US exit from WHO: it is about much more than WHO

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The announcement by US President Donald Trump that the USA will withdraw from WHO[1] will leave both a large financial gap and a political power vacuum in global health. The disruption endangers human lives worldwide because it is not only about leaving a bureaucratic apparatus—as WHO opponents like to portray the UN agency[2]—but it is also about an organisation that implements concrete health programmes with many partners at country level worldwide, develops important standards and normative guidelines, champions health equity, and ensures greater health security globally. But the rational arguments of health advocates to retain US membership of WHO take us only so far. It is a much larger picture that needs to be considered, which takes us beyond the present global health debate.

The decision by the Trump administration to withdraw from both WHO and the Paris Agreement,[3] the international treaty on climate change,[4] is a clear rejection of multilateralism and its mutual obligations, especially at a time when health and climate commitments are seen as ever more complementary.[5] The US Government will no longer take part in negotiations for an international pandemic agreement, and it no longer feels obliged to comply with WHO recommendations or regulations. Global goals set by countries after joint deliberations—be it the health Sustainable Development Goals[6] or the Paris Agreement's resolve to limit global warming to 1·5°C above pre-industrial levels[4]—no longer matter for this Trump administration. National health and global health agencies in the USA, such as the Centers for Disease Control and Prevention (CDC), are now stifled in their national and international work and can no longer fully contribute to the international exchange of information.

The Executive Order[1] by the US President illustrates the political interest in a rules-free space for security policy and economic growth without interference from international norms, legal obligations, and WHO standards. This is not about money; it indicates the Trump administration's lack of interest in working in multilateral settings where US dominance is increasingly challenged by emerging powers, such as China or India, and by strong voices from the Global South, Africa in particular.[7] There is no intention to leave UNICEF or the World Food Programme not only because they are run by Americans, but also because they have no normative roles.[8] Other global health organisations, such as Gavi, the Vaccine Alliance or the Global Fund to Fight AIDS, Tuberculosis and Malaria, will need to show how they serve US interests and ensure US influence in order to receive US funding for their present replenishment rounds.

The broader intent of the new US administration must be looked at much more closely than it has been, especially in relation to an expanding global health-care market that is crucial for the USA both nationally and internationally.[9] It is as much about trade, friend-shoring, and preferential access to and control of supply chains and products, as it is about freedom for platforms run by US technology companies to spread misinformation and disinformation across borders.[10] The proposed policies of the US administration create the space for expansion of the rapidly growing US digital and artificial intelligence (AI) health industry, which is characterised by an insatiable appetite for data. The new frontier (and arms race) is symbolised by the expected US$500 billion investment by the private sector in a new US commercial company, Stargate, that will expand AI infrastructure to create data centres around the USA to "secure American leadership… and generate significant economic benefits globally".[11] Health data are some of the most valuable data and the Stargate initiative points towards a new realm of profits far beyond those of the pharmaceutical industry.[12]

The Executive Order to withdraw from WHO states that the new US administration wants to "identify credible and transparent United States and international

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partners to assume necessary activities previously undertaken by the WHO".[1] This statement suggests the Trump administration considers there are some useful and necessary health functions performed by WHO and its partners. It is not yet possible to predict which organisations will be approached and respond to this invitation. Globally, there is a general regionalisation and localisation of health cooperation based on geography as well as built on political alliances, such as BRICS or the European Union.[13] The emerging pattern of health cooperation is likely to be increasingly shaped by political alliances and intentions rather than by the shared pursuit of health equity and health security for all. This pattern would mean reverting to an approach that was abandoned in 1851 with the organisation of the first international sanitary convention.[14]

This concerning wider political context is what the member states of WHO need to consider. Do they want a world without reliable health cooperation at a time when pandemics loom and when health is being redefined through digital and AI technologies and then bear the consequences of a health world without a commitment to equity, standards, and information sharing? Or do they want to support, protect, and reform WHO? Germany, one of the most reliable WHO partners, has started to seek allies to do so.[15] One would hope that South Africa rallies the G20 and the African continent and that the previous Global South G20 presidencies use their political clout to help build a more equitable global health order. It is the small and middle-sized (and mainly low-income) countries that need the support of WHO to be able to work together without constant geopolitical pressure in relation to, for example, health technologies and access and benefit sharing. The Africa Centres for Disease Control and Prevention has drawn attention to the $50 billion medicines market to be built on the continent.[16] The AI market will likely be in a much higher dimension. There should be global rules and agreements that accompany such enormous changes in view of the risks at hand in relation to cybersecurity, misinformation and disinformation, data privacy breaches, and a wide range of ethical concerns.[17]

One could hope for a NATO effect in global health—that all countries realise they need to properly finance and therefore own WHO and not rely on big spenders, be they a country or a philanthropist. Most countries have been truly miserly in response to the WHO investment round,[18] as if the investment was in someone else's not their own interest and health security. At the same time, many countries make more expansive requests to WHO for action that bears little relationship to priorities and available funds, with the agenda of the WHO Executive Board in February, 2025, showing this clearly.[19] Instead, WHO member states should be moving ahead to push the organisation to be bold, "act big", and be innovative in the setting of norms and standards, for example, in relation to health data and use of AI in health. Nuclear energy development was structured around the Nuclear Non-Proliferation Treaty[20] and something similar is probably needed for AI; health AI is a good place to start.

Who would have thought that a WHO Director-General might need to learn from NATO leaders. NATO Secretary-General Mark Rutte admitted at the World Economic Forum in Davos, Switzerland, in January, 2025, that "U.S. President Donald Trump is being absolutely fair to demand that European allies spend more on defense".[21] WHO member states that do not want a lawless health world should step up and finance and build an organisation that is fit for the challenges ahead. As Lakshmy Ramakrishnan has argued, it could also serve as an "impetus for India and the rest of the Global South to rethink the global health landscape, which undoubtedly needs reform and address its needs".[7] At present it is 193 WHO member states to one country that has decided to withdraw.

I am the Founder and Chair of the Global Health Center, Geneva Graduate Institute and regularly advise WHO and attend WHO meetings. I am a member of the Global Preparedness Monitoring Board that is jointly hosted by WHO and the World Bank.

Ilona Kickbusch
Ilona.Kickbusch@graduateinstitute.ch

Global Health Center, Geneva Graduate Institute, 1202 Geneva, Switzerland

1 White House. Withdrawing the United States from The World Health Organization Executive Order. Jan 20, 2025. https://www.whitehouse.gov/presidential-actions/2025/01/withdrawing-the-united-states-from-the-worldhealth-organization/ (accessed Jan 23, 2025).
2 Wibulpolprasert S, Chowdhury M. World Health Organization: overhaul or dismantle? *Am J Public Health* 2016; **106:** 1910–11.
3 White House. Putting America First in International Environmental Agreements Executive Order. Jan 20, 2025. https://www.whitehouse.gov/presidential-actions/2025/01/putting-america-first-in-international-environmental-agreements/ (accessed Jan 23, 2025).
4 UN Climate Change. The Paris Agreement. 2016. https://unfccc.int/process-and-meetings/the-paris-agreement (accessed Jan 23, 2025).
5 The One UN Climate Change Learning Partnership. Resource guide for advanced learning on understanding the climate change and health interface. United Nations Institute for Training and Research. 2013. https://unitar.org/sites/default/files/media/publication/doc/resource_guide_on_understanding_the_cc_and_health_interface.pdf (accessed Jan 23, 2025).
6 UN. Sustainable Development Goals. Goal 3: Ensure healthy lives and promote well-being for all at all ages. https://www.un.org/sustainabledevelopment/health/ (accessed Jan 23, 2025).

7 Ramakrishnan L. Global health in flux: what a potential US exit from the WHO means for the world. Global Research Foundation. Jan 20, 2025. https://www.orfonline.org/expert-speak/global-health-in-flux-what-a-potential-us-exit-from-the-who-means-for-the-world (accessed Jan 24, 2025).

8 Loy I. What to make of Trump 2.0's first days? The New Humanitarian. Jan 23, 2025. https://www.thenewhumanitarian.org/newsletter/2025/01/23/inklings-what-make-trump-second-term-first-days (accessed Jan 23, 2025).

9 Benchmark International. Insights: 2024 global healthcare & medical industry report. Benchmark International. April 18, 2024. https://www.benchmarkintl.com/insights/2024-global-healthcare-medical-industry-report/ (accessed Jan 23, 2025).

10 Wheeler K. How social media bans are impacting the global tech industry. Technology Magazine. Nov 7, 2024. https://technologymagazine.com/articles/how-social-media-bans-are-impacting-the-global-tech-industry (accessed Jan 23, 2025).

11 Duffy C. Trump announces a $500 billion AI infrastructure investment in the US. CNN Business. Jan 21, 2024. https://edition.cnn.com/2025/01/21/tech/openai-oracle-softbank-trump-ai-investment/index.html (accessed Jan 23, 2025).

12 Boehncke K, Duparc G, Sparey J, Valente A. Tapping into new potential: realising the value of data in the healthcare sector. L.E.K. Consulting. Dec 4, 2023. https://www.lek.com/insights/hea/eu/ei/tapping-new-potential-realising-value-data-healthcare-sector (accessed Jan 23, 2025).

13 BRICS 2024. MOSCOW Declaration of the XIV BRICS Health Ministers' Meeting 11 October 2024. 2024. https://cdn.brics-russia2024.ru/upload/docs/%D0%98%D0%A2%D0%9E%D0%93%D0%9E%D0%92%D0%90%D0%AF_%D0%B4%D0%B5%D0%BA%D0%BB%D0%B0%D1%80%D0%B0%D1%86%D0%B8%D1%8F_%D0%9C%D0%B8%D0%BD%D0%B8%D1%81%D1%82%D1%80%D0%BE%D0%B2.pdf?1728922452455691 (accessed Jan 24, 2025).

14 Gostin LO, Katz R. The International Health Regulations: the governing framework for global health security. *Milbank Q* 2016; **94:** 264–313.

15 CBC News. Germany, experts urge Trump to reconsider withdrawing U.S. from World Health Organization. CBC News. Jan 21, 2025. https://www.cbc.ca/news/health/who-trump-1.7437232 (accessed Jan 23, 2025).

16 Africa Centres for Disease Control and Prevention. Africa CDC spearheads bold move to secure Africa's health future by creating a 50 billion dollar medical market. Feb 19, 2024. https://africacdc.org/news-item/africa-cdc-spearheads-bold-move-to-secure-africas-health-future-by-creating-a-50-billion-dollar-medical-market/ (accessed Jan 23, 2025).

17 UNESCO. Ethics of artificial intelligence: the recommendation. 2025. https://www.unesco.org/en/artificial-intelligence/recommendation-ethics (accessed Jan 24, 2025).

18 WHO. WHO's investment round. Jan 21, 2025. https://www.who.int/about/funding/invest-in-who/investment-round (accessed Jan 23, 2025).

19 WHO. 156th session of the Executive Board. 2025. https://www.who.int/about/governance/executive-board/156th-session (accessed Jan 23, 2025).

20 UN. 2015 Review Conference of the Parties to the Treaty on the Non-Proliferation of Nuclear Weapons. 2015. https://www.un.org/en/conf/npt/2015/pdf/background%20info.pdf (accessed Jan 24, 2025).

21 Gus C. NATO's Rutte: Trump "is right" that Europe's defense spending is a "problem". Politico. Jan 23, 2025. https://www.politico.eu/article/nato-mark-rutte-donald-trump-is-right-problem-europe/ (accessed Jan 23, 2025).