

		CANADA		
Aid to Health, reported as ODA to DAC, USD million		Disbursements		
		2007	2008	2009
Bilateral	1 Aid to Health	421,5	411,7	439,9
	1,1 Aid to Health, General (also includes technical assistance and sector budget support/basket funds) [1]	59,0	64,3	55,3
	1,2 Aid to Basic Health (also includes technical assistance and sector budget support/basket funds) [2]	254,7	281,8	315,0
	1,3 Aid to Population Policies/Programs and Reproductive Health) [3]	99,1	61,3	69,7
	<i>of which:</i>			
	Core contributions to International NGOs working in the Health Sector (ICRC and IFRC, MSF, etc.) [4]		18,88	63,8
	Core contributions to Public-Private Partnerships working in the Health Sector (e.g. GAIN, IAVI, UNITAID, etc.) [5]	7,87	6,07	14,0
	1,4 Other contributions to International NGOs working in the Health Sector [6]	8,55	4,31	
Multilateral	2 Contribution to multilateral agencies, programmes and funds	89,07	218,70	174,62
	2,1 Core contributions to the multilateral agencies working in the Health Sector [7]	32,46	124,44	168,11
	- Global Fund	..	108,34	125,94
	- WHO (ODA part) and WHO core voluntary contribution account	9,06		19,69
	- GAVI Alliance	..	..
	- UNAIDS	7,10	..	9,47
	- UNFPA	16,30	16,10	13,01
	2,2 Contribution to other multilateral institutions (imputed percentage for health) [8]	56,61	94,26	6,51
	- UN System (UNICEF, UNDP)	4,90	4,30	4,01
	- World Bank Group (IDA)	40,00	79,20	0,00
	- Regional Development Banks (AfDF, AsDF, IDB Sp. Oper. Fund)	0,10	0,00	2,50
	- Other multilateral institutions	11,61	10,76	
	3 Innovative Financing Mechanisms for Health (flows reported as ODA)	0,00	0,00	0,00
	- IFFIm (as emerging from DAC database)			
	- AMCs			
	- Health-related debt conversion discount (e.g. Debt2Health) [11] - (as emerging from DAC database)			
TOTAL AID TO HEALTH REPORTED AS ODA [12]		510,5	630,4	614,6
General Budget Support, Bilateral (imputed percentage for health) [13]				

Footnotes to country tables

[1] CRS codes 12110 to 12191

[2] CRS codes 12220 to 12281

[3] CRS codes 13010 to 13081

[4] ODA to the health sector (CRS codes 1210 to 13081) delivered through NGOs (channel codes 20000, 21013, 21016, 21018, 21020, 21023, 21029, 21032, 21044, 21045, 21053,

[5] ODA to the health sector (CRS codes 1210 to 13081) delivered through PPPs (channel codes 30000, 30001, 30005, 30006)

[6] ODA delivered through NGOs working in the health sector not included in CRS codes 12110 to 13081 but reported under CRS Code 920 (Support to NGOs)

[7] As reported by donors within the DAC database combining information in Table 2a and channel codes in CRS++ where available.

[8] Based on the Organisation's flow to the health sector as a share of its core resources. See www.oecd.org/dac/stats/methodology for details.

[9] Disbursements to the International Finance Facility for Immunisation are recorded at the time donors actually make payments.

[10] Contributions to the AMC are not recorded included under "Contribution to the World Bank" above. AMC pledges are recorded as ODA only when donors pay for vaccines.

[11] Debt operations (CRS code 600, action related to debt) targeting the health sector that are not reported under CRS codes 12110 to 13081 and nor under contribution to multilateral

[12] The definition of aid to health excludes aid to other sectors which may have direct or indirect effects on health status, e.g. water and sanitation. Medical assistance in natural disasters and other emergency situations is also excluded.

[13] General budget support (GBS) is, by definition, not earmarked by sector. It is possible to estimate the distribution of GBS to specific sectors by applying the relevant shares of partner country government expenditures.

However, this exercise is subject to a significant degree of approximation.

		FRANCE		
Aid to Health, reported as ODA to DAC, USD million		Disbursements		
		2007	2008	2009
Bilateral	1 Aid to Health	108,0	360,8	188,9
	1,1 Aid to Health, General (also includes technical assistance and sector budget support/basket funds) [1]	68,0	66,1	70,0
	1,2 Aid to Basic Health (also includes technical assistance and sector budget support/basket funds) [2]	26,2	276,6	80,5
	1,3 Aid to Population Policies/Programs and Reproductive Health) [3]	3,6	7,3	28,0
	<i>of which:</i>			
	Core contributions to International NGOs working in the Health Sector (ICRC and IFRC, MSF, etc.) [4]	..	..
	Core contributions to Public-Private Partnerships working in the Health Sector (e.g. GAIN, IAVI, UNITAID, etc.) [5]	..	207,7	0,0
	1,4 Other contributions to International NGOs working in the Health Sector [6]	10,19	10,82	10,44
Multilateral	2 Contribution to multilateral agencies, programmes and funds	576,64	657,70	641,35
	2,1 Core contributions to the multilateral agencies working in the Health Sector [7]	420,14	491,10	485,40
	- Global Fund	391,90	432,70	417,19
	- WHO (ODA part) and WHO core voluntary contribution account	23,20	26,30	26,91
	- GAVI Alliance	..	28,50	28,77
	- UNAIDS	1,64	..	9,47
	- UNFPA	3,40	3,60	3,06
	2,2 Contribution to other multilateral institutions (imputed percentage for health) [8]	156,50	166,60	155,95
	- UN System (UNICEF, UNDP)	4,20	4,20	3,49
	- World Bank Group (IDA)	65,60	61,60	47,74
	- Regional Development Banks (AfDF, AsDF, IDB Sp. Oper. Fund)	5,70	5,90	2,23
	- Other multilateral institutions			
	- EC Budget	34,1	39,9	102,5
	- European Development Fund (EDF)	46,9	55,0	
	3 Innovative Financing Mechanisms for Health (flows reported as ODA)	0,00	27,83	29,30
	- IFFIm (as emerging from DAC database)		27,83	29,30
	- AMC			
	- Health-related debt conversion discount (e.g. Debt2Health) [11] - (as emerging from DAC database)			
TOTAL AID TO HEALTH REPORTED AS ODA [12]		684,7	1 046,3	859,6
General Budget Support, Bilateral (imputed percentage for health) [13]				

Footnotes to country tables

[1] CRS codes 12110 to 12191

[2] CRS codes 12220 to 12281

[3] CRS codes 13010 to 13081

[4] ODA to the health sector (CRS codes 1210 to 13081) delivered through NGOs (channel codes 20000, 21013, 21016, 21018, 21020, 21023, 21029, 21032, 21044, 21045, 21053, 21055)

[5] ODA to the health sector (CRS codes 1210 to 13081) delivered through PPPs (channel codes 30000, 30001, 30005, 30006)

[6] ODA delivered through NGOs working in the health sector not included in CRS codes 12110 to 13081 but reported under CRS Code 920 (Support to NGOs)

[7] As reported by donors within the DAC database combining information in Table 2a and channel codes in CRS++ where available.

[8] Based on the Organisation's flow to the health sector as a share of its core resources. See www.oecd.org/dac/stats/methodology for details.

[9] Disbursements to the International Finance Facility for Immunisation are recorded at the time donors actually make payments.

[10] Contributions to the AMC are not recorded included under "Contribution to the World Bank" above. AMC pledges are recorded as ODA only when donors pay for vaccines.

[11] Debt operations (CRS code 600, action related to debt) targeting the health sector that are not reported under CRS codes 12110 to 13081 and nor under contribution to multilateral funds such as GFTAM.

[12] The definition of aid to health excludes aid to other sectors which may have direct or indirect effects on health status, e.g. water and sanitation. Medical assistance in natural disasters and other emergency situations is also excluded.

[13] General budget support (GBS) is, by definition, not earmarked by sector. It is possible to estimate the distribution of GBS to specific sectors by applying the relevant shares of partner country government expenditures.

However, this exercise is subject to a significant degree of approximation.

		GERMANY		
Aid to Health, reported as ODA to DAC, USD million		disbursements		
		2007	2008	2009
Bilateral	1 Aid to Health	350,2	405,6	424,6
	1,1 Aid to Health, General (also includes technical assistance and sector budget support/basket funds) [1]	85,8	108,7	105,0
	1,2 Aid to Basic Health (also includes technical assistance and sector budget support/basket funds) [2]	128,1	164,0	126,5
	1,3 Aid to Population Policies/Programs and Reproductive Health) [3]	136,3	132,9	193,1
	<i>of which:</i>			
	Core contributions to International NGOs working in the Health Sector (ICRC and IFRC, MSF, etc.) [4]	4,1	4,3	8,1
	Core contributions to Public-Private Partnerships working in the Health Sector (e.g. GAIN, IAVI, UNITAI)	1,4	1,4	1,4
	1,4 Other contributions to International NGOs working in the Health Sector [6]			
Multilateral	2 Contribution to multilateral agencies, programmes and funds	407,78	543,20	531,88
	2,1 Core contributions to the multilateral agencies working in the Health Sector [7]	178,78	345,30	362,35
	- Global Fund	119,10	288,50	278,51
	- WHO (ODA part) and WHO core voluntary contribution account	28,50	30,80	53,15
	- GAVI Alliance	5,48	..	5,57
	- UNAIDS (included under bilateral aid) <i>-these figures are being checked with the OECD Secretariat</i>			0,00
	- UNFPA	25,70	26,00	25,07
	2,2 Contribution to other multilateral institutions (imputed percentage for health) [8]	229,00	197,90	169,53
	- UN System (UNICEF, UNDP)	2,60	2,70	2,80
	- World Bank Group (IDA)	133,00	85,90	62,23
	- Regional Development Banks (AfDF, AsDF, IDB Sp. Oper. Fund)	4,80	7,20	2,89
	- Other multilateral institutions	..	..
	- EC Budget	43,6	49,2	101,6
	- European Development Fund (EDF)	45,0	52,9	
	3 Innovative Financing Mechanisms for Health (flows reported as ODA)	0,00	0,00	0,00
	- IFFIm (as emerging from DAC database)			
	- AMCs			
	- Health-related debt conversion discount (e.g. Debt2Health) [11] - (as emerging from DAC database)			
TOTAL AID TO HEALTH REPORTED AS ODA [12]		758,0	948,8	956,5
General Budget Support, Bilateral (imputed percentage for health) [13]				

Footnotes to country tables

[1] CRS codes 12110 to 12191

[2] CRS codes 12220 to 12281

[3] CRS codes 13010 to 13081

[4] ODA to the health sector (CRS codes 1210 to 13081) delivered through NGOs (channel codes 20000, 21013, 21016, 21018, 21020, 21023, 21029, 21032, 21044, 21045, 21053, 21055)

[5] ODA to the health sector (CRS codes 1210 to 13081) delivered through PPPs (channel codes 30000, 30001, 30005, 30006)

[6] ODA delivered through NGOs working in the health sector not included in CRS codes 12110 to 13081 but reported under CRS Code 920 (Support to NGOs)

[7] As reported by donors within the DAC database combining information in Table 2a and channel codes in CRS++ where available.

[8] Based on the Organisation's flow to the health sector as a share of its core resources. See www.oecd.org/dac/stats/methodology for details.

[9] Disbursements to the International Finance Facility for Immunisation are recorded at the time donors actually make payments.

[10] Contributions to the AMC are not recorded included under "Contribution to the World Bank" above. AMC pledges are recorded as ODA only when donors pay for vaccines.

[11] Debt operations (CRS code 600, action related to debt) targeting the health sector that are not reported under CRS codes 12110 to 13081 and nor under contribution to multilateral funds such as GFTAM.

[12] The definition of aid to health excludes aid to other sectors which may have direct or indirect effects on health status, e.g. water and sanitation. Medical assistance in natural disasters and other emergency situations is also excluded.

[13] General budget support (GBS) is, by definition, not earmarked by sector. It is possible to estimate the distribution of GBS to specific sectors by applying the relevant shares of partner country government expenditures.

However, this exercise is subject to a significant degree of approximation.

ITALY				
Aid to Health, reported as ODA to DAC, USD million - Disbursements				
		2007	2008	2009
Bilateral	1 Aid to Health	126,2	122,3	109,0
	1,1 Aid to Health, General (also includes technical assistance and sector budget support/basket funds) [1]	24,7	65,4	54,3
	1,2 Aid to Basic Health (also includes technical assistance and sector budget support/basket funds) [2]	73,9	42,3	35,2
	1,3 Aid to Population Policies/Programs and Reproductive Health) [3]	8,4	12,7	12,7
	<i>of which:</i>			
	Core contributions to International NGOs working in the Health Sector (ICRC and IFRC, MSF, etc.) [4]		0,1	0,0
	Core contributions to Public-Private Partnerships working in the Health Sector (e.g. GAIN, IAVI, UNITAID, etc.) [5]			
	1,4 Other contributions to International NGOs working in the Health Sector [6]	19,16	1,81	6,75
Multilateral	2 Contribution to multilateral agencies, programmes and funds	507,12	342,26	104,30
	2,1 Core contributions to the multilateral agencies working in the Health Sector [7]	442,82	205,86	22,30
	- Global Fund	355,92	177,96	0,00
	- WHO (ODA part) and WHO core voluntary contribution account	76,60	25,00	21,60
	- GAVI Alliance	..	..	..
	- UNAIDS	1,70	..	0,00
	- UNFPA	8,60	2,90	0,70
	2,2 Contribution to other multilateral institutions (imputed percentage for health) [8]	64,30	136,40	82,00
	- UN System (UNICEF, UNDP)	7,60	1,00	1,84
	- World Bank Group (IDA)	4,30	67,00	17,13
	- Regional Development Banks (AfDF, AsDF, IDB Sp. Oper. Fund)	0,10	9,00	0,14
	- Other multilateral institutions	..	..	..
	- EC Budget	28,2	33,5	62,9
	- European Development Fund (EDF)	24,1	25,9	..
	3 Innovative Financing Mechanisms for Health (flows reported as ODA)	7,89	87,78	90,72
	- IFFIm (as emerging from DAC database)	7,89	35,79	34,85
	- AMCs	..	51,99	55,87
	- Health-related debt conversion discount (e.g. Debt2Health) [11] - (as emerging from DAC database)	..	..	..
TOTAL AID TO HEALTH REPORTED AS ODA [12]		641,2	552,3	304,0

General Budget Support, Bilateral (imputed percentage for health) [13]

Footnotes to country tables

[1] CRS codes 12110 to 12191

[2] CRS codes 12220 to 12281

[3] CRS codes 13010 to 13081

[4] ODA to the health sector (CRS codes 1210 to 13081) delivered through NGOs (channel codes 20000, 21013, 21016, 21018, 21020, 21023, 21029, 21032, 21044, 21045, 21053, 21055)

[5] ODA to the health sector (CRS codes 1210 to 13081) delivered through PPPs (channel codes 30000, 30001, 30005, 30006)

[6] ODA delivered through NGOs working in the health sector not included in CRS codes 12110 to 13081 but reported under CRS Code 920 (Support to NGOs)

[7] As reported by donors within the DAC database combining information in Table 2a and channel codes in CRS++ where available.

[8] Based on the Organisation's flow to the health sector as a share of its core resources. See www.oecd.org/dac/stats/methodology for details.

[9] Disbursements to the International Finance Facility for Immunisation are recorded at the time donors actually make payments.

[10] Contributions to the AMC are not recorded included under "Contribution to the World Bank" above. AMC pledges are recorded as ODA only when donors pay for vaccines.

[11] Debt operations (CRS code 600, action related to debt) targeting the health sector that are not reported under CRS codes 12110 to 13081 and nor under contribution to multilateral funds such as GFTAM.

[12] The definition of aid to health excludes aid to other sectors which may have direct or indirect effects on health status, e.g. water and sanitation. Medical assistance in natural disasters and other emergency situations is also excluded.

[13] General budget support (GBS) is, by definition, not earmarked by sector. It is possible to estimate the distribution of GBS to specific sectors by applying the relevant shares of partner country government expenditures. However, this exercise is subject to a significant degree of approximation.

JAPAN				
Aid to Health, reported as ODA to DAC, USD million disbursements				
		2007	2008	2009
Bilateral	1 Aid to Health	475,4	432,6	358,3
	1,1 Aid to Health, General (also includes technical assistance and sector budget support/basket funds) [1]	107,0	120,5	111,7
	1,2 Aid to Basic Health (also includes technical assistance and sector budget support/basket funds) [2]	161,7	138,0	191,2
	1,3 Aid to Population Policies/Programs and Reproductive Health) [3]	206,7	174,1	55,4
	<i>of which:</i>			
	Core contributions to International NGOs working in the Health Sector (ICRC and IFRC, MSF, etc.) [4]	0,4	..	0,0
	Core contributions to Public-Private Partnerships working in the Health Sector (e.g. GAIN, IAVI, UNITAID, etc.) [5]			0,00
	1,4 Other contributions to International NGOs working in the Health Sector [6]	0,00	1,83	
Multilateral	2 Contribution to multilateral agencies, programmes and funds	282,51	414,60	443,92
	2,1 Core contributions to the multilateral agencies working in the Health Sector [7]	265,71	254,60	298,34
	- Global Fund	186,00	183,00	194,43
	- WHO (ODA part) and WHO core voluntary contribution account	42,50	40,90	69,90
	- GAVI Alliance			
	- UNAIDS	2,91	..	2,94
	- UNFPA	34,30	30,70	31,07
	2,2 Contribution to other multilateral institutions (imputed percentage for health) [8]	16,80	160,00	145,58
	- UN System (UNICEF, UNDP)	6,90	5,90	5,73
	- World Bank Group (IDA)		..	141,60
	- Regional Development Banks (AfDF, AsDB Special Funds, IDB Sp. Oper. Fund)	9,90	12,50	24,65
	- Other multilateral institutions			
	- EC Budget			
	- European Development Fund (EDF)			
	3 Innovative Financing Mechanisms for Health (flows reported as ODA)	0,00	0,00	0,00
	- IFFIm (as emerging from DAC database)			
	- AMCs			
	- Health-related debt conversion discount (e.g. Debt2Health) [11] - (as emerging from DAC database)			
TOTAL AID TO HEALTH REPORTED AS ODA [12]		757,9	847,2	802,2
General Budget Support, Bilateral (imputed percentage for health) [13]				
<p>"About the data of year 2007 and 2008, the table of figure 5 (See page 12 of Deauville Report) follows the Japan's figures of Muskoka report (See p. 30 Muskoka report), to maintain the consistency. Some adjustments such as in calculation method of this year cause some differences in those figures, as this appendix shows."</p>				

Footnotes to country tables

[1] CRS codes 12110 to 12191

[2] CRS codes 12220 to 12281

[3] CRS codes 13010 to 13081

21055)

[5] ODA to the health sector (CRS codes 1210 to 13081) delivered through PPPs (channel codes 30000, 30001, 30005, 30006)

[6] ODA delivered through NGOs working in the health sector not included in CRS codes 12110 to 13081 but reported under CRS Code 920 (Support to NGOs)

[7] As reported by donors within the DAC database combining information in Table 2a and channel codes in CRS++ where available.

[8] Based on the Organisation's flow to the health sector as a share of its core resources. See www.oecd.org/dac/stats/methodology for details.

[9] Disbursements to the International Finance Facility for Immunisation are recorded at the time donors actually make payments.

[10] Contributions to the AMC are not recorded included under "Contribution to the World Bank" above. AMC pledges are recorded as ODA only when donors pay for vaccines.

[11] Debt operations (CRS code 600, action related to debt) targeting the health sector that are not reported under CRS codes 12110 to 13081 and nor under contribution to multilateral funds such as GFTAM.

[12] The definition of aid to health excludes aid to other sectors which may have direct or indirect effects on health status, e.g. water and sanitation. Medical assistance in natural disasters and other emergency situations is also excluded.

[13] General budget support (GBS) is, by definition, not earmarked by sector. It is possible to estimate the distribution of GBS to specific sectors by applying the relevant shares of partner country government expenditures.

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RUSSIA as reported in the G8 2009 report

	2007	2008	2009
Aid to Health, General <i>(also includes technical assistance and sector budget support/basket funds)</i>		1,6	28,6
Aid to Basic Health <i>(also includes technical assistance and sector budget support/basket funds)</i>			
Aid to Population Policies/Programs and Reproductive Health)			
Core contributions to International NGOs working in the Health Sector (e.g. MSF, HAI, IPPF etc.)			
Core contributions to Public-Private Partnerships working in the Health Sector (e.g. GAIN, IAVI, UNITAID, etc.)			
<i>Core contributions to the multilateral agencies working in the Health Sector</i>			
- Global Fund	85,7	78,4	79,0
- WHO (ODA part)	8,0	14,6	12,6
- GAVI Alliance			
- UNAIDS	0,5	1,1	1,7
- Other agencies working in the Health Sector			3,0
- UNFPA [1]			0,3
<i>Innovative Financing Mechanisms for Health (flows reported as ODA)</i>			
- IFFIm			
- AMCs			
- Other			
<i>Other multilateral institutions (imputed percentage for health **)</i>			
- UN System (e.g. UNICEF, UNDP) [2]	0,6	0,6	0,2
- World Bank [3]	7,3	12,2	3,4
- Regional Development Banks [4]			
- Other multilateral institutions			
- EC Budget			
- European Development Fund (EDF)			
General Budget Support, Bilateral <i>(imputed percentage for health)</i>		1,8	0,3
Health-related Debt conversion discount (e.g. Debt2Health)			
Other miscellaneous items			
TOTAL AID TO HEALTH	102,2	110,3	129,1
TOTAL ODA (memo item)			

[1] Should be calculated as 100.0% of contribution to UNFPA

[2] Should be calculated as 4.0% of contribution to UNDP + 17.4% of contribution to UNICEF

[3] Should be calculated as 8.90% of contribution to IDA

[4] Should be calculated as 2.6% of contribution to AsDB Sp Fund, 6.7% of contribution to Afric. Dev Fund and 6.4% of contribution to IDB Sp. Fund

		UK		
Aid to Health, reported as ODA to DAC, USD million		disbursements		
		2007	2008	2009
Bilateral	1 Aid to Health	1 099,4	1 003,0	1 088,6
	1,1 Aid to Health, General (also includes technical assistance and sector budget support/bas)	353,1	296,0	219,6
	1,2 Aid to Basic Health (also includes technical assistance and sector budget support/basket)	276,4	215,6	394,7
	1,3 Aid to Population Policies/Programs and Reproductive Health) [3]	469,9	491,5	474,2
	<i>of which:</i>			
	Core contributions to International NGOs working in the Health Sector (ICRC and IFR)	45,8	50,6	
	Core contributions to Public-Private Partnerships working in the Health Sector (e.g. G	45,5	36,2	
	1,4 Other contributions to International NGOs working in the Health Sector [6]			
Multilateral	2 Contribution to multilateral agencies, programmes and funds	582,52	338,79	462,01
	2,1 Core contributions to the multilateral agencies working in the Health Sector [7]	369,22	133,19	320,38
	- Global Fund	200,10	90,50	179,63
	- WHO (ODA part) and WHO core voluntary contribution account	42,60	42,50	42,20
	- GAVI Alliance	48,50	0,19	0,00
	- UNAIDS	38,02	..	32,85
	- UNFPA	40,00	..	65,70
	2,2 Contribution to other multilateral institutions (imputed percentage for health) [8]	213,30	205,60	141,63
	- UN System (UNICEF, UNDP)	11,00	11,10	6,55
	- World Bank Group (IDA)	119,70	115,10	65,83
	- Regional Development Banks (AfDF, AsDF, IDB Sp. Oper. Fund)	4,70	8,20	2,68
	- Other multilateral institutions	..	..	66,57
	- EC Budget	37,4	39,2	
	- European Development Fund (EDF)	40,5	32,0	
	3 Innovative Financing Mechanisms for Health (flows reported as ODA)	0,00	30,40	39,15
	- IFFIm (as emerging from DAC database)		30,40	39,15
	- AMCs			
	- Health-related debt conversion discount (e.g. Debt2Health) [11] - (as emerging from DAC database)			
TOTAL AID TO HEALTH REPORTED AS ODA [12]		1 682,0	1 372,2	1 589,7
General Budget Support, Bilateral (imputed percentage for health) [13]				

[1] CRS codes 12110 to 12191

[2] CRS codes 12220 to 12281

[3] CRS codes 13010 to 13081

[4] ODA to the health sector (CRS codes 1210 to 13081) delivered through NGOs (channel codes 20000, 21013, 21016, 21018, 21020, 21023, 21029, 21032, 21044, 21045, 21053, 21055)

[5] ODA to the health sector (CRS codes 1210 to 13081) delivered through PPPs (channel codes 30000, 30001, 30005, 30006)

[6] ODA delivered through NGOs working in the health sector not included in CRS codes 12110 to 13081 but reported under CRS Code 920 (Support to NGOs)

[7] As reported by donors within the DAC database combining information in Table 2a and channel codes in CRS++ where available.

[8] Based on the Organisation's flow to the health sector as a share of its core resources. See www.oecd.org/dac/stats/methodology for details.

[9] Disbursements to the International Finance Facility for Immunisation are recorded at the time donors actually make payments.

[10] Contributions to the AMC are not recorded included under "Contribution to the World Bank" above. AMC pledges are recorded as ODA only when donors pay for vaccines.

[11] Debt operations (CRS code 600, action related to debt) targeting the health sector that are not reported under CRS codes 12110 to 13081 and nor under contribution to multilateral funds such as GFTAM.

[12] The definition of aid to health excludes aid to other sectors which may have direct or indirect effects on health status, e.g. water and sanitation. Medical assistance in natural disasters and other emergency situations is also excluded.

[13] General budget support (GBS) is, by definition, not earmarked by sector. It is possible to estimate the distribution of GBS to specific sectors by applying the relevant shares of partner country government expenditures.

However, this exercise is subject to a significant degree of approximation.

USA

Aid to Health, reported as ODA to DAC, USD million

disbursements

		2007	2008	2009
Bilateral	1 Aid to Health	4 216,8	5 320,0	6 080,0
	1,1 Aid to Health, General (also includes technical assistance and sector budget support/basket funds) [1]	149,0	88,3	49,4
	1,2 Aid to Basic Health (also includes technical assistance and sector budget support/basket funds) [2]	1 050,7	981,9	939,6
	1,3 Aid to Population Policies/Programs and Reproductive Health) [3]	3 017,1	4 249,8	5 091,0
	<i>of which:</i>			
	Core contributions to International NGOs working in the Health Sector (ICRC and IFRC, MSF, etc.) [4]	67,1	77,1	419,1
	Core contributions to Public-Private Partnerships working in the Health Sector (e.g. GAIN, IAVI, UNITAID, etc.) [5]	42,4	39,9	49,4
	1,4 Other contributions to International NGOs working in the Health Sector [6]			
Multilateral	2 Contribution to multilateral agencies, programmes and funds	1012,94	1132,80	1436,93
	2,1 Core contributions to the multilateral agencies working in the Health Sector [7]	799,03	944,13	1253,05
	- Global Fund	642,30	789,20	1010,10
	- WHO (ODA part) and WHO core voluntary contribution account	71,00	77,10	81,00
	- GAVI Alliance	69,30	71,90	75,00
	- UNAIDS	16,43	5,93	56,95
	- UNFPA			30,00
	2,2 Contribution to other multilateral institutions (imputed percentage for health) [8]	213,91	188,67	183,88
	- UN System (UNICEF, UNDP)	21,7	21,6	23,3
	- World Bank Group (IDA)	133,0	102,8	98,0
	- Regional Development Banks (AfDF, AsDF, IDB Sp. Oper. Fund)	2,6	6,4	3,5
	- Other multilateral institutions (PAHO)	57	58	59,12
	3 Innovative Financing Mechanisms for Health (flows reported as ODA)	0,00	0,00	0,00
	- IFFIm (as emerging from DAC database)			
	- AMCs			
	- Health-related debt conversion discount (e.g. Debt2Health) [11] - (as emerging from DAC database)			
TOTAL AID TO HEALTH REPORTED AS ODA [12]		5 229,8	6 452,8	7 516,9
General Budget Support, Bilateral (imputed percentage for health) [13]				

EU				
Aid to Health, reported as ODA to DAC, USD million				
		2007	2008	2009
Bilateral	1 Aid to Health	663,9	732,3	572,9
	1,1 Aid to Health, General (also includes technical assistance and sector budget support/basket funds) [1]	68	178	149
	1,2 Aid to Basic Health (also includes technical assistance and sector budget support/basket funds) [2]	457	391	357
	1,3 Aid to Population Policies/Programs and Reproductive Health) [3]	138	164	67
	<i>of which:</i>			
	Core contributions to International NGOs working in the Health Sector (ICRC and IFRC, MSF, etc.) [4]	34,2	53,5	7,9
	Core contributions to Public-Private Partnerships working in the Health Sector (e.g. GAIN, IAVI, UNITAID, etc.) [5]	1,7		1,8
	1,4 Other contributions to International NGOs working in the Health Sector [6]			
Multilateral	2 Contribution to multilateral agencies, programmes and funds	84,96	136,54	278,51
	2,1 Core contributions to the multilateral agencies working in the Health Sector [7]	84,96	136,44	278,51
	- Global Fund	84,90	126,90	278,51
	- WHO (ODA part) and WHO core voluntary contribution account			
	- GAVI Alliance	..	9,54	
	- UNAIDS	0,06		0,00
	- UNFPA			
	2,2 Contribution to other multilateral institutions (imputed percentage for health) [8]	0,00	0,10	0,00
	- UN System (UNICEF, UNDP)		0,1	
	- World Bank Group (IDA)			
	- Regional Development Banks (AfDF, AsDF, IDB Sp. Oper. Fund)			
	- Other multilateral institutions			
	- EC Budget			
	- European Development Fund (EDF)			
	3 Innovative Financing Mechanisms for Health (flows reported as ODA)	0,00	0,00	0,00
	- IFFIm (as emerging from DAC database)			
	- AMCs			
	- Health-related debt conversion discount (e.g. Debt2Health) [11] - (as emerging from DAC database)			
TOTAL AID TO HEALTH REPORTED AS ODA [12]		748,8	868,9	851,4
General Budget Support, Bilateral (imputed percentage for health) [13]				

Footnotes to country tables

[1] CRS codes 12110 to 12191

[2] CRS codes 12220 to 12281

[3] CRS codes 13010 to 13081

[4] ODA to the health sector (CRS codes 1210 to 13081) delivered through NGOs (channel codes 20000, 21013, 21016, 21018, 21020, 21023, 21029, 21032, 21044, 21045, 21053, 21055)

[5] ODA to the health sector (CRS codes 1210 to 13081) delivered through PPPs (channel codes 30000, 30001, 30005, 30006)

[6] ODA delivered through NGOs working in the health sector not included in CRS codes 12110 to 13081 but reported under CRS Code 920 (Support to NGOs)

[7] As reported by donors within the DAC database combining information in Table 2a and channel codes in CRS++ where available.

[8] Based on the Organisation's flow to the health sector as a share of its core resources. See www.oecd.org/dac/stats/methodology for details.

[9] Disbursements to the International Finance Facility for Immunisation are recorded at the time donors actually make payments.

[10] Contributions to the AMC are not recorded included under "Contribution to the World Bank" above. AMC pledges are recorded as ODA only when donors pay for vaccines.

[11] Debt operations (CRS code 600, action related to debt) targeting the health sector that are not reported under CRS codes 12110 to 13081 and nor under contribution to multilateral funds such as GFTAM.

[12] The definition of aid to health excludes aid to other sectors which may have direct or indirect effects on health status, e.g. water and sanitation. Medical assistance in natural disasters and other emergency situations is also excluded.

[13] General budget support (GBS) is, by definition, not earmarked by sector. It is possible to estimate the distribution of GBS to specific sectors by applying the relevant shares of partner country government expenditures.

However, this exercise is subject to a significant degree of approximation.