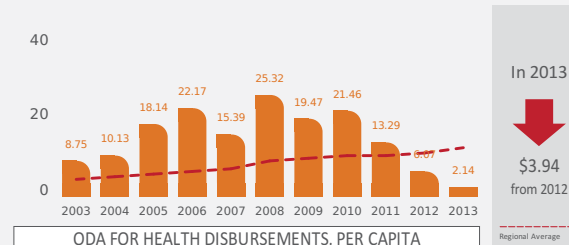
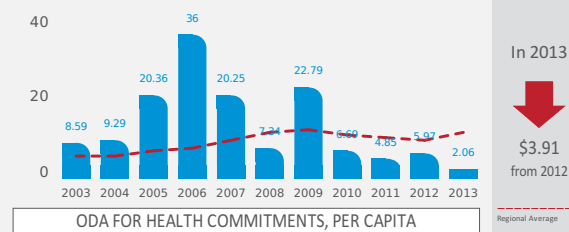
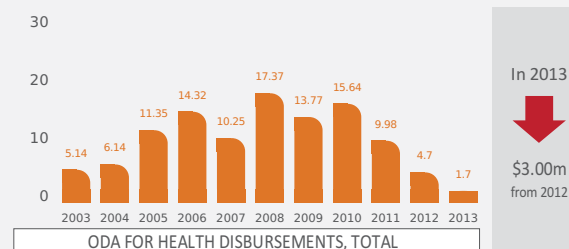
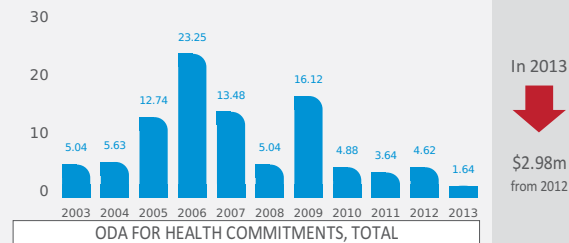


ODA Health Disbursements from 2003 to 2013 increased by 67%. In 2013 Health Policy & Admin accounted for 59% of all disbursements. It was 17% in year 2003.

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Population as of 30 June (Millions)	0.59	0.61	0.63	0.65	0.67	0.69	0.71	0.73	0.75	0.77	0.80
Commitments TOTAL ODA (Million constant 2013 US\$)	28.43	37.94	43.06	44.52	38.30	16.85	28.31	86.02	19.25	16.10	10.63
Disbursements TOTAL ODA (Million constant 2013 US\$)	30.95	37.51	46.07	36.34	33.00	33.69	33.83	91.74	27.39	19.65	8.90
ODA for Health Commitments (Million constant 2013 US\$)	5.04	5.63	12.74	23.25	13.48	5.04	16.12	4.88	3.64	4.62	1.64
ODA for Health Disbursements (Million constant 2013 US\$)	5.14	6.14	11.35	14.32	10.25	17.37	13.77	15.64	9.98	4.70	1.70
RATIO Health/Total ODA Commitments	0.18	0.15	0.30	0.52	0.35	0.30	0.57	0.06	0.19	0.29	0.15
RATIO Health/Total ODA Disbursements	0.17	0.16	0.25	0.39	0.31	0.52	0.41	0.17	0.36	0.24	0.19
Health Commitments per Capita (constant 2013 US\$)	8.59	9.29	20.36	36.00	20.25	7.34	22.79	6.69	4.85	5.97	2.06
Health Disbursements per Capita (constant 2013 US\$)	8.75	10.13	18.14	22.17	15.39	25.32	19.47	21.46	13.29	6.07	2.14
Regional Avg Health Commitments per Capita (const. 2013 US\$)	5.39	5.37	6.45	7.45	9.45	11.35	12.19	10.82	10.24	9.84	11.65
Regional Avg Health Disbursements per Capita (const. 2013 US\$)	3.78	4.81	5.45	6.08	7.01	8.68	9.61	10.07	10.09	10.87	12.18
Total Expenditure on Health (curr US\$ p.c.)	97.45	180.47	208.82	276.83	358.29	542.21	734.23	637.84	722.49	768.92	713.86
General Government Expenditure on Health (curr US\$ p.c.)	66.76	101.80	124.42	190.82	261.50	421.09	615.51	507.84	569.79	617.82	555.11
Private Expenditure on Health (curr US\$ p.c.)	30.69	78.67	84.40	86.00	96.80	121.12	118.72	130.00	152.70	151.09	158.75



### Purpose of Allocation of ODA for Health

COMMITMENTS	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Health Policy & Admin Management	0.75	1.05	2.13	1.21	2.91	1.33	1.10	0.66	1.09	1.93	1.01
MDG6 (Control of HIV/AIDs, TB, Malaria and other diseases)	1.81	2.59	7.30	18.90	8.87	2.12	13.30	1.51	1.97	1.21	0.12
Other Health Purposes	1.93	1.75	3.13	2.85	1.20	0.68	1.15	2.25	0.25	1.15	0.45
Reproductive Health & Family Planning	0.54	0.24	0.19	0.28	0.50	0.91	0.57	0.45	0.33	0.33	0.06
<b>Grand Total</b>	<b>5.04</b>	<b>5.63</b>	<b>12.74</b>	<b>23.25</b>	<b>13.48</b>	<b>5.04</b>	<b>16.12</b>	<b>4.88</b>	<b>3.64</b>	<b>4.62</b>	<b>1.64</b>

DISBURSEMENTS	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Health Policy & Admin Management	0.85	1.56	3.42	2.10	3.13	1.33	4.58	4.55	1.09	1.93	1.01
MDG6 (Control of HIV/AIDs, TB, Malaria and other diseases)	1.81	2.59	4.62	9.09	5.42	11.09	6.93	8.61	4.27	1.16	0.12
Other Health Purposes	1.93	1.75	3.13	2.85	1.20	4.05	1.15	2.03	4.29	1.28	0.51
Reproductive Health & Family Planning	0.54	0.24	0.19	0.28	0.50	0.91	1.10	0.45	0.33	0.33	0.06
<b>Grand Total</b>	<b>5.14</b>	<b>6.14</b>	<b>11.35</b>	<b>14.32</b>	<b>10.25</b>	<b>17.37</b>	<b>13.77</b>	<b>15.64</b>	<b>9.98</b>	<b>4.70</b>	<b>1.70</b>

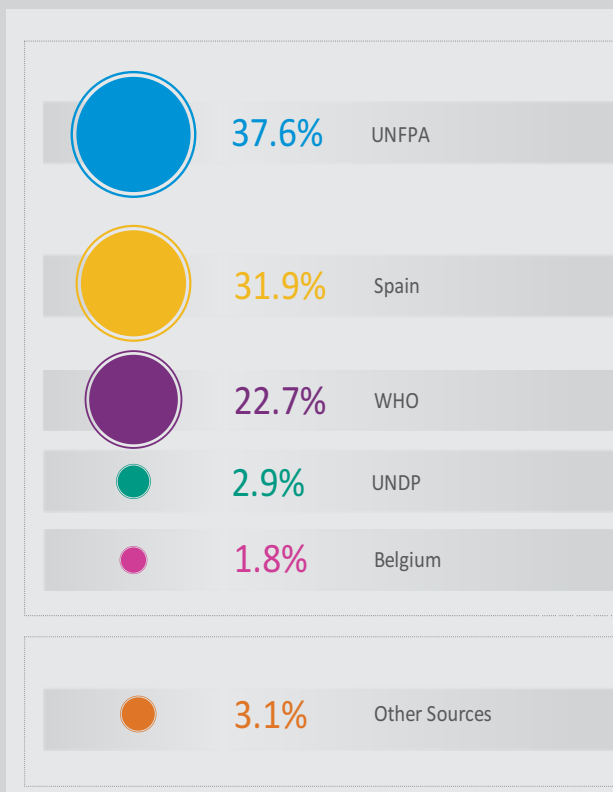
In the period 2012-2013 the total amount of US\$ Million **6.40** was disbursed from donors for implementation in **70** different transfers

### HOW MUCH DONORS DISBURSED IN 2012-2013

Bilateral	Number of Disbursements	Total	Multilateral/Foundation	Number of Disbursements	Total
Belgium	1	0.12	UNDP	1	0.18
Portugal	1	0.03	UNFPA	19	2.41
Republic of Korea	3	0.05	UNICEF	8	0.11
Spain	8	2.04	WHO	28	1.45
United States of America	1	0.01			
<b>TOTAL</b>	<b>14</b>	<b>2.25</b>	<b>TOTAL</b>	<b>56</b>	<b>4.15</b>

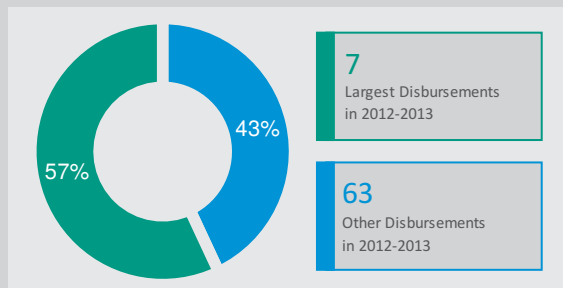
**ACRONYMS:** AFRO-WHO African Region; AMRO-WHO Region of the Americas; EMRO – WHO Eastern Mediterranean Region; EURO-WHO European Region; MDG-Millennium Development Goals; SEARO-WHO South-East Asia Region; UN – United Nations; WPRO-WHO Western Pacific Region; AfDB-African Development Bank; AfDF-African Development Fund; Arab Fund (AFESD)-Arab Fund for Economic and Social Development; AsDB Special Funds-Asian Development Bank; BADEA-Banque Arabe de Développement Economique en Afrique; CEB-Council of Europe Development Bank; EU Institutions-European Commission, European Community; GAVI-Global Alliance for Vaccines and Immunization; IDA-International Development Association (World Bank); IDB Sp.Fund-Inter-American Development Bank, Special Fund; OFID-OPEC Fund for International Development; The Global Fund-The Global Fund to Fight AIDS, Tuberculosis and Malaria; UNAIDS-Joint United Nations Programme on HIV/AIDS; UNDP – United Nations Development Programme; UNFPA-United Nations Population Fund; UNICEF-United Nations Children's Fund; UNPBF-United Nations Peacebuilding Fund; UNRWA-United Nation Food and Relief Agency; WFP-World Food Programme; WHO-World Health Organization; BMGF-Bill & Melinda Gates Foundation

### 5 LARGEST SOURCES OF DISBURSEMENTS FOR HEALTH IN 2012-2013



### 7 largest SINGLE disbursements in 2012-2013

\$0.94m	2012	SPAIN	Basic health care
\$0.85m	2012	SPAIN	Infectious disease control
\$0.48m	2012	UNFPA	Population policy and admin. mgmt
\$0.41m	2012	UNFPA	Population policy and admin. mgmt
\$0.34m	2013	UNFPA	Population policy and admin. mgmt
\$0.33m	2012	WHO	Health policy & admin. management
\$0.32m	2013	WHO	Health policy & admin. management



**SOURCE:** This information was extracted on 23/09/2015 from the Creditor Reporting System (CRS) database maintained by the Organization for Economic Co-operation and Development (OECD), Statistics Department (<https://stats.oecd.org/Index.aspx?DataSetCode=CRS1>).

**DEFINITIONS:** CRS financial data presented here are commitments and disbursements. A commitment is a firm written obligation by a government or official agency, backed by the appropriation or availability of the necessary funds, to provide resources of a specified amount under specified financial terms and conditions and for specified development purposes. A disbursement is the release of funds to, or the purchase of goods or services for, a recipient; by extension, the amount thus spent. Disbursements record the actual international transfer of financial resources, or of goods or services valued at the cost to the donor. It can take several years to disburse a commitment. Yearly commitments and disbursements are presented in constant 2013 US\$ to ensure comparability over years. ODA for health volumes are also presented in US\$ per capita per year and according to allocation (i.e. policy purpose). Policy purposes used here are based on the original CRS statistical purpose codes, but have been aggregated to reflect, as far as possible, global health development benchmarks (i.e. MDGs; Reproductive Health & Family Planning).