KEY SOURCES OF DEVELOPMENT ASSISTANCE FOR HEALTH

FRANCE

In October 2019, France hosted the Global Fund’s Sixth Replenishment Conference, where donors pledged more than $14 billion over three years. In 2017, France spent a total of $298.2 billion ($293.3–302.8) on domestic health. Of that total, $40.3 billion (37.9–42.9), or 13.5% (12.8–14.3), was prepaid private spending, $28.2 billion (25.8–30.4), or 9.4% (8.7–10.1), was out-of-pocket, and $239.7 billion (226.1–233.2), or 77.0% (76.1–77.9), was government spending.

2019 DAH from France decreased 19.6% from 2018, to $762.8 million. The Global Fund received $157.7 million from France in 2019 (20.7% of France’s DAH); Gavi received $3.0 million (0.4%); and Unitaid received $85.2 million (11.2%). France’s bilateral agencies received $215.8 million (28.3%), the European Commission received $163.4 million (21.4%), and NGOs received $71.4 million (9.4%).

The bulk of DAH from France in 2017 (the latest year for which regional data are available) – $650.9 million or 52.5% – was directed to sub-Saharan African countries. Across health focus areas, $124.2 million or 16.3% of DAH from France was allocated to HIV/AIDS, $86.3 million or 11.3% to malaria, $60.3 million or 7.9% to tuberculosis, and $133.6 million or 17.5% to reproductive, maternal, newborn, and child health. France is currently involved in a number of SDG-related programs, including the 10FP Sustainable Food Systems Programme and the Network for Therapeutic Solidarity in Hospitals.

GERMANY

Since 1990, Germany has become a leading European power, and in 2018 it had the fourth-highest GDP in the world. In 2017, Germany spent a total of $430.0 billion ($419.9–439.6) on domestic health. Of that, $41.7 billion (38.9–44.7), or 9.7% (9.2–10.2), was prepaid private spending, $54.6 billion (51.7–57.7), or 12.7% (12.1–13.3), was out-of-pocket, and $333.6 billion (327.3–340.0), or 77.6% (77.0–78.2), was government spending.

In 2019, DAH contributions from Germany totaled $2.1 billion, up 9.6% from 2018 and accounting for 5.2% of global DAH. German DAH contributions include $167.4 million (7.9% of its funding) to Gavi, $396.7 million (18.7%) to the Global Fund, and $346.7 million (16.4%) to UN agencies. Another $813.5 million, or 38.4% of Germany’s DAH in 2019, was disbursed through its own bilateral agencies. At the Global Fund Replenishment Conference, Germany pledged $1.1 billion between 2020 and 2022.

Sub-Saharan Africa received $638.5 million (38.0%) of DAH contributions from Germany in 2017; Southeast Asia, East Asia, and Oceania received $248.0 million (14.8%); North Africa and the Middle East received $128.6 million (7.7%); South Asia received $121.1 million (7.2%); Latin America and the Caribbean received $23.1 million (1.4%); and Central Europe, Eastern Europe, and Central Asia received $72.5 million (4.3%).

As in 2018, German DAH in 2019 was again focused on reproductive, maternal, newborn, and child health, providing $665.1 million (31.4%). Other areas funded by Germany include HIV/AIDS, with $285.2 million (13.5%), and tuberculosis, with $115.2 million (5.4%). Germany’s involvement in SDG-related programs includes the Blue Action Fund and the Climate and Clean Air Coalition.

JAPAN

Traditionally a major provider of DAH to improve health throughout the world and especially in Asia, Japan is currently facing the problems of a stagnant economy – Japan’s 2018 GDP was roughly equivalent to its 2000 GDP – an aging population, and COVID-19. Like so many countries, the future of DAH funding from Japan is uncertain.

In 2017, Japan spent a total of $517.7 billion ($533.5–570.8) on domestic health. Of that total, $16.9 billion (13.8–20.8), or 3.1% (2.6–3.7), was prepaid private spending, $71.1 billion (66.9–75.7), or 12.9% (12.1–13.7), was out-of-pocket, and $463.7 billion (449.5–478.6), or 84.1% (83.3–84.7), was government spending.

With a contribution of $1.2 billion to DAH in 2019, up 16.0% from 2018 and representing 0.024% (0.024–0.024) of Japan’s 2019 GDP, Japan is the largest donor to global health in Asia. The bulk of Japan’s DAH was distributed through bilateral organizations ($414.7 million, or 35.4%) and the Global Fund ($442.4 million, or 37.7%). At the Global Fund Replenishment Conference, Japan pledged $840 million between 2020 and 2022.

Across regions, $520.2 million or 42.8% of Japan’s 2017 DAH was directed to sub-Saharan Africa; $185.6 million or 15.3% went to Southeast Asia, East Asia, and Oceania; and $116.2 million or 9.6% went to South Asia. By health focus area, Japan disbursed $207.0 million or 17.7% of its 2019 DAH to HIV/AIDS; $206.7 million of 17.6% to reproductive, maternal, newborn, and child health; $147.3 million or 12.6% to malaria; $126.5 million or 10.8% to tuberculosis; $169.4 million or 14.4% to health systems strengthening/SHWPs; and $62.3 million or 5.3% to other infectious diseases. Japan’s SDG program partnerships include the African Clean Cities Program and partnerships include the African Clean Cities Program.
Figure 1 shows how DAH provided by France, Germany, and Japan breaks down by year, between 2010 and 2019. In particular, the figure shows how DAH from each country rose and fell as a percentage of total DAH from the three countries as a group. In 2010, the countries provided a total of $3.3 billion ($1.0 billion from France, $1.2 billion from Germany, and $1.1 billion from Japan), while in 2019 they provided a total of $4.1 billion ($0.8 billion from France, $2.1 billion from Germany, and $1.2 billion from Japan).