż people in the Democratic Republic of the Congo (DRC) were vaccinated Mozambique in 6 days globally against measles. post-Cyclone Idai. against Ebola in 2018 and 2019.5 Malnutrition Malnutrition Malnutrition Nutrition 6.9<sub>M</sub> 500 k1.4<sub>M</sub> children (6-59 months), pregnant children (6-59 months), pregnant caregivers in Yemen received skilled Infant and Young Child and lactating women with acute and lactating women were admitted malnutrition were newly admitted to the malnutrition prevention Feeding support.7 for treatment globally.6 programme in South Sudan. General food distribution Safe water Shelter Food, shelter and water 3.4 M 13.4м 32.2 M refugees provided with shelter in people had access to general people provided with access to planned settlements and 134,540 food distributions in Yemen and safe water for drinking, cooking tents were delivered in 39 countries. and personal hygiene Resettlement Legal status Child protection Protection 81 k 140 k **2.6** M resettlement submissions refugees and migrants from children and caregivers worldwide to 29 countries and 55,680 Venezuela benefited from docuaccessed mental health and UNHCR-facilitated departures mentation to access legal status psychosocial support.4 to 27 countries in countries in the region. Livestock Education Education Other

61%

of refugee children worldwide

attended primary school.8

Source: United Nations Office for Coordination of Humanitarian affairs, "Global Humanitarian Overview 2020"

42.0 M

livestock reached with vaccination

and treatment campaigns

Compliance with international law is declining. Armed conflicts are killing and maiming a record number of children, forcing

108.8<sub>M</sub>

Highly violent conflicts are causing widespread hunger, displacement, death and destruction around the world

167.6<sub>M</sub>

them to flee their homes

There were 825 attacks against health workers and health-care facilities in the first nine months of 2019, resulting in 171 deaths.

Climate change is increasing people's vulnerability to humanitarian crises

In 2020, nearly 168 million people will need humanitarian assistance and protection

The situation will keep getting worse unless climate change and the root causes of conflict are better addressed.

Globally, at the start of 2019 some 821 million people were undernourished, including 113 million who suffered from acute hunger



achievements

舶

# ... reveals limitations to the current financing model

GLOBAL 20 HUMANITARIAN 20 OVERVIEW 20

#### Needs and requirements

As of 13 November 2019

Results from 2019

REQUIREMENTS (USS)

runding received (US\$)

FUNDING COVERAGE

**54**%

166.5<sub>M</sub>

PEOPLE TARGETED

**117.4**<sub>M</sub>

INTER-AGENCY APPEAL	APPEAL TYPE	FUNDING REQUIRED	FUNDING RECEIVED	COVERAGE	060
Afghanistan	HRP	\$611.8 M	\$423.4 M	69.2%	_
Burundi	HRP	\$106.3 M	\$64.3 M	60.5%	
Cameroon	HRP	\$298.9 M	\$123.6 M	41.3%	
CAR	HRP	\$430.7 M	\$287.2 M	66.7%	
Chad	HRP	\$476.6 M	\$231.9 M	48.6%	
DRC	HRP	\$1.65 B	\$680.9 M	41.2%	
Ethiopia	HRP	\$771.5 M	\$646.6 M	83.8%	
Haiti	HRP	\$126.2 M	\$36.1 M	28.6%	
raq	HRP	\$701.2 M	\$611.7 M	87.2%	
Libya	HRP	\$201.6 M	\$97.8 M	48.5%	
Mali	HRP	\$324.0 M	\$160.0 M	49.4%	
Mozambique	HRP	\$620.5 M	\$291.6 M	47.0%	
Myanmar	HRP	\$214.4 M	\$172.3 M	80.4%	
Niger	HRP	\$383.1 M	\$221.7 M	57.9%	
Nigeria	HRP	\$847.7 M	\$504.5 M	59.5%	
Pt	HRP	\$350.6 M	\$202.6 M	57.8%	
Somalia	HRP	\$1.08 B	\$812.3 M	75.4%	
South Sudan	HRP	\$1.51 B	\$1.01 B	67.0%	
Sudan	HRP	\$1.15 B	\$582.0M	50.6%	
Syria	HRP	\$3.29 B	\$1.73 B	52.4%	
Ukraine	HRP	\$164.4 M	\$81.1 M	49.3%	
Venezuela	HRP	\$222.7 M	\$55.5 M	24.9%	
Yemen	HRP	\$4.19 B	\$2.97 B	70.9%	
Madagascar	FA	\$32.4 M	\$29.2 M	89.9%	
Zimbabwe	FA	\$467.9 M	\$233.3 M	49.9%	
Burundi Regional	RRP	\$261.7 M	\$85.4M	33.0%	-
ORC Regional	RRP	\$676.8 M	\$146.9 M	22.0%	-
Nigeria Regional	RRP				
South Sudan Regional	1002	\$984.5 M	\$348.2 M	35.0%	
Syria Regional	RRP	\$5.53 B	\$2.01 B	36.2%	
Bangladesh	Other	\$920.5 M	\$613.9 M	66.7%	
Burkina Faso	Other	\$187.0 M	\$76.6 M	41.0%	
DPR Korea	Other	\$120.3 M	\$32.0 M	26.6%	_
ran	Other	\$25.0 M	\$9.6 M	38.5%	
Venezuela Regional	Other	\$737.6 M	\$382.6 M	51.9%	



2015

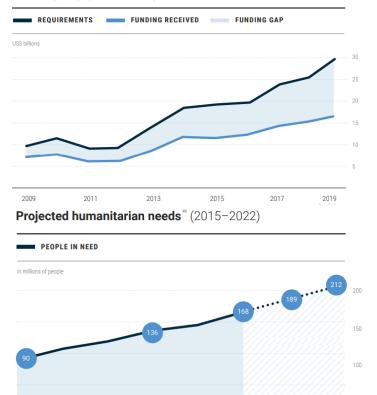
2016

2017

2018

2019

2020



Source: United Nations Office for Coordination of Humanitarian affairs, "Global Humanitarian Overview 2020"



2021

2022

# Focus on a health: Core challenges in conflict areas

#### **Protection**

#### Primary health care

- Reproductive health- ante/post-natal care basic care, breastfeeding and therapeutic feeding activities for malnourished children and mothers
- Vaccination campaigns in difficult to access areas

   immunisation programmes, cold chain, transport,
   supervision (benefit mostly children under 5 and girls/women at bearing age)

Mental health and psychological support (for those exposed to sexual violence)

Identify those who witness, or experienced violence (these are likely to be rejected by their family, abused, stigmatised and denied an education) so organisation can respond with appropriate services.

#### Wounded and sick

**Medical care -** Access to adequate care at hospitals (specific drugs, equipment and medical expertise)

**Physical rehabilitation** – Artificial limbs, walking aids, wheel chairs, physiotherapy (focus on children, as they require more services because they outgrow prosthetic/orthotic devices)

**Construction of health facilities –** Ensure accommodation matches international standards





# PHII: The world's first "Humanitarian Impact Bond" launched to transform financing of aid in conflict-hit countries





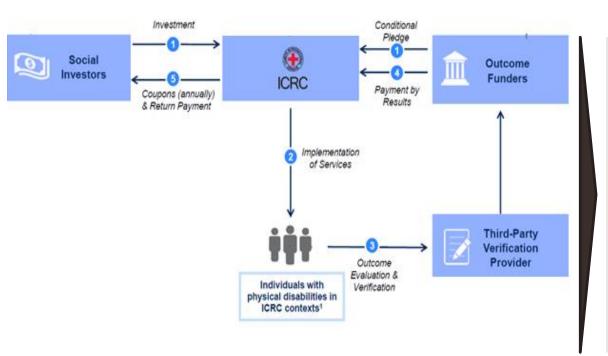


Sources: ICRC



# Harnessing our expertise to support ICRC's first innovative financing mechanism and a landmark transaction in the humanitarian space\*





- PHII Investment Agreement between the ICRC and the Social Investors
- · Payment by results agreements between outcome funders and the ICRC
- Verification agreement between Philanthropy Advisors and the ICRC
- Escrow agreement between UBS, the ICRC, and the social investors
- ICRC will play the role of the social provider delivering the social intervention
- Outcome metric: Staff Efficiency Ratios (SER) of PRP centres versus SER of baseline centres, in addition to number of beneficiaries reached

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Conflict-affected countries and other situations of violence.

<sup>\*</sup>Schematic representation based on publicly available information.

# **Key investment features**



CICR

Programme outline	CHF 18.6 million equivalent at
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CHF 18.6 million equivalent at the commencement date, supported by outcome funders' pledges in 5 years, are used to finance an increase in:

- the capacity of, by construction, and
- the efficiency of, by process re-engineering,

The delivery of prostheses, orthoses and wheelchairs (mobility devices) and related physiotherapy, to improve the socio-economic circumstances of people with physical disabilities in:

- Mali
- Nigeria, and
- the DRC

**Outcome funders** 

Governments of Belgium, Switzerland, Italy, and the UK, as well as the "La Caixa" Banking Foundation

**Cornerstone investor** 

An institutional investor from the insurance industry, New Reinsurance Company

**Operation duration** 

The full 5 years from the commencement date

Investor total return

- 2% coupon for the first 4 years, in addition to
- A return payment based on the success of the programme operations at the end of year 5, net of coupon already paid

Return payment

The return payment is based on the impact the programme has had on efficiency of the delivery of mobility devices to beneficiaries. Calculated and verified by a verification provides, and compared to an average historical SER of comparable ICRC centres. If the ICRC is more efficient, a return of up to 7% IRR is due on completion of programme operations at the end of 5 years. If the ICRC is less efficient, then investors could lose up to 40% of principal.

**Escrow bank** 

**UBS AG Zurich** 

Verification provider

Philanthropy Advisors

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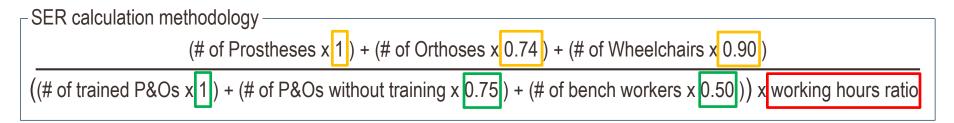
- It is the first time an established aid organization in the humanitarian space with a large budget (>CHF 1.5 billion) has looked to impact investors to help fund its work on such a scale;
- Government funding often has a time horizon of 1-2 years. It rarely reaches beyond the electoral cycle. Providing financing certainty for a longer period of time, in this case five years, not only allows the construction of new centres, but it also allows actors to take a strategic perspective, aiming for much higher expectations of efficiency;
- The project funds three new centres. However, ICRC has been operating 139 rehabilitation projects in 34 countries since 1979, helping almost 330,000 people. The ultimate impact therefore reaches much further. The three centres will be piloting the next generation of physical rehabilitation service delivery. Next to the immediate impact on the thousands of beneficiaries served, the PHII is financing the innovation of a core programme, to take it to the next level;
- While this private loan belongs to the family of social impact bonds because it links a social outcome (physical rehabilitation) to a financial return, it is the scale, effectiveness and potential impact of this project that makes it stand out, in addition to the different financial structure.

- Channel additional resources EUR 22m of fiveyear funding - to provide much needed humanitarian services to people in conflict affected countries → construction and operation of three centres in Africa;
- Test and implement new efficiency initiatives social impact expected to reach far beyond the three centres:
- Successful co-operation of different European parties (governments, humanitarian actors and private investors) to bring about potentially gamechanging improvement of services and a new financing model in the humanitarian space, inspired by social impact bonds.



# Measuring impact: the Staff Efficiency Ratio (SER)





The formula is designed to **make physical rehabilitation centres comparable among each other** and to **prevent perverse incentives**.

- Each type of **mobility device** is given a **different weight** to account for the **different labour time requirements** to manufacture them. As a result, there is no incentive to produce the least time-intensive device to improve the SER at the detriment of the beneficiaries' best interest.
- Different categories of rehabilitation professionals are given different weights according to their level of education (assuming that better trained professionals work more efficiently). This avoids penalizing centres that are more staffed with less qualified supporting staff, i.e., bench workers, because of a structural lack of trained prosthesists and orthosists in the region where a centre operates.
- The working hours ratio **adjusts for differences in centres' working hours** (as if they all worked a 40-hour week). This avoids creating distortions among centres which have quite different modus operandi depending on the country/region.

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# **Learnings from the PHII implementation**



• **Focus** - Identify a program of strategic importance to your organization that has the potential to be taken to the next level



 Participation - Launch an ambitious internal brainstorming and readiness assessment effort to consider how alternative funding mechanisms could provide the capital needed for a future iteration of that core program.



 Impact measurement - Develop a set of metrics that can track the program's results at a reasonable cost and establish a base of empirical evidence.



Senior engagement - Make sure senior leaders are willing and able to devote the attention this
effort requires to succeed.



**External support** - Enlist funders close to the organization and make them part of a joint "moonshot" innovation effort.



■ **Timeline** - Recognise that innovative financing efforts may take time—and give yourself the time needed.



Source: Martin (2017), "The Next Phase of Innovative Financing", Stanford Social Innovation Review Please see important information at the end of the document

# Taking a pipeline view (I): Building capacity is key

			Primary	Developing	Robust	Best in class
		Commitment to impact in humanitarian contexts	No stated mandate to enter humanitarian contexts and generate positive impact	Strategic or operational reference; no reference to humanitarian contexts	Clear commitment to achieving impact, less focus on humanitarian contexts	Clear, stated commitment to create impact in humanitarian contexts
• I	Honestly assess where your organization stands  If there are red or blue stoplight, take measures to switch them to green	Commitment to engage private sector and other stakeholders	No mandate to work with the private sector	Mandate to work with the private sector, but no institutional roadmap	Mandate to work with the private sector early in the structuring process, with emerging track record of engagement	Clear, meaningful mandate to engage with the private sector, and a successful track record of engagement, in fulfillment of that mandate
		Prevention, resilience, and recovery vs. response	No formal strategy beyond crisis	Crisis response with leeway to deliver aid in protracted crisis and development setting	Crisis response, appetite to engage in prevention and resilience-building outside of protracted crisis	Mandate to respond to crises accompanied by imperative to help prevent crises and build resilience
		Learning and innovation capabilities, patience	No procedures to deconstruct failed efforts and learn from lessons	Innovation and learning a stated goal, but impatience prevents transactions	Prioritize speed and success over iteration, innovation and learning	Leadership embraces learning process, organization participates in transactions even if structuring phase is prolonged

Source: BCG Good Practices Playbook, "Organizational Readiness and Enabling Private Capital for Innovative Financing in Humanitarian Contexts," 2020



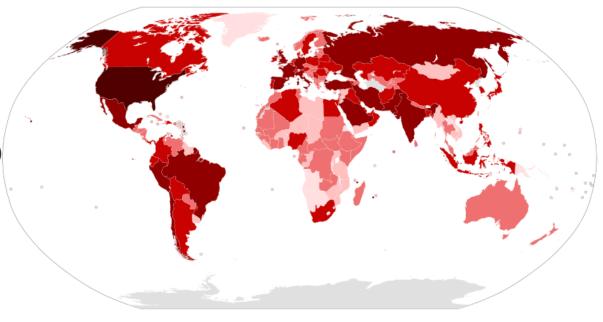
# Taking a pipeline view (II): COVID-19 will accelerate the need for innovation and value for money

#### **Drivers:**

- Demand shock: greater need for humanitarian aid
- Challenges in IO field operations/delivery
- Additional pressure on already fragile developing countries
- Increased indebtedness of donor governments (pressure on availability of aid)
- Contraction of private fundraising market
- Acceleration of digitalization

#### Implications:

- Greater emphasis on "value for money"
- Innovation imperative: new formulas to crowd in private sector capital





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