

Multilateral Energy Compact for Health Facility Electrification

A next Decade Action Agenda to advance SDG7 on sustainable energy for all, in line with the goals of the Paris Agreement on Climate Change

# SECTION 1: AMBITION

**1.1. Ambitions to achieve SDG7 by 2030.** [Please select all that apply, and make sure to state the baseline of each target]

(Member States targets could be based on their NDCs, energy policies, national five-year plans etc. targets for companies/organizations could be based on their corporate

7.1. By 2030, ensure universal access to affordable, reliable and modern energy services.	Target(s): Time frame: Context for the ambition(s):
□ 7.2. By 2030, increase substantially the share of renewable energy in the global energy mix.	Target(s): Time frame: Context for the ambition(s):
□ <b>7.3.</b> By 2030, double the global rate of improvement in energy efficiency.	Target(s): Time frame: Context for the ambition(s):
□ 7.a. By 2030, enhance international cooperation to facilitate access to clean energy research and technology, including renewable energy, energy efficiency and advanced and cleaner fossil-fuel technology, and promote investment in energy infrastructure and clean energy technology.	Target(s): Time frame: Context for the ambition(s):

e strategy)	

	<ul> <li>upgrade technology for supplying modern and sustainable energy services for all in developing countries, in particular least developed countries, small island developing States, and land-locked developing countries, in accordance with their respective programs of support.</li> <li>assessments of healthcare systems at national level including relevant data and recommendations for implementation antional level including relevant data and recommendations for implementation assessments of healthcare systems at national level including relevant data and recommendations for implementation assessments of healthcare systems at national level including relevant data and recommendations for implementatio</li></ul>		☑ 7.b. By 2030, expand infrastructure and upgrade technology for supplying modern and sustainable energy services for all in developing countries, in particular least developed countries, small island developing States, and land-locked developing countries, in accordance with their respective programs of support.	<ul> <li>Target(s): 25,000 health facilities with sustainable access to a clean and reliable power source (multi-stakeholder sector assessments of healthcare systems at national level including relevant data and recommendations for implementation.</li> <li>Time frame: 2020-2025</li> <li>Context for the ambition(s): The available data points to a critical energy gap in the health sector. The COVID-19 pander momentum for addressing this energy gap in a sustainable way. This multilateral Health Facility Electrification (HFE) Enablitious sectoral target for organizations to contribute to.</li> </ul>
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#### 1.2. Other ambitions in support of SDG7 by 2030 and net-zero emissions by 2050. [Please describe below e.g., coal phase out or reforming fossil fuel subsidies etc.]

Target(s): Time frame: Context for the ambition(s):

# **SECTION 2: ACTIONS TO ACHIEVE THE AMBITION**

2.1. Please add at least one key action for each of the elaborated ambition(s) from section 1. [Please add rows as needed].

Description of action (please specify for which ambition from Section 1)	Star
ACTION ON DATA: Unlock and generate data to inform and guide health facility electrification interventions. This includes investing in better data on: ( electrification status of health facilities globally, (ii) funding and financing of the health sector, including ability to pay analyses, and (iii) the impact and improved health outcomes from reliable power in health facilities. This also includes testing and piloting new innovative platforms that enable and facilitate large-scale electrification interventions for health facilities.	i) 2020
Tentative examples of activities: Intervention heatmap, Impact factsheet, Country databases and assessments, Analyses of innovative business models, cloud-based procurement platform, results-based financing platform	
Description of action (please specify for which ambition from Section 1)	Star
ACTION ON COORDINATION: Provide a platform for key stakeholders from the energy and health sector to exchange lessons learnt and share best practices, and leverage existing mechanisms at the global and the national levels.	2020
Tentative examples of activities: Stakeholder coordination and advocacy	
Description of action (please specify for which ambition from Section 1)	Star
ACTION ON IMPLEMENTATION: Across multiple stakeholders, design and implement large-scale sustainable interventions to provide reliable power to health facilities, both facility-wide and focused on specific life-saving health services.	2020
Tentative examples of activities: Facility-wide electrification, Health service-focused electrification	

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demic has increased nergy Compact provides an	

and end date	
)-2025	
and end date	
1-2025	
2025	
and end date	
)-2025	

## **SECTION 3: OUTCOMES**

3.1. Please add at least one measurable and time-based outcome for each of the actions from section 2. [Please add rows as needed].

Outcome 1 on DATA	Date
Global and national data on health facility electrification status is available and reliable, with detailed country assessments carried out for 20	2025
countries with a large energy access gap.	
Outcome 2 on COORDINATION	Date
Multi-stakeholder coordination mechanisms for organizations from energy and health sectors are strengthened and/or set up, with representations	
from key stakeholders from both the energy and the health sector.	
Outcome 3 on IMPLEMENTATION	Date
25,000 health facilities are sustainably equipped with robust, clean, and reliable power solutions.	2025

### SECTION 4: REQUIRED RESOURCES AND SUPPORT

4.1. Please specify required finance and investments for **<u>each</u>** of the actions in section 2.

ACTION ON DATA: \$20m (est.)

ACTION ON COORDINATION: \$10m (est.)

ACTION ON IMPLEMENTATION: \$400-\$500m (est. based on average power solution of 3 kWp at \$5/Wp for a primary healthcare facility, plus additional design, installation, logistics, and O&M costs; this number will be re-evaluated as new data and information becomes available)

4.2. [For countries only] In case support is required for the actions in section 2, please select from below and describe the required support and specify for which action.

[Examples of support for Member States could include: Access to low-cost affordable debt through strategic de-risking instruments, capacity building in data collection; development of integrated energy plans and energy transition pathways; technical assistance, etc.]

□Financing	Description
□ In-Kind contribution	Description
Technical Support	Description
□ Other/Please specify	Description



## **SECTION 5: IMPACT**

5.1. Countries planned for implementation including number of people potentially impacted.

The HFE Energy Compact focuses on countries that are experiencing a significant energy gap in their health sector. These countries are primarily situated in sub-Saharan Africa, South Asia, and South-East Asia. The HFE Energy Compact will promote the deployment of reliable power solutions to 25,000 health facilities. The number of people served by an average primary healthcare facility ranges widely. For example, estimates from a recent health facility electrification intervention (UN Foundation, 2015-2019) in Ghana and Uganda calculated an average of 5,000-10,000 people per primary health facility. This HFE Energy Compact could thus improve the access to quality health services for approximately 100 million to 200 million people, including refugees, IDPs, and other forcibly displaced people.

The data targets of the Compact would not just help evidence-based policy making and entry points for the private sector, but also be instrumental in mobilizing investments necessary for health facility electrification efforts. The coordination efforts would meanwhile support the long-term sustainability of health facility electrification by enhancing cross-sectoral cooperation and effective institutional oversight and ownership structures. Through national-level stakeholder consultations, the perspective of the beneficiaries would also be captured and included in subsequent decision making.

5.2. Alignment with the 2030 Agenda for Sustainable Development – Please describe how each of the actions from section 2 impact advancing the SDGs by 2030. [up to 500 words, please upload supporting strategy documents as needed]

COVID-19 has brought into sharp focus the inequalities and vulnerabilities of health systems across the world. Long before the pandemic made daily headlines, the lack of reliable power in healthcare facilities was undermining the quality of healthcare for millions of people in sub-Saharan Africa and South Asia. Two recent multi-country studies indicate the size of the problem: one study estimates that 59% of all health facilities in low and middle-income countries lack access to reliable energy services, while the recent multi-tier framework assessment in six countries estimates that around 25% of health facilities lack power altogether.

This directly impacts health facilities' ability to deliver critical health services, which is jeopardizing the health of hundreds of millions of people, especially women and children who often bear the brunt of inadequate primary health care services. Worldwide, more than 289,000 women die every year from pregnancy- and childbirth-related complications, many of which deaths could be averted with the provision of better lighting and other electricity-dependent medical services. Where a lack of power exists, it is also among the leading factors that discourage women from childbirth in health facilities, leading some women to decide to deliver at home.

Providing access to clean and affordable energy for healthcare facilities presents an important opportunity to close the energy access gap while improving the quality of healthcare for millions of people in sub-Saharan Africa and South Asia. As such, this intervention supports both SDG7 and SDG3 directly, and indirectly supports SDG5 (improved maternal-child health services) and SDG13 (decarbonizing existing fossil fuel-based infrastructure, avoiding future carbon emissions, and improving climate resilience of the healthcare sector). While interest in electrifying healthcare facilities is growing – in large part because of COVID-19 - the development community still lacks a coherent response to this challenge. This multilateral HFE Energy Compact is expected to further facilitate sector-wide coordination, by providing an ambitious sectoral target for health facility electrification.

5.3. Alignment with Paris Agreement and net-zero by 2050 - Please describe how each of the actions from section 2 align with the Paris Agreement and national NDCs (if applicable) and support the net-zero emissions by 2050. [up to 500 words, please upload supporting strategy documents as needed]

This HFE Energy Compact focuses primarily on providing access to health facilities that are currently experiencing a significant energy gap, hampering health service delivery. This intervention will also contribute to the replacement of existing power capacity based on diesel or gasoline, in the form of generators, through the deployment of renewable energy-based power solutions. The electrification of health facilities with renewable energy sources will avoid the deployment of diesel or gasoline-powered generators to facilities that currently have no alternate power source. As such, this Compact and the actions it will promote will focus both on reducing current emissions and avoiding additional future emissions. Furthermore, and particularly in the context of SIDS, the use of decentralized renewable energy solutions will also improve the climate resilience of health facilities as extreme weather events can cause disruption in electricity grids and fuel supply chains.

#### SECTION 6: MONITORING AND REPORTING

6.1. Please describe how you intend to track the progress of the proposed outcomes in section 3. Please also describe if you intend to use other existing reporting frameworks to track p

USAID/Power Africa and SEforALL have committed to tracking the progress of health facility electrification and invite other donors and partners to submit information to support supporting SEforALL on its Powering Healthcare program, which is focused on data, market intelligence, and sector coordination. Under this partnership, both organizations have key stakeholders at several points in the past (November 2020, April 2021). Both organizations are committed to establish a working group on the basis of this HFE Energy Comparison group member of the Health and Energy Platform of Action (HEPA), which provides another opportunity for energy and health stakeholders to convene and exchange.

Furthermore, SEforALL and Power Africa will be developing and publishing an Intervention Heatmap to track past, ongoing and future interventions. The Intervention Heatmap wi sector-wide survey, to be launched in October 2021, which will serve as a first baseline against which progress can be measured over time. SEforALL and Power Africa already carr October 2020.

progress on the proposed outcor	nes.
this effort. Power Africa is already started to convene ct. SEforALL is also a steering	
ill be developed through a ied out an initial survey in	

SECTION 7: GUIDING PRINCIPLES CHECKLIST
Please use the checklist below to validate that the proposed Energy Compact is aligned with the guiding principles.
I. Stepping up ambition and accelerating action - Increase contribution of and accelerate the implementation of the SDG7 targets in support of the 2030 Agenda for Sustainable Develop
I. 1. Does the Energy Compact strengthen and/or add a target, commitment, policy, action related to SDG7 and its linkages to the other SDGs that results in a higher cumulative impo
⊠Yes □No
I.2. Does the Energy Compact increase the geographical and/or sectoral coverage of SDG7 related efforts? $oxtimes$ Yes $oxtimes$ No
I.3. Does the Energy Compact consider inclusion of key priority issues towards achieving SDG7 by 2030 and the net-zero emission goal of the Paris Agreement by 2050 - as defied by lo outcome of the Technical Working Groups? 🛛 Yes □No
II. Alignment with the 2030 agenda on Sustainable Development Goals – Ensure coherence and alignment with SDG implementation plans and strategies by 2030 as well as national development
II.1. Has the Energy Compact considered enabling actions of SDG7 to reach the other sustainable development goals by 2030? $oxtimes$ Yes $\Box$ No
II.2. Does the Energy Compact align with national, sectoral, and/or sub-national sustainable development strategies/plans, including SDG implementation plans/roadmaps? 🗆 Yes 🗵
II.3. Has the Energy Compact considered a timeframe in line with the Decade of Action? $oxtimes$ Yes $\Box$ No
III. Alignment with Paris Agreement and net-zero by 2050 - Ensure coherence and alignment with the Nationally Determined Contributions, long term net zero emission strategies.
III.1. Has the Energy Compact considered a timeframe in line with the net-zero goal of the Paris Agreement by 2050? 🗆 Yes 🗵 No
III.2. Has the Energy Compact considered energy-related targets and information in the updated/enhanced NDCs? 🗆 Yes 🖾 No
III.3. Has the Energy Compact considered alignment with reaching the net-zero emissions goal set by many countries by 2050? 🗆 Yes 🗵 No
IV. Leaving no one behind, strengthening inclusion, interlinkages, and synergies - Enabling the achievement of SDGs and just transition by reflecting interlinkages with other SDGs.
IV.1. Does the Energy Compact include socio-economic impacts of measures being considered? $oxtimes$ Yes $\Box$ No
IV.2. Does the Energy Compact identify steps towards an inclusive, just energy transition? 🗆 Yes 🖾 No
IV.3. Does the Energy Compact consider measures that address the needs of the most vulnerable groups (e.g. those impacted the most by energy transitions, lack of energy access)?
V. Feasibility and Robustness - Commitments and measures are technically sound, feasible, and verifiable based a set of objectives with specific performance indicators, baselines, target
V.1. Is the information included in the Energy Compact based on updated quality data and sectoral assessments, with clear and transparent methodologies related to the proposed m
V.2. Has the Energy Compact considered inclusion of a set of SMART (specific, measurable, achievable, resource-based and time based) objectives? 🖾 Yes 🗆 No
V.3. Has the Energy Compact considered issues related to means of implementation to ensure feasibility of measures proposed (e.g. cost and financing strategy, technical assistant no gaps, data and technology)? 🛛 Yes □No

opment for Paris Agreement
pact compared to existing frameworks?
latest alohal analysis and data including the
ratest grobal analysis and data melauning the
evelopment plans and priorities.
No
?⊠Yes □No
ets and data sources as needed.
measures? ⊠Yes □No
needs and partnerships, policy and regulatory

### **SECTION 8: ENERGY COMPACT GENERAL INFORMATION**

8.1. Title/name of the Energy Compact

#### Multilateral Energy Compact for Health Facility Electrification

8.2. Lead entity name (for joint Energy Compacts please list all parties and include, in parenthesis, its entity type, using entity type from below)

USAID/Power Africa (Govt)
Sustainable Energy for All (SEforALL; Other: Quasi-International Organization)
United Nations Development Programme (UNDP; UN agency)
The International Renewable Energy Agency (IRENA; Intergovernmental Organization)
SELCO Foundation (NGO)
Power for All (NGO)
Odyssey Energy Solutions (Private sector)
We Care Solar (NGO)
Shell Foundation (Investor; endorsement of the Energy Compact)
UNICEF (UN agency; endorsement)
UNITAR (UN agency; commitment on behalf of Global Platform for Action on Sustainable Energy in Displacement Settings)
Clinton Health Access Initiative (NGO; endorsement)
Ministry of Foreign Affairs, Denmark (Govt)
GAVI, The Vaccine Alliance

8.3. Lead entity type

□ Government	□ Local/Regional Government	Multilateral body /Intergodiction
□ Non-Governmental Organization (NGO)	□ Civil Society organization/Youth	□ Academic Institution /Scie
Private Sector	Philanthropic Organization	$\Box$ Other relevant actor

#### 8.4. Contact Information

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8.5. Please select the geographical coverage of the Energy Compact

⊠Africa ⊠Asia and Pacific □Europe □Latin America and Caribbean □North America □West Asia □Global

8.6. Please select the Energy Compact thematic focus area(s)

Energy Access Energy Transition Enabling SDGs through inclusive just Energy Transitions Innovation, Technology and Data Finance and Investment.

overnmental Organization ientific Community

# SECTION 9: ADDITIONAL INFORMATION (IF REQUIRED)

Please provide additional website link(s) on your Energy Compact, which may contain relevant key documents, photos, short video clips etc.

Organizations that are in support of and are contributing to the achievement of the targets under this HFE Energy Compact include:

	DATA	COORDINATION	IMPLEMENTATION
	(expressed ambition 2020-2025;		(expressed ambition 2020-2025; subject
	subject to availability of funding)		to availability of funding)
USAID/Power Africa		HFE working group	10,000 health facilities
SEforALL	4 Country assessments	HEPA;	
		HFE working group	
UNDP	5 Country assessments	Support national, regional and	3,000 health facilities
		global Multi-stakeholder	
		coordination mechanisms and	
		efforts	
UNICEF	10 technical assessments at the	Policy coordination and	Approx. 25,000 facilities with solar cold
	country level	interlinkages to ensure that	chain and healthcare electrification.
		resilient health facilities are	
		part of national climate	
		policies/adaptation plans	
SELCO Foundation	8 Country assessments		21,500 health facilities
	5 states in India		
Power for All	3 Country assessments		
Odyssey Energy Solutions	Powering Health Platform		
We Care Solar		Light Every Birth campaign in 7	6,000 power solutions for emergency
		countries	health services (maternal-child health)
UNITAR (on behalf of the			300 health facilities in displacement
GPA)			settings
GAVI			20,000-25,000 solar direct drive
			refrigerators
IRENA	7 country assessments	7 health-energy national	
		stakeholder coalitions	
	Contribution to co-published Global	established (tbc).	
	Assessment of Electricity in Healthcare		
	Facilities study.	Multi-stakeholder discussions	
		on health and energy during	
		next two editions of the	
		International Off-grid	
		Renewable Energy Conference	
		(IOREC) as well as other	
		suitable IRENA events.	

The Multilateral Energy Compact for Health Facility Electrification is further endorsed by:

- The Ministry of Foreign Affairs, Denmark
- Shell Foundation
- Clinton Health Access Initiative

