

# Global health funding reaches new high as funding priorities shift

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Global health funding hit an all-time high of \$31.3 billion in 2013, five times greater than in 1990. Yet with 3.9% growth from 2012 to 2013, the year-over-year increase falls short of the rapid rates seen over the previous decade, according to new research by the Institute for Health Metrics and Evaluation (IHME) at the University of Washington being published online in a web first edition on April 8 by *Health Affairs*.

As funding from many bilateral donors and development banks has declined, growth in funding from the GAVI Alliance, the Global Fund to Fight AIDS, Tuberculosis and Malaria, non-governmental organizations, and the UK government is counteracting these cuts. Global [health](#) funding remains small relative to what high-income countries spend on their own health, representing only 1% of these countries' health expenditure.

The findings will be presented today by IHME Director and report co-author Dr. Christopher Murray at the Center for Strategic and International Studies (CSIS). The results will be published online in *Health Affairs* and in the fifth annual edition of IHME's health funding series, *Financing Global Health 2013: Transition in an Age of Austerity*.

The findings will also be available in a new online data visualization tool, and the data from the study will be available on IHME's website at [healthdata.org](http://healthdata.org).

In addition to providing a detailed picture of donors' [global health](#)

spending, the report tracks development assistance for different health issues up to 2011, the most recent year data are available. IHME found that funding for maternal, newborn, and child health increased by nearly 18% between 2010 and 2011, reaching \$6.1 billion.

"Donors' continued support for increased spending on maternal, newborn, and child health reflects the global sense of urgency to meet the Millennium Development Goals by 2015," Dr. Murray said.

For the first time, IHME measured health funding for tobacco control, which totaled \$68 million in 2011. In comparison, funding for HIV/AIDS, the health issue receiving the most funding in 2011, was 113 times as large as funding for tobacco control.

The report found gaps between donor funding and disease burden in most regions, particularly with respect to non-communicable diseases (NCDs). Funding related to this category expanded from 2010 to 2011, yet while NCDs are a prominent and rising portion of disease burden in the developing world, they are not a primary focus of development assistance for health.

"The Global Burden of Disease shows steady growth in the burden of non-communicable diseases in all regions except sub-Saharan Africa," said study co-author Dr. Joseph Dieleman, who leads health financing research at IHME. "There is relatively little development assistance for health in these countries for NCD-related programs."

IHME also compared development assistance for different health issues to disease burden. Even though sub-Saharan African countries tended to receive the greatest volume of malaria assistance, for example, as a whole they received less than \$60 of malaria funding for every year of healthy life lost to malaria between 2006 and 2010. In comparison, Latin America and the Caribbean received nearly \$2,000 of malaria funding

per year of healthy life lost during this same period.

For NCDs, the funding per year of healthy life lost was much smaller, less than 50 cents in South Asia from 2006 to 2010, and just over \$2 in Latin America and the Caribbean.

Even though much of the global health community's attention is focused on development assistance for health, IHME researchers found that developing countries on average spend 20 times more of their own resources on health than they receive in assistance. Excluding donor assistance, government health expenditure amounted to \$613.5 billion in 2011. This spending grew 7.2% between 2010 and 2011.

In most countries, donor [funding](#) made up less than 10% of total government spending on health. In certain Asian and sub-Saharan African countries, however, development assistance for health accounted for more than half of total government health spending.

Provided by Institute for Health Metrics and Evaluation

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