

World spends more than \$200 billion to make countries healthier

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The world invested more than \$200 billion to improve health in lower-income countries over the past 15 years.

Global health financing increased significantly after 2000, when the United Nations established the Millennium Development Goals, which included a strong focus on health. This trend in funding has only recently started to change, according to new research by the Institute for Health Metrics and Evaluation (IHME) at the University of Washington. The article, "Sources and Focus of Health Development Assistance, 1990-2014," was published online June 16 in the *Journal of the American Medical Association (JAMA)*.

After growing rapidly from 2000 to 2010, global health funding was stagnant between 2010 and 2014, amounting to \$35.9 billion in 2014. Funding decreased by 1.6% between 2013 and 2014. If the rapid growth rates of the last decade had continued, \$38.4 billion more funding would have been available over the last four years for improving health in developing countries.

For the first time, IHME researchers tracked funding for infectious diseases other than HIV/AIDS, malaria, and tuberculosis - which includes conditions such as neglected tropical diseases and Ebola. The researchers estimate that \$1.1 billion was spent on Ebola in 2014, a total that includes humanitarian relief. Development assistance for Ebola, which is a subset of total funding for Ebola, amounted to \$652 million in 2014.

"Even though funding growth has stalled in recent years, it's clear that funding in support of specific Millennium Development Goals grew at an exceptional rate during the first decade the goals were in place," said Dr. Joseph Dieleman, Assistant Professor at IHME and the study's lead author. "Tracking the dollars shows that the Ebola epidemic also garnered substantial funding from donors."

While global health spending from most funding sources stayed constant, IHME researchers estimate that funding from private donors and the governments of the United Kingdom, Australia, and Japan increased between 2013 and 2014. Among the organizations who channel this funding, the African Development Bank and UNICEF expanded their funding in 2014, largely in response to the Ebola epidemic. Also, the World Health Organization; the Bill & Melinda Gates Foundation; Gavi, the Vaccine Alliance; and the Swiss Agency for Development and Cooperation spent more in 2014 than they did in 2013.

In addition to the research article published in *JAMA*, the results will be presented in the sixth annual edition of IHME's health funding series, *Financing Global Health 2014: Shifts in Funding as the MDG Era Closes*. The findings will be presented on June 23 by IHME Director and report co-author Dr. Christopher Murray at the Center for Strategic and International Studies (CSIS).

The results will also be available in an online data visualization tool.

Since the Millennium Development Goals (MDGs) were launched in 2000, donors have invested \$227.9 billion to help achieve the health-related MDGs, which target maternal and [child health](#), HIV/AIDS, tuberculosis, and malaria. Yet funding for many of these areas decreased between 2013 and 2014. Development assistance for tuberculosis, maternal and child health, and HIV/AIDS fell by 9.2%, 2.2%, and 2.2%, respectively. Development assistance for malaria increased by 0.4%

during this period.

Researchers also found that maternal, newborn, and child health receives financial backing from a variety of donors, but HIV/AIDS and malaria efforts are dominantly funded by the US government.

"As the MDG era comes to a close, maternal and child mortality, HIV/AIDS, tuberculosis, and malaria remain among the top threats to health in sub-Saharan Africa," said Dr. Murray. "Because the US government is the dominant funder of development assistance for HIV/AIDS and malaria, funding for these diseases is more vulnerable to political and economic shifts than development assistance for maternal and child health, which benefits from a broader donor base."

Within the category of development assistance for maternal and child health, donors spent \$3.2 billion on child vaccines, \$1.1 billion on child nutrition, and \$778 million on family planning in 2014. In recent years, development assistance for vaccines and nutrition experienced major gains, but funding for family planning remained relatively stagnant.

In comparison, development assistance for addressing mental health and combatting tobacco use was much smaller, amounting to \$164 and \$31 million, respectively, in 2014.

Health spending by the governments of low- and middle-income countries reached an all-time high of \$711.1 billion in 2012, growing 9.7% between 2011 and 2012.

"While a great deal of attention is focused on donors' efforts to improve health in developing countries, the countries themselves invest much more money," said Dr. Dieleman. "For every \$1 donors spend in global health, developing countries spend nearly \$20. However, in some low-income countries, it's one donor dollar for every dollar spent by the

country."

Other major findings from the report:

- The United States continued to serve as the largest source of funds, providing \$12.4 billion in 2014. Although the US transferred substantial sums of DAH to a number of other channels, it provided 71.6%, or \$8.9 billion, through its own bilateral aid agencies.
- The contribution of the United Kingdom increased 1.6% in 2014, with DAH from the UK amounting to \$3.8 billion. UK government agencies received 46.9% of UK public funding, or \$1.8 billion, in 2014, a 3.3% decrease over 2013 levels.
- Trends in the DAH provided to public-private partnerships were mixed. With expenditure of \$1.8 billion in 2014, Gavi [funding](#) rose 8.2% relative to 2013 levels. In contrast, financing provided by the Global Fund to Fight AIDS, Tuberculosis and Malaria dropped 6.9% to \$4.1 billion in DAH in 2014.
- In 2014, the Bill & Melinda Gates Foundation was [global health's](#) largest private supporter, supplying \$2.9 billion of DAH. Of these funds, 55.8%, or \$1.6 billion, was channeled directly through the foundation, a 5.1% rise over 2013.
- The DAH channeled by non-governmental organizations grew 3.8% in 2014, with total spending amounting to \$5.4 billion in 2014.
- Sub-Saharan Africa continued to receive the largest share of DAH. In 2012, \$11.8 billion was provided for [health](#) in the region, 35.7% of all DAH. This contrasts with the share of DAH provided for South Asia (6.9%), East Asia and the Pacific (6.8%), Latin America and the Caribbean (5.6%), and North Africa and the Middle East (1.7%).

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