UNITE
Parliamentarians Network
for Global Health

Join Your **Delegation**

at the **78th**
World Health Assembly

| CALL TO ACTION

Sustainable Financing for Global Health

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1. Background on the World Health Assembly

The World Health Assembly (WHA) is the decision-making body of the World Health Organization (WHO). It is attended by delegations from 194 Member States and focuses on a specific health agenda. The main functions of the World Health Assembly are to determine the policies of the Organization, appoint the Director-General, supervise financial policies, and review and approve the proposed programme budget. The Health Assembly is held annually in Geneva, Switzerland. The 78th World Health Assembly is being held on 19–27 May 2025. The theme of this year's Health Assembly is: **One World for Health**.

2. Sustainable Financing - WHO

WHO is the directing and coordinating authority for health within the United Nations system. It works worldwide to promote and ensure that 6 billion people enjoy better health and well-being, 5 billion people benefit from universal health coverage without financial hardship and 7 billion people are better protected from health emergencies. WHO does so by setting international standards, providing technical assistance to countries, and monitoring and analyzing health trends.

WHO's ability to fulfill its mission is currently threatened by **chronic underfunding** and **overreliance on earmarked contributions**[1]. In 2022–2023, only 13% of WHO's financing came from fully predictable sources—namely, assessed contributions from Member States. The remaining funds were voluntary contributions, the majority of which were earmarked for donor-prioritized projects, often irrespective of the needs previously identified by WHO or low- and middle-income countries[2].

The WHO's Fourteenth General Programme of Work (GPW 14) for 2025-28, aims to **save at least 40 million lives**. Among its key objectives, the programme plans to:

- provide **access to health** services for **over 150 million people** in humanitarian settings across 30 countries;
- **increase** the delivery of **vaccines** to **priority countries**;
- support 55 countries in **training and employing 3.2 million health workers**;
- Assist 84 countries in achieving targets for the **elimination of malaria, mother-to-child transmission of HIV,** and other diseases.

Nevertheless, **WHO still faces a funding gap for 2025 of $600 million** and faces a challenging financing environment in future years**.** Hence, WHO financing should be:
+ Predictable ➔ Upfront resources at the start of the 4-year planning cycle allow WHO to plan effectively, keep a stable workforce and allocate funds efficiently.

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[1] *Earmarked contributions refer to voluntary funds provided by donors—such as member states, philanthropic foundations, or private entities—that are designated for specific purposes, programs, or regions. Unlike assessed contributions, which are mandatory dues paid by member states and can be used flexibly across WHO's activities, earmarked contributions are restricted to uses as specified by the donor.*

[2] WHO. Working Toward a Sustainably-Financed WHO

+ Flexible ➔ Funding untied to specified areas of work allows WHO to allocate resources strategically and ensure adequate and equitable funding across topics.
+ Resilient and Independent ➔ Broadening the donor base avoids reliance on a small set of donors[3].

Member States have agreed in principle to the gradual increase of Assessed Contributions until they cover 50% of the of the 2022–2023 core budget by 2030-31, pending approval by the World Health Assembly on progressive increases. Additionally, the WHO has launched its first **"Investment Round"**, a replenishment mechanism calling all stakeholders to make financial pledges to the base budget of the GPW 14, aiming to mobilize the remaining budget[2].

3. Financing other Global Health Organizations

The year 2025 will be a pivotal moment for global health financing. In addition to the World Health Organization, several other international organizations—including **the Global Fund to Fight AIDS, Tuberculosis and Malaria,** and **Gavi, the Vaccine Alliance**—are also seeking to replenish their funding. While these replenishment processes will not be decided during the WHA, they remain highly relevant in broader discussions on health financing. UNITE strongly supports both organizations and is actively encouraging its members to advocate with their national governments for increased contributions to their replenishment efforts.

Global Fund: Since its creation in 2002, The Global Fund has **saved over 65 million lives.** This has contributed to an **increase in life expectancy from 49 to 61 years in 15 sub-Saharan African countries** between 2002 and 2021, with over half of these gains attributable to progress against HIV, TB, and malaria. It has **disbursed over US$65 billion in total**, and these investments have **generated a total of US$400 billion in direct productivity gains**. Approximately **three-quarters of Global Fund grants go to Africa**, and nearly **one-fifth goes to countries in Southeast Asia**. Decisions about which programs to prioritize for funding are made at the country level, with governments, civil society, and businesses leading implementation and driving these remarkable results.

This year marks the Global Fund's 8th Replenishment, with a goal of **raising US$18 billion** to fund its **next three-year grant cycle**. If successful, the Global Fund aims to **save an additional 23 million lives** and **prevent approximately 400 million new infections by 2029**. This would lead to healthier populations and contribute to economic growth, as more working-age adults remain healthy and productive[4].

[3] WHO. WHO's Investment Round
[4] The Global Fund to Fight HIV, TB and Malaria (2024) Investment Case. Eighth Replenishment 2025

Gavi, The Vaccine Alliance: Since its inception in 2000, Gavi has helped **vaccinate more than half the world's children** (over 1.1 billion children) against some of the world's deadliest diseases, **preventing more than 18.8 million deaths**, **halving child mortality in 78 lower-income countries**, and **generating over US$ 250 billion in economic benefits**. Gavi also plays a critical in global health security – preventing outbreaks of infectious disease through routine and preventive vaccination, maintaining global vaccine stockpiles, and supporting outbreak response against existing threats like measles, cholera and Ebola and newer ones like mpox.

Gavi's next strategic cycle, from 2026-2030, provides a unique opportunity to significantly accelerate this impact – the last opportunity to do so before the deadline to achieve the UN Sustainable Development Goals. For the next strategic cycle, Gavi aims to raise at least **US$ 9 billion** to **immunise at least 500 million more children. These efforts will save an additional 8-9 million lives and generate at least US$ 100 billion in economic benefits for Gavi implementing countries**. By improving access to existing vaccines like rotavirus, measles and human papillomavirus (HPV), while introducing new vaccines against deadly diseases like malaria, dengue and tuberculosis, Gavi can reach the next billion children in half the time.

Between 2026-2030, Gavi will strengthen its role in global health security, essentially protecting the world by acting as the first line of defence against infectious disease threats. In addition, Gavi will expand its vaccine programmes to prevent outbreak-prone diseases at source, while also making its largest investment in global emergency vaccine stockpiles, alongside using its pandemic-ready instruments to help respond to major public health emergencies.[5]

4. Call for action

Global health funding is under significant strain due to stagnating development assistance, rising debt burdens in low- and middle-income countries (LMICs), and mounting demands from overlapping crises such as pandemics, climate shocks, and conflicts. Recent signals from some actors indicating reduced engagement with the WHO or a scaling back of foreign aid programs further challenge the stability of global health efforts, potentially weakening health systems and putting millions of lives at risk. This widening funding gap underscores the urgent need for sustainable, diversified, and predictable financing mechanisms for global health.

Parliamentarians have a crucial role to play in reversing this trend by championing health investment within national budgets, fostering multilateral cooperation, and ensuring that health remains a priority in foreign policy and development agendas.

Therefore, **UNITE calls on all its members to participate in the World Health Assembly as part of their national delegations** and:

[5] Gavi's High-Level Pledging Summit 2025 to be co-hosted by the European Union and the Bill & Melinda Gates Foundation

- **Champion a sustainably financed WHO, including through its Investment Round,** to ensure WHO's financial independence, while promoting **national contributions to the Global Fund's 8th Replenishment** and **Gavi's new 5-year strategy**, Gavi 6.0.
- **Elevate the issue of global health funding** in national budget discussions and foreign affairs debates.
- Advocate for global solidarity and the continued importance of **multilateral leadership in health**.
- Call on governments to **increase foreign aid investments in health**.
- Promote local discussions by encouraging parliaments and governments to prioritize health within national agendas—strengthening health systems domestically as a foundation for broader global impact.