

Web Appendix

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Web Appendix 1. Sources of WHO Budget Data

Table A1. Sources of WHO Budget Data			
WHO Report Identifier	WHO Report Title	Description	Electronic Link (accessed on June 1 st , 2008)
A61/3	Director General's Address to the World Health Assembly	Address by Dr. Margaret Chan, Director-General to the Sixty-first World Health Assembly	http://www.who.int/gb/ebwha/pdf_files/A61/A61_3-en.pdf
A61/19	Programme Budget 2006-2007: Performance Assessment	The performance assessment monitors the WHO work plans and provides a mid-term review of progress towards achieving expected results.	http://www.who.int/gb/ebwha/pdf_files/A61/A61_19-en.pdf
A61/20	Financial Report	The Financial Report enables Member States and other partners and collaborators to see how their funds have been used. The assets and liabilities of the Organization are also detailed, and the cash flow is analysed, to enable readers to understand the financial status of the Organization.	http://www.who.int/gb/ebwha/pdf_files/A61/A61_20-en.pdf
A61/20, Addendum 1	Financial Report and Audited Financial Statements for the financial period. 1 January 2006 – 31 December 2007. Annex Extra-budgetary Resources for Programme Activities.	This annex accompanies and forms part of the financial report and audited financial statements for the period 1 January 2006 – 31 December 2007 [document A61/20] and contains information on income received and expenditure incurred under extra-budgetary sources of funds during 2006-2007.	http://www.who.int/gb/ebwha/pdf_files/WHA60/A60_20Add1-en.pdf
A60/30	Unaudited Interim Financial Report for the year 2006. Financial period 2006-2007	The interim financial report enables Member States and other partners and collaborators to see how their funds have been used. The assets and liabilities of the Organization are also detailed, and the cash flow is analysed, to enable readers to understand the financial status of the Organization.	http://www.who.int/gb/ebwha/pdf_files/WHA60/A60_30-en.pdf
A60/30 Add. 1	Unaudited Interim Financial Report for the year 2006. Financial Period 1 January 2006 – 31 December 2007. ANNEX Extra-budgetary Resources from Programme Activities	Details all WHO extra-budgetary contributions by contributor for WHO-assisted activities	http://www.who.int/gb/ebwha/pdf_files/WHA60/A60_30Add1-en.pdf
A61/20 Add. 1	Financial report and audited financial statements for the financial period 1 January 2006 – 31 December 2007 Annex Extra-budgetary resources for programme activities	Details all WHO extra-budgetary contributions by contributor for WHO-assisted activities	http://www.who.int/gb/ebwha/pdf_files/A61/A61_20Add1-en.pdf
A59/3	Director General's Address to the World Health Assembly	Address by the Director-General to the Fifty-ninth World Health Assembly, to have been delivered by Lee-Wong Jok	http://www.who.int/gb/ebwha/pdf_files/WHA59/A59_3-en.pdf
A59/28	Financial Report	The Financial Report enables Member States and other partners and collaborators to see how their funds have been used. The assets and liabilities of the Organization are also detailed, and the cash flow is analysed, to enable readers to understand the financial status of the Organization.	http://www.who.int/gb/ebwha/pdf_files/WHA59/A59_28-en.pdf

PB/2004-05	Proposed Programme Budget: 2004-2005	Identify what budget lines were used for and work plans associated with area of work	http://www.who.int/gb/e/e_ppb2003.html
PBPA/2004-05	Programme Budget: Performance Assessment Report	Identify what budget lines were used for and work plans associated with area of work	http://www.who.int/gb/ebwha/pdf_files/WHA59/PBPA_04_05-en.pdf
PB/2006-07	Proposed Programme Budget: 2006-2007	Identify what budget lines were used for and work plans associated with area of work	http://www.who.int/gb/e/e_pb2006.html
A/MTSP/2008-13 PB/2008-09	Medium term strategic plan 2008-2013: Proposed programme budget 2008-09	Identify what budget lines were used for and work plans associated with area of work	http://www.who.int/gb/e/e_amtsp.html
n/a	Implementation of Programme Budget. 2006-2007 Mid-Term Review	Identify what budget lines were used for and work plans associated with area of work	Not available electronically
WHO 2004	World Health Report 2004	Global Burden of Disease Data, 2002	http://www.who.int/whr/2004/en/09_annexes_en.pdf ; http://www.who.int/healthinfo/bodgbd2002original/en/index.html

Note: Letter 'A' signifies World Health Assembly. The number denotes the session, as in '61' is the 61st session in May 2008, and the second number denotes the document number, as '20' is the 20th document.

Web Appendix 2a. Classification of WHO Areas of Work by Disease Cluster

Appendix Table A2a. WHO Funding for Areas of Work in 2006/2007 (Thousand USD)				
Disease Cluster	Aggregated Budget Line	Regular Budget	Extra-budget	Total
WHO Group I. Infectious Diseases	Immunization and vaccine development	14,371	512,369	526,740
	HIV/AIDS	16,148	258,745	274,893
	Tuberculosis	11,836	222,690	234,526
	Epidemic alert and response	47,925	182,594	230,519
	Communicable disease prevention and control	20,059	132,924	152,983
	Malaria	15,085	122,424	137,509
	Communicable disease research	3,757	104,700	108,457
	Child and adolescent health	27,453	75,004	102,457
	Reproductive health	8,074	68,498	76,572
	Essential medicines	17,029	53,839	70,868
	Making pregnancy safer	24,857	40,294	65,151
	Essential health technologies	12,139	16,547	28,686
	Nutrition*	9,431	17,077	26,508
	Food safety	8,390	17,627	26,017
	<i>Sub-Total</i>	236,554	1,825,332	2,061,886
WHO Group II. Non-communicable diseases	Health and environment**	36,799	53,613	90,412
	Surveillance, prevention and management of chronic, noncommunicable diseases	30,728	33,375	64,103
	Health Promotion**	14,577	38,070	52,647
	Mental health and substance abuse	12,772	19,492	32,264
	Tobacco	13,856	26,214	40,070
	<i>Sub-Total</i>	108,732	170,764	279,496
WHO Group III. Injuries and violence	Violence, injuries and disabilities	4,973	17,628	22,601
	<i>Sub-Total</i>	4,973	17,628	22,601
WHO Non-disease specific allocations	WHO's core presence in countries	128,624	61,979	190,603
	Knowledge managements and information technology	57,319	88,861	146,180
	Health system policies and service delivery	43,302	88,365	131,667
	Infrastructure and logistics	68,524	61,259	129,783
	Emergency preparedness and response	9,035	100,402	109,437
	Human resources for health	38,987	52,661	91,648
	Health information, evidence and research policy	21,151	69,255	90,406
	Human resources management in WHO	22,384	29,489	51,873
	Policymaking for health in development	16,160	29,203	45,363
	Health financing and social protection	16,145	28,822	44,967
	Budget and financial management	21,827	21,050	42,877
	Direction	26,787	11,417	38,204
	Governing bodies	24,933	10,446	35,379
	External relations	17,783	15,043	32,826
	Planning, resource coordination and oversight	12,213	13,497	25,710
	Gender, women and health	4,373	13,330	17,703
		<i>Sub-Total</i>	529,547	695,079

* - p. 57 and 64 in WHO 2006 Mid-Term Budget Review describes this money related to group I causes; ** - pg. 44-47 for health promotion and pg. 58-61 for health and environment

Web Appendix 2b. Classifications used in Figure 2

Appendix Table A2b. Classifications of Areas of Work and Disease Categories, WHO 2004-05		
WHO Areas of Work (budget lines)	Classification	Corresponding Global Burden of Disease Categories
<i>Group I. Infectious Diseases</i>		
Communicable disease prevention and control, research, tropical diseases	Communicable diseases except AIDS, TB and Malaria	Diarrhoeal disease
Immunization and vaccines, blood safety		Respiratory infections
Epidemic response		Tropical Diseases
Essential medicines and technologies		STIs excluding HIV, meningities, Hep B, Hep C, Leprosy, Dengue, Jap. Encephalitis, Intestinal nematode, Respiratory infections, Tropical diseases, Trachoma
HIV/AIDS	AIDS	HIV/AIDS
Tuberculosis	Tuberculosis	Tuberculosis
Malaria	Malaria	Malaria
Child and adolescent health	Child and Maternal Health	Maternal Conditions
Making pregnancy safer		Perinatal Conditions
Reproductive health		Childhood Infections
Nutrition*	Malnutrition	Nutritional deficiencies
Food Safety*		
<i>Group II. Non-communicable Diseases</i>		
NCD surveillance	Non-communicable Diseases	Non-communicable disease
Tobacco		
Health Promotion		
Health and Environment		
Mental Health		
Substance Abuse		
<i>Group III. Injuries</i>		
Injuries, violence and disability	Injuries	Injuries

Notes: Budget lines differed in 2004-05 and 06-07 budget cycles. * - subsequent budgets joined nutrition and food safety as work areas with a heavy focus on malnutrition (e.g. GAIN). See WHO Programme Budget 2004-05 Areas of Work and WHO Programme Budget 2004-05 Performance Assessment Report PBPA/2004-05.

Web Appendix 3. Sources of WHO Extra-budgetary Contributions, 2006-07

Table A3. Sources of WHO Extra-budgetary Contributions, 2006-07		
Top 10 Member States	US Dollars	Percentage of Total
United States	305,668,404	21.5
United Kingdom	303,593,823	21.3
Canada	150,849,285	10.6
Norway	102,395,274	7.2
Sweden	87,274,166	6.1
Netherlands	65,053,198	4.6
Italy	58,924,491	4.1
Japan	46,223,718	3.2
Spain	36,720,013	2.6
Australia	34,979,931	2.5
Total Top 10	1,191,682,303	83.4
<i>Total Member States</i>	1,422,331,985	—
Top 10 Other Sources		
United Nations*	232,070,782	21.6
Gates Foundation	148,174,632	13.8
European Commission	128,127,194	11.9
Rotary International	27,038,394	2.5
World Bank**	24,204,713	2.3
Novartis, Switzerland	11,933,675	1.1
Asian Dev Bank	10,871,000	1.0
World Lung Foundation	10,395,059	1.0
Sanofi-Aventis, France	9,909,802	0.9
Kobe Group, Japan	9,000,000	0.8
Total Top 10	611,725,251	56.9
<i>Total Other Sources</i>	1,075,731,946	—

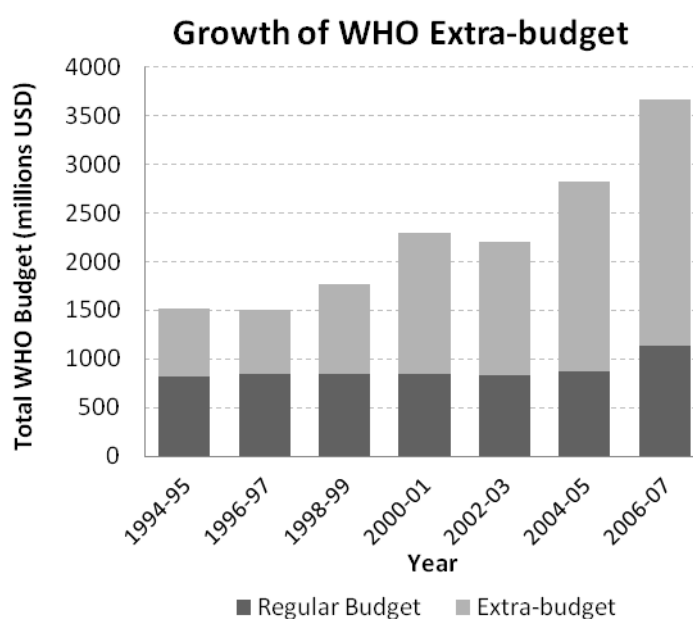
Notes: See WHO A61/20 p. 3-16 for more details. Other sources include only those organizations that contributed more than \$10 million US out of a total of 400 contributors during this period. Data do not sum to 100 percent because of rounding errors. * - excludes funds for UNAIDs and the Global Fund, which WHO administers. The amount drops to \$106,198,595 if funds for emergencies are excluded. ** - excludes funds for Global Alliance Vaccine Initiative but includes funds for Tropical Disease Research and Reproductive Health.

The information reported in the paper has been static. Are there signs of progressive shifts to an allocation of resources that is more in line with the global disease burden?

In this sub-analysis we examine how the distribution of the WHO’s extra-budgetary funds has changed between 2000-01 and 2008-09. We focus on the extra-budgetary funds because the regular budget has been held relatively constant over the years (figure below). Table A4 provides evidence that there are some glimmers of change at WHO. But at the pace of change witnessed in the extra-budgetary funds, and the fact that the regular budget has been held at zero nominal growth, the overall WHO allocations will not match the global burden of disease for at least another 30 years.

Trends in WHO Extra-budgetary Allocations, 2000-01 to 2008-09							
Disease Cluster	Global Burden of Disease		Percentage of WHO Extra-budgetary Funds				
	Percentage of Mortality	Percentage of DALYs	2000-01	2002-03	2004-05	2006-07	2008-09
Infectious Disease	32.2	41.0	95.2	92.5	92.0	90.6	85.5
Non-communicable Disease	58.7	46.9	4.8	7.6	7.2	8.5	14.5*
Injuries and Violence	9.0	12.1	n/a	n/a	0.8	0.9	n/a

Notes: Burden of disease data are from Mathers and Loncar 2006 for the year 2002. Morbidity is measured by disability-adjusted life years (DALYs), which sum years of life lost due to premature mortality (YLL) and years of life lost due to disability (YLD). Data do not sum to 100 percent because of rounding errors. * - WHO 2008 planned budget merged non-communicable diseases and injuries into one category. Budget lines for injuries were unavailable for 2000-01 and 2002-03 budget cycles.



Notes: The allocation of WHO's regular budget, which comes from assessed contributions from member states, is decided upon by the 193 WHO member states through a democratic process at the World Health Assembly. The allocation of WHO's extra-budgetary funds, which come from voluntary contributions, is specified by the donors themselves.

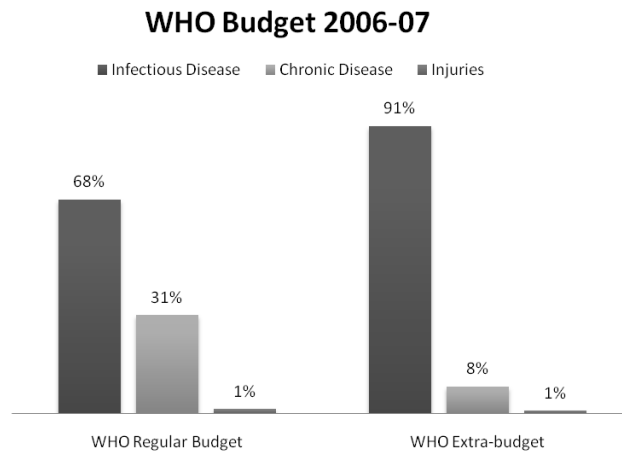
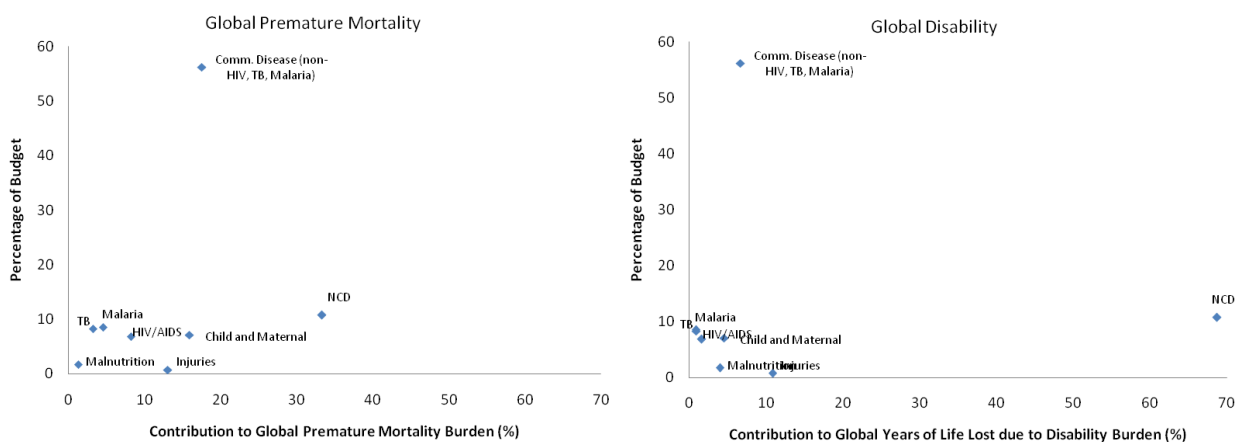
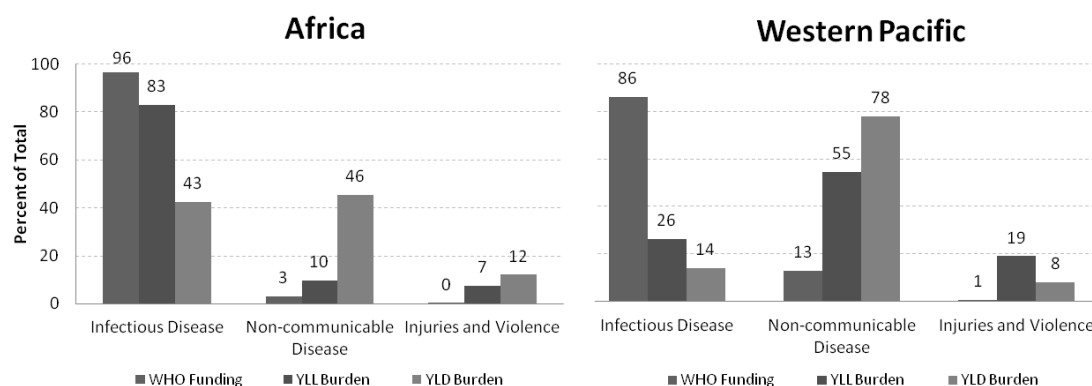


Figure WA5b. Replication of Figure 2



Notes: Global premature mortality (YLL) and disability (YLD) data are from the World Health Organization (WHO) Global Burden of Disease 2002 edition. DALYs are the sum of years of life lost due to premature mortality (YLL) and years of life lost due to disability (YLD). NCD is non-communicable disease. TB is tuberculosis.

Figure WA5b. Replication of Figure 3



Notes: World Health Organization (WHO) allocations are from 2004-05 budget cycle. Global premature mortality (YLL) and disability (YLD) data are from the WHO Global Burden of Disease 2002 edition. DALYs are the sum of years of life lost due to premature mortality (YLL) and years of life lost due to disability (YLD). Data do not sum to 100 percent because of rounding errors.

As expected, there are some differences according to the metric used, with YLLs giving greater emphasis to infectious diseases (because of their disproportionate impact in early childhood) and YLDs giving greater emphasis to non-communicable diseases, as they capture life lived with disability. However, the clear disparities persist whichever metric is used.