

What the US exit from the WHO means for global health and pandemic preparedness

President Trump signed an executive order to withdraw the country from the global health organization to which it is the biggest donor.



by Cynthia McCormick Hibbert
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A health organization created in the wake of World War II to fight disease across the planet is losing its [biggest donor](#), the United States.

Critical of the World Health Organization's handling of the COVID pandemic, President Donald Trump signed an order Monday for the U.S. to withdraw from the organization that helps track outbreaks of disease around the globe and provides research and resources for fighting everything from tuberculosis to maternal mortality.

Northeastern University experts in global and public health describe what the WHO is, who pays for it and the impact a U.S. withdrawal will have on the health of Americans and others.

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Not a household name

Headquartered in Geneva, the World Health Organization may not be a household name like the Centers for Disease Control and Prevention (CDC) but it's been around for nearly 80 years.

"The World Health Organization is an international agency that was set up back in 1948 by U.N. member states to set global health policies and priorities," says [Aleksandra Jakubowski](#), an assistant professor in health sciences and economics at Northeastern.

"It helps us figure out where to allocate our resources, both in terms of research and funding allocations," she says. It also uses a global network of disease surveillance to determine "where we really need to focus more of our attention to help the communities that are most affected."

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The U.S. is WHO's biggest donor

There are two types of contributions to the WHO – mandatory contributions by member nations and voluntary donations by countries and organizations such as the Gates Foundation, says [Richard Wamai](#), a Northeastern professor of public health.

Mandatory contributions “are determined based on the population size of a country as well as countries’ GDP (gross domestic product),” Jakubowski says.

“The U.S. has a very large population, and we are the wealthiest nation. So that’s why we pay a lot in member fees,” she says.

According to Reuters, the U.S. was responsible for 22% of mandatory contributions to the WHO during the two-year period from 2024 to 2025, with China coming in second at about 16%.

When it comes to overall funding – voluntary and mandatory – the overall U.S. contribution comes to 18%. The WHO’s most recent two-year budget is \$6.8 billion, according to Reuters.

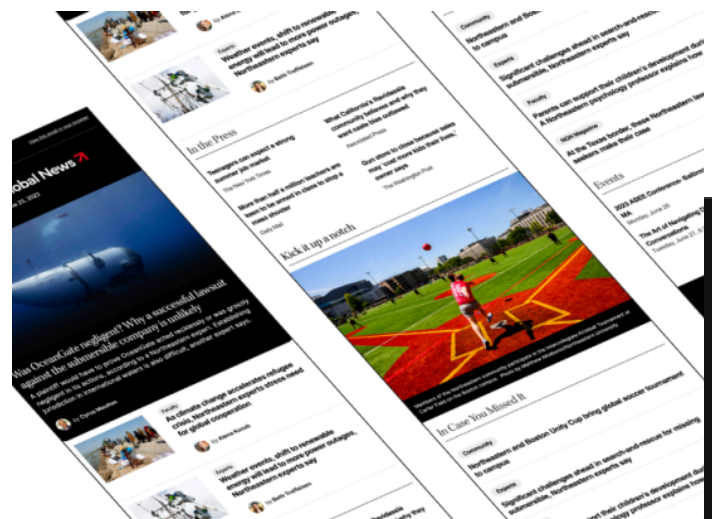
The U.S. withdrawal “would be a lot of funding (for WHO) to make up for,” Jakubowski says.

Without a change of heart or massive infusion of private dollars, “The alternative is that the WHO budget just gets a lot slimmer,” she says.

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The impact on infectious disease surveillance

“And that means we are much less able to track diseases,” Jakubowski says. “We’re going to lose our ability to tap into this really large surveillance system, which is going to diminish our ability to respond to pandemics, for example.”

“It’s almost impossible to envision a scenario where the U.S. is isolated from the consequences of leaving the World Health Organization,” says [Neil Maniar](#), director of Northeastern’s master of public health program.

“We live in a globalized, very connected society. So what happens in one part of the world impacts other parts of the world, including the United States,” he says.

“One of the strengths of our global public health system is the fact that it is a largely coordinated global public health system and this is because of organizations like the World Health Organization,” Maniar says.

“When you start to pull players, major players like the United States, out of that system, it has a ripple effect and significant impacts on countries around the world, including our own,” he says.

“The CDC will continue to do its work. Other countries will continue to do their work. One of my main concerns is that the lines of communication are going to be broken or at least significantly impacted,” Maniar says.

“Data sharing, sharing of best practices, being able to respond quickly and effectively – I think those are areas that could potentially be impacted by

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order to quite literally save lives.”

“It helps us when it comes to negotiating treaties or international deals because other countries really respect us and value us,” Jakubowski says.

“Withdrawing from the WHO could potentially hurt the U.S. in its foreign policy with countries in sub-Saharan Africa because we could be giving up some of our influence in a region where experts already worry about the growing influence of China,” she says.

Many countries depend upon WHO to provide health stewardship and set norms and standards when it comes to best practices and therapeutic regimens, Wamai says.

An expert in the neglected tropical disease visceral leishmaniasis, Wamai says the WHO recently approved a medication that helps reduce treatment days, which cleared the way for health providers in many countries to provide the oral treatment, miltefosine.

“You can imagine many countries would need this drug,” Wamai says.

“WHO-level approval means they don’t need to do their own (drug) trials.”

Twelve months to go

On paper, the U.S. has one year to live up to its obligation before the Trump administration can officially cease contributions to WHO.

“Leaving the World Health Organization is something that President Trump wanted to do during his first administration and didn’t have a chance to because you need that one-year notification period,” Maniar says.

“So it’s not surprising that this is one of the first moves that he made” he

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Before the withdrawal could be completed, President Joe Biden halted the process on his first day in office.

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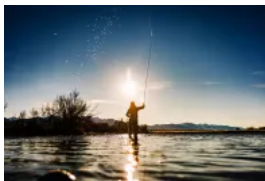
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