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## Investing in the World Health Organization

Barry R. Bloom, David E. Bloom, Joel E. Cohen, Jeffrey D. Sachs

No international organization has been more successful in promoting global health and well-being in the past half century than the World Health Organization (WHO). It has been at the forefront of advances that have allowed people to live longer and healthier lives that are far less threatened by infectious diseases. It has also improved access to good quality health care and diminished ignorance about public health, biology, and medicine. These improvements also contribute indirectly to living standards by promoting increased productivity, income, gender equity, and accumulation of human capital.

United States support of WHO has always been justified on grounds of national self-interest and humanitarian concern. Given the disrespect that diseases have for national boundaries, the increasing depth and complexity of our participation in the world economy only reinforce this argument. The case for U.S. support is further buttressed by the phenomenal strength of the U.S. economy and the enormously promising initiatives that WHO is undertaking under the leadership of Gro Harlem Brundtland. She has, in a few months, "reinvented" WHO to better address long-standing and emerging health problems, giving high priority to addressing the health needs of the poor, attacking emerging threats to health, strengthening health systems, and increasing knowledge to be used for decision-making. Preventing malaria and avoidable blindness, reducing addiction to tobacco among the young, controlling tuberculosis, working with the United Nations (UN) AIDS program on HIV prevention and AIDS care, and eliminating as public health problems such diseases as polio, leprosy, guinea worm disease, and Chagas disease are also top priorities for the "new" WHO. However, we regret to note that the United States is over \$35 million in arrears in assessed dues to WHO. Furthermore, the U.S. position of resisting even nominal increases in its contribution to the regular budget of WHO compromises America's vital interest in global health, violates the spirit of American generosity, and represents the antithesis of global leadership.

WHO has two sources of funds for financing its operations: regular budgetary contributions (the assessed contribution) and extrabudgetary contributions. In terms of real purchasing power, WHO's regular budget (\$843 million for the current biennium) has declined by an estimated 20% during the past decade, jeopardizing its ability to carry out its mission and programs. In 1998, the United States gave WHO \$46.1 million in extrabudgetary contributions. Although it is the largest contributor to specific programs, it ranks on both a per-person basis and as a share of gross domestic product far below Norway, Denmark, Sweden, the Netherlands, the United Kingdom, Australia, and Canada. We believe that the United States should reverse this situation. If matched by other donors, a 3.7% increase in our assessed contribution, which would amount to less than \$4 million annually, would allow WHO to cover the price increases and exchange rate fluctuations it can reasonably be expected to face. On economic, political, and humanitarian grounds, U.S. support for WHO must not be allowed to erode.

The U.S. government has vigorously criticized international agencies for ineffectiveness and for failing to exercise leadership in the past and has often said that U.S. support for the UN should be linked to reform and performance. WHO is exemplary in this regard. For example, it has reduced its administrative costs this year by 15%. Given WHO's record of success and its new vision, it is incumbent upon us to pay our arrears and enlarge our financial contribution so that WHO can fulfill its global mandate.

Representatives of all WHO member states will meet at the World Health Assembly in Geneva on 17 to 25 May 1999 to decide WHO's budget and member states' assessments. The United States will express its position at that meeting. We urge readers to contact their congressional representatives to convey their views on U.S. funding of WHO.

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