Japan has continued to show global health leadership in its G20 presidency in 2019

Japan was the fifth-largest donor to global health among members of the Organisation for Economic Co-operation and Development’s (OECD) Development Assistance Committee (DAC) in 2016 (the latest year for which complete data is available). In absolute terms Japan spent US$870 million on health ODA (in 2016 prices). Health ODA accounted for 5% of Japan’s total ODA in 2016, well below the DAC average (8%), which placed it 18th in relative terms.

Japan channeled 48% of its health ODA multilaterally in 2016, staying below the DAC average (56%). The Global Fund was by far the largest recipient (41% of multilateral health ODA, or 20% of total health ODA). The remainder (52%) was channeled bilaterally.

In 2017, bilateral health ODA amounted to just 3% of Japan’s total bilateral ODA, a decrease from 4% in 2016. Japan’s bilateral investments focus on health systems strengthening (HSS), in line with its focus on UHC. HSS funding accounted for 38% of Japan’s bilateral health ODA in 2017, incorporating health policy and administrative management (30%) and basic health infrastructure (9%). Other important areas of Japan’s bilateral health ODA are medical services (20%), infectious disease control (18%), and reproductive health care (7%).

In 2015, Japan launched a new global health policy, the ‘Basic Design for Peace and Health (Global Health Cooperation)’, which focuses on universal health coverage (UHC) and on preparing health systems for public-health emergencies such as Ebola. Japan seeks to use its expertise (health staff, technology, pharmaceuticals, and medical equipment) to meet these objectives. However, unlike previous health strategies, the new policy does not include a timeframe or concrete funding commitment for health.

In line with its global health policy, Japan agreed on a new action plan during a ministerial meeting to fight infectious diseases in 2016. The plan focuses on four issues: 1) Strengthening international systems to fight against infectious diseases through the Global Fund to fight AIDS, Tuberculosis and Malaria (Global Fund), Gavi, the Vaccine Alliance (Gavi), and the Global Health Innovative Technology Fund (GHIT Fund); 2) Developing domestic human resources in the infectious diseases field; 3) Strengthening domestic research institutes; and 4) Strengthening key domestic institutions dealing with infectious diseases.

In support of the action plan, Japan pledged US$800 million to the Global Fund for the period 2017 to 2019 and had disbursed US$453 million of this at the end of December 2018. At the Global Fund’s Sixth replenishment, Japan pledged an additional US$840 million for 2020-2022. Japan also pledged US$95 million to Gavi for the period 2016 to 2020, its first ever multi-year pledge. Japan also pledged US$95 million to Gavi for the period 2016 to 2020, its first ever multi-year pledge.

Prime Minister Abe pledged US$2.9 billion in funding for global health at the Universal Health Coverage (UHC) Conference in December 2017 as part of the Tokyo Declaration All Together to Accelerate Progress towards UHC. At the United Nations General Assembly (UNGA) UHC high level meeting in September 2019, he announced that Japan was commitment to expanding UHC in partner countries and to investing more in managing infectious diseases through Gavi and Global Fund.

In addition to the PM’s initiatives, the Japanese Finance Minister has emphasized Japan’s commitment to UHC through the World Bank Groups channel. Japan is supporting 33 projects on UHC promotion and pandemic preparation with a financial value of US$21 Million. Japan is leading discussions on how to mobilize funds from the Global Financing Facility (GFF) for maternal and child health. Japan’s initial contribution of US$574 Million, has successfully mobilized a total of US$ 4.4 Billion health financing from the World Bank Group.

Japan is making an additional contribution of US$ 20 Million to the GFF, on top of its cumulative contribution of US$ 30 Million.

Japan’s priority regions for bilateral cooperation on health

- South-East Asia
- South Asia
- Africa
- South Central America
In 2020, in the sidelines to the Tokyo Olympics, Japan will host a nutrition summit in 2020 as a follow up to the ‘Nutrition for Growth’ event in London in 2013. The goal of the summit is to encourage world leaders to commit funding in support of strengthened nutrition as an essential building block of UHC.

Japan hosted the UHC Forum in December 2017, in collaboration with the World Health Organization, the World Bank, and UNICEF, the United Nations Children’s agency. The forum brought together government representatives and global health organizations with the goal of stimulating progress towards achieving UHC. At the meeting, Japan pledged US$2.9 billion in development assistance to promote UHC world-wide, though it did not specify a precise time period nor recipients for the disbursement.

Health was one of three priority initiatives of Japan’s G7 presidency in 2016, alongside women’s empowerment and stabilization of the Middle East. Health-related discussions at the 2016 G7 summit focused on three areas: public health emergency response, promotion of UHC, and measures against anti-microbial resistance.

**MOFA’s ‘Global Health Policy Division’ oversees strategy; JICA leads on implementation**

Within the International Cooperation Bureau of Japan’s Ministry of Foreign Affairs (MOFA), the ‘Global Health’ division within the ‘General Directorate for Global Issues’ is in charge of health-related issues. Within the Japan Agency for International Cooperation’s (JICA) the ‘Human Development’ department is responsible for implementation, alongside the different geographic departments.
RECIPIENTS OF JAPAN’S HEALTH ODA, 2016
Total: US$871 million

- Bilateral: 51.8% (US$451m.)
- IDA: 15.3% (US$133m.)
- Global Fund: 19.9% (US$173m.)
- Other: 13.0% (US$113m.)

OECD CRS and imputed multilateral contributions to the health sector. DAC secretariat estimates. In 2017 prices.

JAPAN’S KEY GLOBAL HEALTH COMMITMENTS
US$ millions

- UNITAID (annually): US$1m.

Data from government and listed organizations
TOP 10 DAC DONORS TO HEALTH, 2016
Total health ODA; US$ millions; in 2017 prices; incl. bilateral and multilateral funding

United States: 10,048
United Kingdom: 2,359
Germany: 1,184
France: 671
Japan: 81
Canada: 799
Netherlands: 589
Norway: 566
Sweden: 530
Australia: 372

TOP 20 DAC DONORS TO HEALTH, 2016
Health ODA as % of total ODA

United States: 26.1
Canada: 19.2
Luxembourg: 15.8
United Kingdom: 13.3
Ireland: 13.2
Norway: 12.3
Netherlands: 11.1
Australia: 10.6
Korea: 10.4
Sweden: 10.3
Belgium: 9.3
France: 8.3
Denmark: 8.2
Portugal: 5.6
Finland: 5.6
New Zealand: 5.4
Switzerland: 5.4
Japan: 5.4
Italy: 5.4
Germany: 4.3

OECD CRS and imputed multilateral contributions to the health sector (DAC Secretariat estimates)