Support for Global Health

AS MORE NATIONS STRUGGLE WITH STRESSED ECONOMIES, AID TO THE DEVELOPING WORLD BECOMES increasingly vulnerable to governments’ budgetary cuts. The industrialized world is recognizing that coordinating global development assistance is the most efficient way to maximize effectiveness and minimize duplication. Earlier this year, the United States, the largest funder of global health assistance, announced that it seeks to expand multilateral efforts to address the major health problems of developing countries. One of the triumphs of multilateral cooperation has been the Global Fund to Fight AIDS, Tuberculosis and Malaria, a program that has saved millions of lives in developing countries. That is why the $50 million reduction in funding for the Global Fund requested by the U.S. government for fiscal year 2011, in the face of increased requests for expanded coverage by those countries, would be a major setback.

The Global Fund was created in 2002 as an innovative multilateral agency to mobilize aid at a global scale. As both a funding and a knowledge agency, it operates under the principle of country ownership, in which a country’s coordinating mechanism (with representatives from government, nonprofit organizations, the private sector, and civil society) takes ownership of the project, formulating and implementing programs on the ground. A portion of the Global Fund is also allocated to strengthening a country’s burdened health system more generally, thus minimizing the diversion of limited resources from other needed programs. Thus far, it has supported comprehensive prevention, treatment, and care programs in 144 countries through more than $19 billion of donor financing. Annually, it provides about 57% of all international financing for tuberculosis treatment, 60% for malaria, and 23% for HIV. Before funding is renewed, each project is rigorously reviewed and evaluated.

Approximately 5 million people would have died of AIDS, tuberculosis, or malaria over the past 5 years if not for the interventions supported by the Global Fund. It has enabled 2.5 million people to receive antiretroviral drug therapy for HIV. In addition, 6 million people have been provided with effective tuberculosis treatment, and 104 million insecticide-treated bed nets have been distributed to protect families from malaria. Funding has also gone toward care for orphans; preventing transmission of HIV from mother to child; and malaria treatment, with a major thrust to use artemisinin-based combination therapy to prevent resistance to what is currently the most useful drug for malaria.

For every $1 the U.S. government contributes, the Global Fund leverages $2 in contributions from other donor governments. Decreasing support for this fund would thus be inconsistent with the proclaimed new multilateral objectives of the Obama Administration. The U.S. International Affairs budget, requested for 2011 at $58.5 billion, represents only 1.5% of the federal budget, with health constituting $10.43 billion of that amount. Yet last month, the Senate Budget Committee announced a cut of $4 billion, or 7%. Given the success of the President’s Emergency Program for AIDS Relief (PEPFAR) and Global Fund programs, cuts in the health component could have a tragic impact on millions of lives. Bilateral assistance such as PEPFAR, now in 30 countries, has value to the United States in both political and humanitarian terms. But the United States cannot itself be doctor to the world. Increased multilateral support through the Global Fund would greatly expand the U.S. contribution, ensure efficiency, and enable shared responsibility with other donors.

By announcing its intent to expand multilateral efforts, the United States has committed itself to maintain leadership in international development, which the White House states to be as critical to national security as defense and diplomacy. This commitment should include vigorous funding for global health, including the Global Fund. In a turbulent world with huge disparities of wealth, health, and education, all nations must support partnerships that effectively direct the limited resources available toward helping the world’s poorest live a better life.

— Barry R. Bloom

10.1126/science.1189538