

21 Australian global health experts respond to USA defunding WHO

16 April 2020, made on behalf of signatories following this statement

The coronavirus (Covid19) pandemic is a huge threat to public health. This is predominantly because the virus knows no geographic or political boundaries, its mode and rapidity of spread is being investigated in real time during the epidemic, and this poses completely new challenges to health systems. Governments are implementing control measures at different stages and attempting as best they can to communicate the risks of transmission, even though these messages (and the underpinning evidence) changes from week to week.

In this context, it is particularly distressing that the USA has abruptly ceased their funding to the World Health Organization (WHO). It is true that the USA is the leading contributor to WHO, but to remove this funding suddenly and in the middle of a pandemic seems rather callous and introspective. This seems to have been a random decision on the part of the US government, with no thought for its global consequences.

If we don't work together in addressing Covid 19 its impact will be much greater and longer lasting, resulting in sustained morbidity and mortality, prolonged economic recession, and a breakdown of trust and communication among nations. This single action by the US government will have dire consequences, and must be reversed.

We write this as a group of many WHO Collaborating Centres across Australia and New Zealand. We are not all involved in infectious diseases, but work as Collaborating Centres across major health issues and health systems to improve health in our region and beyond. We work with WHO and have been designated as Collaborating Centres, but in countries like Australia we are not funded by WHO. **Nonetheless, we are unanimous in thinking that this de-funding of WHO is a global health disaster, will result in thousands of additional and potentially preventable deaths from Covid 19.** In addition, other critical WHO programs, such as immunisation against polio or measles, will also immediately suffer from budget cuts. Immediate advocacy efforts should be brought to bear on the US government to rescind their decision.

At the time of writing, over 2 million people across the world have acquired the infection in a few short weeks. In some countries control measures are working quite well, but particularly in low income countries, the early stage of the epidemic is being experienced, and much worse is yet to come. Although Australia and New Zealand appear to be flattening the epidemic curve (reducing the number of new cases of Covid 19 each day), other countries are in more trouble, particularly if the epidemic numbers threaten to overwhelm their health system's capacity.

WHO has a key role in global health, notably in infectious disease and epidemic control, where the education and training, developing resources and messages, and continuously updating and communicating control strategies forms a central backbone to the global response. For low income countries, WHO may be the only information source for Health Departments to act. WHO helps to explain transmission, summarises the early symptoms, and explains the need for social distancing in a way that is understood and can be implemented in every country. WHO provides a network of in-country contacts that communicate and disseminate changes to the message or to the evidence.

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These public health actions save many thousands of lives. Thus to reduce the capacity of WHO at this particular time is particularly troubling, because our collective response is critical to attenuate the global and trans-border transmission of Covid19 cases.

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About the World Health Organization's (WHO) Collaborating Centers

WHOCCs are institutions (or subunits thereof) that have been designated by the Director-General to support the WHO as part of a global network. The designation is a recognition of the institution's historical collaboration with the WHO and outlines a schedule for a future program of work.

The WHOCC mechanism is grounded in a win-win relationship. The WHO can access world class institutional capacity for support of its activities and avoid duplication of effort where in-country expertise already exists. Meanwhile, WHOCC host institutions enjoy increased visibility, recognition and the associated benefits at a national and international level.

As of October 2019, there were 50 WHOCCs in Australia, the fifth largest number of WHOCCs in any member state after China, US, India and the UK. These WHOCCs generate widespread positive impacts for health systems and outcomes by making significant contributions to WHO program activities in the region and globally.

SIGNATORIES

1. Emeritus Professor Adrian Bauman, Co-Director WHO Collaborating Centre Physical Activity, Nutrition & Obesity
2. Prof. Stephen Colagiuri, Co-Director WHO Collaborating Centre Physical Activity, Nutrition & Obesity
3. Professor Brian Oldenburg; Director, WHO Collaborating Centre on Implementation Research for Prevention & Control of NCDs
4. Dr Chris Coulter, Director, WHO Collaborating Centre in Tuberculosis Bacteriology
5. Professor George Patton, WHO Collaborating Centre for Adolescent Health
6. Professor Gwynnyth Llewellyn, Head, WHO Collaborating Centre for Strengthening Rehabilitation Capacity in Health Systems
7. Professor Jacqui Webster, PhD, RPHNutri; Director, WHO CC Salt Reduction
8. Professor Julian Gold MD, Director, WHO Collaborating Centre for Capacity Building on HIV and STI Care, Treatment and Support
9. Professor Kairi Kõlves, PhD, Co-Director, WHO Collaborating Centre for Research and Training in Suicide Prevention
10. Professor Margie Peden, Co-Director, WHO Collaborating Centre for Injury Prevention.

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11. Professor Maxine Whittaker MBBS MPH PhD FAFPHM GAICD, Co-Director WHO Collaborating Centre for Vector Borne and Neglected Tropical Diseases
12. Professor Peter Leggat, Co-Director WHO Collaborating Centre for Vector Borne and Neglected Tropical Diseases
13. Professor Peter D Sly AO, Director, World Health Organization Collaborating Centre for Children's Health and Environment
14. Professor Rebecca Ivers, Co-director, WHO Collaborating Centre for Injury Prevention and Trauma Care
15. Professor Stephanie Short, WHO Collaborating Centre for Strengthening Rehabilitation Capacity in Health Systems
16. Professor Susan M Sawyer MBBS MD FRACP, WHO Collaborating Centre for Adolescent Health
17. Professor Prof. Siaw-Teng Liaw, WHO Collaborating Centre for e-health
18. Professor Trevor Duke, WHO Collaborating Centre for Research and Training in Child and Neonatal Health
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20. Associate Professor Mike McDonough, Director, WHO Collaborating Centre for Research in the Treatment of Drug and Alcohol Problems
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