



# Philanthropic Partner Engagement in the WHO Investment Round

Developing strong partnerships with the philanthropic actors allows WHO to leverage the strengths of a range of partners to bring better health to people and maximize impact. These partners play a significant role in global health when it comes to accelerating progress towards the achievement of the Sustainable Development Goals, advocating for the implementation of WHO policies, norms and standards, promoting equitable and universal access to quality health services, research and development of safe and affordable technologies, digital transformation to improve national health data, climate change and a number of other critically important areas.

Investments made by the philanthropic sector often complement and amplify the work of governments, international organizations and other stakeholders. Philanthropy can be especially effective in filling critical gaps and supporting innovative or high-risk initiatives that are not funded through more traditional sources, as well as bringing a results focus.

Global health faces severe inequities and inequalities in health, which were amplified by the COVID-19 pandemic. More than half the world's population is not fully covered by one or more essential health services, and 2 billion people face financial hardship due to out-of-pocket health spending. WHO works with partners to mobilize equitable access to life-saving technologies, fortify health systems worldwide, and coordinate global early-warning systems to detect outbreaks. Only WHO possesses the reach through 194 country offices and legitimacy to set and implement evidence-based global standards for health. A well-financed WHO is essential to its central, technical, and coordinating role, which is in turn essential to the successful work of global health partners. To address these challenges, WHO Member States called for an Investment Round (IR) to mobilise resources and rally stakeholders around the global health agenda set out in The Global Programme of Work (GPW14).

## What is the Investment Round?

The WHO Investment Round was launched at the 77<sup>th</sup> World Health Assembly, underpinned by the GPW14 and Investment Case which presented the qualitative and quantitative evidence-based rationale for investing in WHO and detailed the return on investment and impact of WHO's work.

The total Base budget for the next 4-years is US\$ 11.1 billion. Projected Assessed Contributions will cover US\$ 4 billion of this total, leaving a funding gap of **US\$ 7.1 billion**, to be filled through Voluntary Contributions.

WHO is not seeking an increase in resources over previous years but rather to enhance the quality of financing.



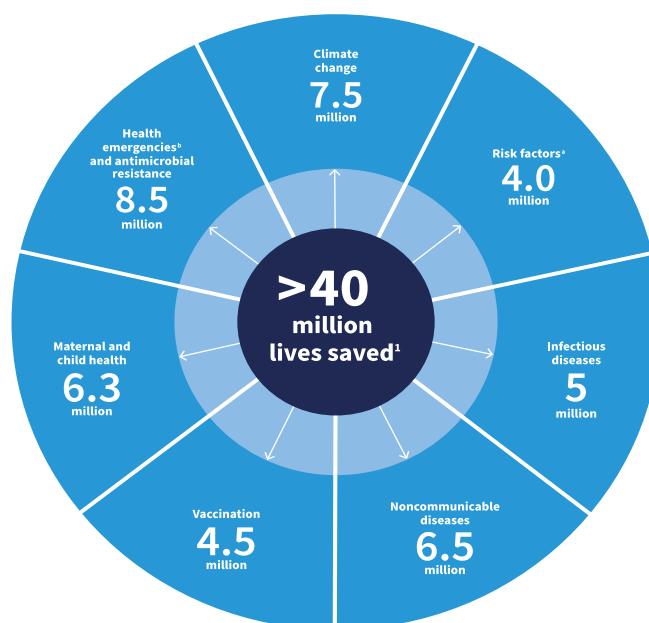
More specifically, the Investment Round seeks to:

- Secure more predictable, flexible funding for the WHO GPW14 Strategy 2025-2028 as the foundation for a stable workforce, to reduce underfunded areas, enable WHO to sustain and further develop systems and capacities needed to fulfil its core functions.
- Enhance the quality of voluntary contributions through longer term, consolidated funding arrangements.
- Incentivize investments from a broader range of partners, including the philanthropic and private sectors, in line with WHO due diligence and risk assessment policies, to reduce dependency on a small number of large donors.

The Investment Round will culminate at the G20 Leaders' Summit chaired by President Lula. It is being driven by a growing group of co-hosts including France, Germany, Norway, Brazil, Mauritania (for the African Union), South Africa, and the Kingdom of Saudi Arabia to raise awareness of and commitment to the global health agenda and the need for a fully funded WHO.

## What will WHO deliver 2025-28?

**Over the next four years, WHO will save at least 40 million lives** through concrete actions including: increasing the number of vaccines delivered to priority countries; providing access to health services to more than 150 million people in humanitarian settings in 30 countries; bringing solar electrification to 10,000 health facilities; supporting 55 countries in educating and employing 3.2 million health workers; helping 84 countries reach targets for eliminating malaria, mother-to-child HIV transmission and other diseases; strengthening access to timely and reliable health data; and prequalifying 400 health products per year.



But to achieve these results, WHO requires sustainable financing.

## How can philanthropic partners get involved?

A wide range of global health actors, including philanthropic partners, actively contributed to the development of GPW14, leveraging the unique opportunity to work with WHO to reshape the



future of global health. Beyond technical expertise and a results focus, philanthropic partners can play a vital role in unlocking access to significant resources needed to accelerate progress towards both the 2030 SDG and GPW14 strategic objectives.

WHO is working with various champions around the world to raise awareness of and commitment to the global health agenda set out in the GPW14. Where a partner is playing a global leadership role in a specific programmatic area, the Investment Round offers opportunities to co-host donor round tables to rally peers and/or make testimonials in support of WHO's work.

Examples of actions which could be taken by philanthropic partners and others include:

Financial	Political	Amplification
Make a financial pledge as part of the IR	Leadership tweets, statements, video messages of support for WHO	Leverage philanthropic networks to rally support & encourage investments
Increase flexibility & lengthen duration of grant agreements	High level attendance at key IR events	Host events at milestone global meetings to raise the profile of the IR campaign

## How to Make a Pledge?

All voluntary contributions towards the **WHO Base Budget** during the GPW14 2025-2028 period can be counted as pledges towards the Investment Round, regardless of the life cycle of the agreement within this period<sup>1</sup>. Where possible, partners are encouraged to pledge for the full four-year period.

Accordingly, funding support for Special Programmes, the Global Polio Eradication Initiative, Emergency Operations and Appeals are outside of the Base Budget, therefore not considered as part of the IR funding envelope.

WHO acknowledges philanthropic entities are required to deliver on mandates to support specific programmatic and geographic priorities. In an effort to increase efficiencies and decrease transaction costs, WHO encourages partners to shift away from small, highly specified projects towards more consolidated, outcome-based funding arrangements allowing for greater flexibility.

IR pledges are Voluntary contributions and include the following:

1. **Core Voluntary Contributions (CVCA):** These are voluntary contributions provided to WHO that are fully flexible at the level of the programme budget.
2. **Thematic Funding:** For the IR and the full period 2025-28, the definition of thematic funding has been expanded to accommodate a higher degree of specificity and is expected to facilitate contributors' transition from earmarked voluntary contributions towards voluntary contributions with a higher degree of flexibility. The following levels of specification will be treated as thematic funding:

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<sup>1</sup> in line with the Framework of Engagement with non-State actors [FENSA](#).



- contributions given at the global level with a programmatic specification up to and including output level of GPW14;
  - contributions with a geographical specification up to major office level and a programmatic specification up to outcome level of GPW14;
  - contributions with a geographical specification up to country office level and a programmatic specification up to strategic objective level; and
3. Voluntary Contributions (specified): are earmarked within the results and/or organizational structure.

While WHO welcomes all contributions, the higher the level of flexibility and the longer the duration the better for the IR to meet its objectives.

Global and regional events will be leveraged in the lead up to the November G20 Investment Round event hosted by Brazil to create momentum, offering opportunities for partners to make announcements and/or early pledges of support. Examples include\*:

Event	Date	Location
AFRO Regional Committee IR side event	27 August	Brazzaville
UNGA events to rally member states, MDBs, philanthropy, private sector	Week of 22 September	New York
AMRO side event	Week of 30 September	Washington DC
SEARO Regional Committee IR side event	7 October	Dhaka
World Health Summit	13 October	Berlin
EMRO Regional Committee IR side event	14 October	Doha
WPRO Regional Committee IR side event	22 October	Manila
Global pledging event	Date TBC (1 November-17 November)	Hybrid TBC

\*Please check <https://www.who.int/investment-round> and the section *How to Make a Pledge* regularly for updates.

Philanthropic partners considering a pledge should reach out to their WHO Focal Point to discuss options for announcement and associated visibility opportunities. WHO welcomes IR public announcements to be made by the Chief Executive Officer or another authorised senior representative. Pledges can be made based on signed agreements and/or planned commitments to be formalised through a grant agreement to follow thereafter.

For more information on WHO and its financing, please see: [How WHO is funded](#) and the [WHO Investment Case](#).