



WHO director-general Tedros Adhanom Ghebreyesus.

WHAT US EXIT FROM THE WHO MEANS FOR GLOBAL HEALTH

Experts foresee troubles ahead as Donald Trump ends US relationship with the agency.

By Amy Maxmen

Global health-policy experts reeled after an announcement by US President Donald Trump on 29 May that he would be “terminating” the country’s relationship with the World Health Organization (WHO).

The announcement follows a ramping up of blame levelled at the WHO by Trump. Ten days earlier, the president had sent a sharply worded letter to the agency’s director-general, Tedros Adhanom Ghebreyesus, threatening to permanently freeze funding and quit the organization if it didn’t “demonstrate independence from China” within 30 days. Now, WHO leaders and others are predicting repercussions that could range from a resurgence of polio and malaria to barriers in the flow of information on COVID-19. Scientific partnerships around the world could be damaged, and the United States might lose influence over global health initiatives. “This will hurt,” says Kelley Lee, a global health-policy researcher at Simon Fraser University in Burnaby, Canada.

Proposals for new US-led initiatives for pandemic preparedness abroad do little to quell researchers’ concerns. They say these efforts might complicate the world’s response

to COVID-19, and global health more generally. “It’s surreal to even be having this conversation, since it’s so hard to get one’s head around the massive implications,” says Rebecca Katz, director of the Center for Global Health Science and Security at Georgetown University in Washington DC.

The split is poorly timed, given the need for international coordination to contend with the coronavirus. “In this pandemic, people have said we’re building the plane while flying,” Katz says. “This proposal is like removing the windows while the plane is mid-air.”

Balance due

Trump does not need congressional approval to withhold funds from the WHO, and it is unclear whether he will require it for withdrawal from the agency. Last year, the US government gave the WHO roughly US\$450 million. The country provides 27% of the WHO’s budget for polio eradication; 19% of its budget for tackling tuberculosis, HIV, malaria and vaccine-preventable diseases such as measles; and 23% of its budget for emergency health operations. If these initiatives shrink, researchers say, death and suffering will surge. David Heymann, an epidemiologist at the London School of Hygiene and

Tropical Medicine, says this will also amount to squandered investment for the United States, particularly for polio. Gains won through vaccination campaigns that cost hundreds of millions of dollars will be lost, he says.

New initiatives

Trump says that the US government will continue to fund global health through aid groups and its own agencies. And proposed legislation suggests that the government might be considering alternative methods. *Devex*, an online platform focused on global development, reported that the US state department is circulating a proposal for a \$2.5-billion initiative that would oversee national and international pandemic responses. And late last month, a proposed bill for a ‘Global Health Security and Diplomacy Act of 2020’ was introduced to the Senate. The bill, obtained by *Nature*, would authorize \$3 billion for an international initiative to contain epidemics at home and abroad, to be overseen by a presidential appointee from the US state department.

Amanda Glassman, a senior fellow at the Center for Global Development, a think tank based in Washington DC, says that she and her colleagues welcome a US effort dedicated to fighting pandemics worldwide. But she doesn’t expect such parallel efforts to be very effective if they don’t work alongside a strong WHO. That’s because it takes years to build partnerships with countries, and the WHO works in some regions that the United States does not. Lee agrees. “You can’t just show up in Afghanistan and start vaccinating people.”

“The US relies on multilaterals to work in countries where diplomatic ties are almost non-existent,” says Suerie Moon, a global-health researcher at the Graduate Institute of International and Development Studies in Geneva, Switzerland.

Even in countries where the United States has long run programmes to tackle HIV, malaria and other health issues, the WHO still coordinates efforts. A rift between the WHO and researchers at US agencies could weaken long-standing collaborations. Furthermore, around 180 epidemiologists, health-policy specialists and other staff members at the WHO are from the United States, and dozens of Americans work at the organization as visiting scholars and interns.

The WHO will survive a US funding freeze over the short term, say researchers, because other donors will help. For example, Chinese President Xi Jinping has pledged \$2 billion to the coronavirus response.

Over time, the United States could lose its influence abroad. Ironically, that is exactly what the Trump administration is complaining about. “If the US pulls out and leaves a vacuum, it will be filled by other countries, like China,” says Lee. “You’ll see a self-fulfilling prophecy.”