

April 22, 2021

The Honorable Chris Coons, Chair  
State and Foreign Operations  
Subcommittee of Appropriations  
U.S. Senate  
Washington, DC 20510

The Honorable Barbara Lee, Chair  
State and Foreign Operations  
Subcommittee of Appropriations  
U.S. House of Representatives  
Washington, DC 20515

The Honorable Lindsey Graham, Ranking  
Member  
State and Foreign Operations  
Subcommittee of Appropriations  
U.S. Senate  
Washington DC 20510

The Honorable Hal Rogers, Ranking Member  
State and Foreign Operations  
Subcommittee of Appropriations  
U.S. House of Representatives  
Washington, DC 20515

Dear Honorable Chairs and Ranking Members,

The undersigned are organizations and medical professionals with substantial experience delivering healthcare and healthcare information overseas. We are writing to call attention to the extreme underfunding of primary health care in humanitarian situations.

Primary health care funding in humanitarian aid is in a substantially worse situation than other sectors. Furthermore, the ratio of funding to identified need is getting worse, particularly in light of COVID-19 and its aftermath.

The leading medical journal [The Lancet](#) had already sounded the alarm in a January 2020 article titled "Humanitarian crises: needs grow as health funding falls." The Lancet article documented that in 2019 only a third of the global humanitarian health requirement identified by the UN was funded. By contrast, almost two-thirds of the total non-health requirements were funded in 2019, according to data from the Financial Tracking Service (FTS) of the UN Office for the Coordination of Humanitarian Affairs.

According to FTS, the global non-COVID health response was even lower than one-third in 2020, and this is part of a multi-year decline in the response rate for humanitarian health funding. This is despite the fact that FTS data show that the health sector consistently has the second largest funding requirement, after food security.

The Lancet noted that "some health diplomats partly attribute the lower funding 'to the health advocacy gap' that has existed for many years in humanitarian appeals. WHO, being a standard-setting agency and dealing with a complex area, could not match the visibility of standalone agencies with simple remits such as the World Food Programme" and others. Although WHO is an absolutely critical part of global public health, it is stretched thinner than some other organizations.

The attached pie chart showing U.S. humanitarian aid by sector in 2020 shows how little attention the U.S. is giving to health in humanitarian situations. The small proportion that went to health clearly does not reflect its importance. Charts for the previous four years similarly show 2-5% of US funding going to health. While these data from the Financial Tracking Service are imperfect, it is nevertheless clear there is a very serious problem.

In terms of how U.S. humanitarian aid could address this problem, we are glad to note that Senators Jeff Merkley (D-OR) and Jerry Moran (R-KS) have put forward important proposals.

Given the above facts, the global dimensions of the COVID crisis, and the U.S. leadership role in humanitarian aid, it is time to ensure that American aid for comprehensive primary health care in humanitarian situations is commensurate with the need.

Sincerely,

American Academy of Family Physicians  
Evangelical Lutheran Church in America  
Episcopal Relief & Development  
Connecticut Public Health Association  
Delaware Nurses Association  
Maryland Public Health Association  
Missouri Public Health Association  
New Jersey Public Health Association  
North Carolina Public Health Association  
Medical Teams International  
World Concern  
Global Health Ministries  
OneWorld Health  
Fund for Global Health  
Achon Uganda Children's Fund  
Addis Clinic  
The African Cultural Exchange  
Andean Health and Development  
Cachamsi  
Child Family Health International  
COVID Care Force, Inc.  
D-tree International  
Engeye, Inc.  
Garnet Healthcare  
Global Surgical and Medical Support Group  
Health Horizons International  
Heart to Heart International  
Hillside Belize  
Impacto Ministry, Inc.  
INMED  
Kellermann Foundation  
Maternal Life International  
Partners for World Health  
Population Media Center  
Rural Healthcare Initiative  
Shoulder to Shoulder  
Timmy Global Health  
Volunteers in Medical Missions  
WEEMA International

Contact: Keith Johnson, Fund for Global Health, [k.johnson@fundforglobalhealth.org](mailto:k.johnson@fundforglobalhealth.org), 206-214-8870

Attachment:

## United States of America, Government of 2020



<https://fts.unocha.org/donors/2933/summary/2020>

### Funding by sector

15-Apr-2021



