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A tale of two studies

Mark Leon Goldberg - June 19, 2009 - 4:21pm

The Lancet medical journal has a pair of articles out this week about global efforts to fight diseases like AIDS, Malaria, TB in the developing world. The first study, funded by the Bill and Melinda Gates Foundation, purports to be the first comprehensive accounting how much money governments, NGOs, and intergovernmental bodies have invested in so-called Development Assistance for Health (DAH). The study finds that this number has quadrupled from \$5.6 billion in 1990 to \$21.8 billion in 2007, totaling \$196 billion.

The study shows that this influx of resources is not just from public sources, but also from private philanthropy. Also, it shows that most of the money is earmarked for disease-specific efforts: that is, investing in AIDS treatments, TB vaccination programs, or anti-malaria campaigns.

This is where the second study, by the World Health Organization, comes in. Simply stated, it finds that that these investments have yielded variable returns -- the key variant being whether or not a country's health care system can handle the sudden attention to a specific disease. For example, a donor may invest millions to purchase anti-retrovirals, but if there are not enough community-based nurses to monitor the distribution of these drugs progress against the disease may be limited.

Accordingly, WHO study's top recommendation is for donors to get serious about strengthening the health care infrastructure of the developing world. Specifically, it recommends that donors "infuse the health systems strengthening agenda with the sense of ambition and speed that has characterized [disease specific efforts.]"

This is a pretty reasonable conclusion. And it is an important one. Somehow, though, headline writers seem to think this is a searing indictment of the United Nations. Doug Bandow, who is apparently back at Cato, says this is further proof that the UN can't do anything useful. The Fox News headline reads "Studies Say \$196 Billion Wasted on United Nations Health Programs."

On the contrary, *The Lancet* articles show how the *marginalization* of the UN is the primary source of concern. *The Lancet*'s lead editorial explains:

The past two decades have seen dramatic shifts in power among those who share responsibility for leading global health. In 1990, development assistance for health—a crude, but still valid measure of influence—was dominated by the UN system (WHO, UNICEF, and UNFPA) and bilateral development agencies in donor countries. Today, while donor nations have maintained their relative importance, the UN system has been severely diluted. This marginalisation, combined with serious anxieties about the unanticipated adverse effects of new entrants into global health, should signal concern about the current and future stewardship of health policies and services for the least advantaged peoples of the world.

[snip]

The [WHO's] influence might have been eroded during the past two decades. But thanks to WHO's technical leadership (forcing evaluation back onto the global agenda) as well as mistakes by GHIs (ignoring their own performance), the need for a strong, well-funded, and politically supported WHO has become a much sharper and convincing argument today than for many years.

The point is, "new entrants" have tended to focus on specific diseases and not on a more holistic approach that UN bodies tend to favor. As the editorial and the studies show, this is all the more reason to *invest* in UN efforts to improve global public health.

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DELEGATES' LOUNGE

Pakistan's Malaria Emergency

by Dan Carucci



On top of dealing with drones, a Taliban insurgency, and a government crackdown on that insurgency, the more than 2 million recently displaced persons in Pakistan will be forced to face

a new and equally daunting challenge coming in three weeks, the rainy season and the malaria-bearing mosquitoes that soon follow.

This threat is particularly dire because the 18,000-plus families arriving every day, a migration that the United Nations Refugee Agency (UNHCR) has called one the worst since the genocide in Rwanda, have been displaced from regions, the Swat, Lower Dir, and Buner districts of the Northwest Frontier Province, where malaria is not endemic. Refugees are ill-prepared to deal with the disease both because the refugee population has no pre-existing immunity to malaria and because the flow of internally displaced people (IDPs) is quickly overwhelming available resources, including access to life-saving bednets.

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 CTIA hosts #mHealth technology and policy event in Washington, DC this week: http://is.gd/18zMA. UNF/VF & NDN to host PM reception. By RSVP. about 17 hours ago

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