Germany made global health a priority during its 2015 presidency of the G7. As president of the G20 in 2017, it continued this commitment, culminating in a milestone for health. A delegation from WHO, led by Director-General Dr Tedros, participated for the first time, resulting in a comprehensive health track for the G20. This focused on Health Systems Strengthening, Antimicrobial Resistance and Global Health Security.

During the 2016-2017 biennium, WHO worked closely with Germany to develop joint strategic priorities.

A strong supporter of WHO’s transformation and efforts to improve impact and accountability, the partnership with Germany is crucial to keeping the world on track to meet health-related Sustainable Development Goal 3 (SDG).

**Strategic funder**

Germany increased its voluntary funding to WHO, compared to the previous biennium. Combined with German-WHO collaboration in health programming and relaxed earmarking criteria, voluntary funding allows WHO to be more strategic in responding to health needs.

**Key facts**

- Gave US$ 190 million to WHO during 2016-2017 biennium, more than double its contribution in the previous biennium.
- Quickly became the largest single contributor to the Contingency Fund for Emergencies (CFE) since the fund’s creation in May 2015 and was top CFE donor in 2017 with US$ 9.9 million.
- Strong Junior Professional Programme has sponsored over 30 young German professionals to work at WHO over the last 10 years.
- Two German NGOs – Johanniter International Assistance and Arbeiter-Samariter-Bund (ASB), were the first to join the WHO directory of classified Emergency Medical Teams (EMTs) in 2017.
- During 2016-2017, WHO and Germany held one strategic dialogue and Germany was an active participant in the WHO financing dialogues.
Antimicrobial Resistance (AMR)
US$ 1.9 million

Germany recognized the global threat of antimicrobial resistance during its G20 presidency in 2017, supporting WHO’s work in this area through both funding and institutional support.

Impact highlights:
– 42 countries enrolled and 40 countries reported on AMR surveillance systems in the new Global Antimicrobial resistance surveillance System (GLASS).
– German funding allowed WHO to develop — in collaboration with University of Tübingen, Germany — a list of priority drug resistant pathogens for which new antibiotics are urgently needed. To develop these missing treatments, WHO jointly with Drugs for Neglected Diseases initiative and support from Germany, set up the Global Antibiotic R&D Partnership (GARDP), a Geneva-based foundation that is developing new antimicrobial treatments on a not-for-profit basis.

Health systems strengthening
US$ 12.3 million

German funds allowed WHO to assist countries so quality health systems and services become more people-centered, with motivated and well-trained health workers. Better services mean accessibility, availability and affordability for the people who need them. Progress was possible during 2016-2017 thanks to the Global Strategy on Human Resources for Health: Workforce 2030, the Working for Health programme, support to Patient Safety and to the WHO European Regional Office towards achieving the Health 2020 agenda.

Impact highlights:
– 53 Member States received technical support from WHO to develop and implement health workforce solutions.
– Successful launch of the Global Patient Safety Challenge to reduce severe, avoidable medication-associated harm in all countries by 50% over the next 5 years.
– 75 countries use WHO guidance on data, education, health labour markets, gender equality and community health workers.
– 120 countries developed National eHealth strategies.

Emergency preparedness, outbreak and crisis response
US$ 34.5 million

Germany contributed to emergency preparedness, outbreak and response activities. Of the US$ 34.5 million contributed, US$ 13.6 million went to the Contingency Fund for Emergencies (CFE) over the two-year period. In addition, Germany’s funding improved country operations and created stronger global surveillance systems for detection and risk assessment. In 2017, 88% of allocations of US$ 500,000 or less were transferred to the WHO offices in the affected countries within 24 hours of the request.

Impact highlights:
– The CFE made 39 emergency allocations to more than 30 countries for humanitarian and disease outbreak response during 2016-2017.
– In Yemen, 23,000 people were able to access primary health care in various governorates and 4,800 patients received access to lifesaving surgical care.
– In Iraq, 7,000 patients in critical condition were treated at Hammam Al-Alil, and 1,500 treatments were given in Bartella.
– CFE addressed outbreaks of cholera, meningitis, influenza, malaria, dengue fever amongst others, as well as various conflict and humanitarian crises.

1. The areas of work and amounts shown below are a selection, and do not provide a comprehensive report of all the use of the voluntary contributions provided by Germany for implementation in 2016-2017. The figures reflect approximate disbursements during the biennium according to the WHO budget portal. Go to: http://open.who.int/2016-17/contributors/contributor and select Germany for more information.
2. www.who.int/emergencies/funding/contingency-fund/allocations/
Health and environment
US$ 7.5 million

Thanks to Germany’s support, WHO’s work reduced environmental threats to health, which are responsible for about one quarter of the global burden of disease and an estimated 13 million deaths each year.

Impact highlights:
- Based at the UN campus in Bonn, the WHO European Centre for Environment and Health (ECEH) compiles evidence on environmental health risks and provides guidance to countries on how to mitigate these risks.
- Bonn hosted the 23rd session of the Conference of the Parties to the United Nations Framework Convention on Climate Change (COP23), reaffirming the Health, environment and climate coalition (WHO, UNEP, WMO and others) created the previous year, at the COP22 in Morocco.
- In March 2017, WHO published the second edition of Inheriting a sustainable world: The atlas on children’s health and the environment, which outlines the impact of the environment on children’s health and recommends solutions for preventing diseases and deaths in the future.

WHO accountability and transparency
US$ 1.4 million

Impact highlights:
- A new strategy
- A new operating model
- Optimizing organizational performance
- Fit-for-purpose processes
- Organizational culture and staff engagement
- New external engagement and partnerships

WHO reform requires a solid, transparent and accountable system of collaboration. German support has improved transparency and accountability by building the WHO Register of non-State actors required by the Framework of Engagement with Non-State Actors (FENSA).

Impact highlights:
- This project has given visibility to WHO’s work on reporting of budget, financing and results.
- Funding also enhanced the WHO Programme Budget Web portal to allow WHO to join the International Aid Transparency Initiative (IATI).

HIV and TB
US$ 2.5 million for TB

Funding was critical to address these important issues in the European region. In 2016, more than 160,000 people were newly diagnosed with HIV in the region, the highest number of new cases in one year since reporting began in the 1980s. TB remains a serious public health concern, particularly since the WHO European region is the region with the highest rates of multi-drug resistant tuberculosis (MDR-TB).

Impact highlights:
- German funds contributed to new and simplified HIV testing algorithms for faster and more precise confirmation of HIV diagnosis.
- Funds enabled WHO to provide faster responses to HIV in Kazakhstan, Kyrgyzstan, Republic of Moldova, Tajikistan and Ukraine.
- Funding for a TB laboratory and training of health care workers reduced risk of infections leading to decreased cross-contamination among patients.
- Improved diagnostic capacity allows more rapid location of TB patients -- reducing transmission and human suffering.
NCDs and Mental Health
US$ 1.2 million

Premature mortality from noncommunicable diseases (NCDs) stands out as one of the major challenges for development in the 21st century. It affects women and men aged 30 to 70 and leaves no country untouched: 15 million people died prematurely from noncommunicable diseases in 2015.

Impact highlights:
– Nepal, the Philippines and Tajikistan adopted the WHO HEARTS technical package in national action plans to manage hypertension and diabetes in primary health care.
– German funds supported Bolivia, Tanzania and Uzbekistan to strengthen the quality and coverage of cervical cancer screening through the UN Global Joint Programme on Cervical Cancer Prevention and Control.
– Plans set up to eliminate cervical cancer around the globe.
– In 2016, 380 health workers in Liberia received intensive training in management and treatment of mental disorders such as psychosis, depression and epilepsy.

Polio
US$ 18.2 million*

Germany is a longtime supporter of the Global Polio Eradication Initiative (GPEI) with contributions totaling more than US$ 550 million. Chancellor Angela Merkel is a past recipient of Rotary International’s prestigious Polio Champion Award.

In December 2017, Germany announced an additional US$ 2 million in support of Pakistan’s national emergency action plan and US$ 1.2 million to support the transition to a polio-free world.

Impact highlights:
– Polio has been reduced by more than 99.99% since the 1988 launch of GPEI.
– Polio-free world expected in 2023, representing the eradication of a human disease for just the second time in history, after smallpox.
– Even where polio still occurs, in Afghanistan, Nigeria and Pakistan, the virus was cornered into fewer districts than ever before, with just 15 districts infected in 2017, compared to 29 between October 2015 and October 2016.

* In 2016-2017, € 46.2 million was given in support to WHO polio eradication.

Learn more about Germany and WHO’s Partnership in Health:

Also read the WHO Results Report - Programme Budget 2016-2017:
http://www.who.int/about/finances-accountability/budget-portal/rr_2016-17.pdf