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**The U.S. Global Health Budget Tracker
Kaiser Family Foundation
September 11, 2014**

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MALE SPEAKER: As a reminder, this conference is being recorded, Thursday, September 11, 2014. I would now like to turn the conference over to Jen Kates, Vice President and Director of Global Health and HIV Policy, Kaiser Family Foundation. Please go ahead.

JEN KATES: Thank you and hi everyone. This is Jen Kates with the Kaiser Family Foundation. I'm joined today by my colleagues, Adam Wexler, who's the Director of our Global Health Budget project, and Allison Valentine who's a Global Health Policy Analyst. The three of us are going to present to you a new, very exciting tool that we just launched, a U.S. Global Health Budget Tracker. Our goal with this tool was to provide a user-friendly access point for all the stakeholders that we try to reach to obtain up-to-date information on the status of the U.S. global health budget. We thought, therefore that the tools launched just recently, we thought it would be helpful to demonstrate it to you and to answer questions you might have about how it can be used, and we are really looking for your feedback on how it works for you because that's why we developed it.

To get started, I am just going to provide a really short context for why tracking the U.S. global health budget is important, which hopefully for lots of you on the call it is obvious and second nature, but it's always worth stating, so

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just to go to a couple of slides that we have. We track, in addition to what's going on with the U.S. Global Health Budget, we track the U.S. funding for global health in context with other donors, and consistently the U.S. is the largest donor to international health assistance. As you can see in this slide more than a third of funding from donors is provided by the United States government, and this is important for tracking what the U.S. is doing is really giving us a sort of gauge as to what direction donors are moving in. Next slide.

Also, what we look at is what priority do donor governments put on health within their foreign assistance portfolios. This looks at the top ten donor governments looking at the share of all of their health assistance, so all of the aid that goes to every area in low- and middle-income countries, what share of that aid is provided to health. As you can see here, the U.S. provides a greater share of its total assistance package for health activities than any of the other donors. Again, this is a priority area for the U.S. and it's another reason why it's important to track. Next.

The other reason that it's really critical to track the global health budget is that all of the funding that is provided for Global Health by the U.S. government is discretionary. As many people on the call know, that means the funding must be appropriated by Congress every year for a range of different programs. If the funding isn't appropriated, the

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funding isn't there, and this includes funding for bilateral efforts as well as contributions that the U.S. government might make to multilateral agencies. We have included on this slide a list of the main departments and agencies that are responsible for carrying out Global Health activities that receive the funding and then in turn provide that funding either to other U.S. agencies or to NGOs, contractors, governments, and others on the ground. Importantly, the way that the funding is appropriated is through several Global Health accounts, and you can see some of these listed here. We have listed the accounts, for example, at state and foreign operations, and these are really the important ones to track. Next slide.

Then finally, when we talk about the U.S. global health budget, we are talking about a range of activities and programs. We have just presented some of them here, and there are more, but there is a whole range of disease-specific programs, HIV, TB, malaria, funding that's provided to multilateral mechanisms for disease efforts like the Global Fund, for NTDs, GAVI, which is not listed but is clearly important. Then population-based programs, maternal and child health, nutrition, family planning. Then there is a range of other efforts that may not be health-specific, but really touch on the health of people, so we have included them here, water and sanitation efforts, food aid, and others.

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I will just highlight, or note, that funding for Ebola, which many are focused on, is embedded in some of these programs here and there is additional funding that's been announced. Those are all things that we are trying to track. With that context set, I want to turn this over to Adam and Allison who will walk you through the new Budget Tracker tool and some of the other efforts that we have undertaken at the Foundation to provide analysis of the U.S. global health budget. Adam?

ADAM WEXLER: Thank you very much, Jen. Before we get into the tool itself, we wanted to highlight some of our existing resources which helped lead into our decision to do a more in-depth effort tracking the U.S. global health budget. We regularly release reports and analyses. For instance, we did an analysis of the 2015 budget request, which you see here. We also do, as Jen mentioned before, the context of what's the U.S. global health budget in context with other donors. Every year we do an annual report on donor financing for HIV in low- and middle-income countries. These are analyses we will continue to do, but we think that the Budget Tracker will be a nice complement to these efforts.

Another resource is Kaiser slides, which you see here. We have a number of slides that can be downloaded as PowerPoint slides or as figures or images that present the Global Health Budget in a number of different ways: over time, by area, for a

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specific fiscal year. These are efforts we will also continue, but again will be complemented by the Budget Tracker.

The next effort we would like to highlight is our previous Budget Tracker. This is an effort we started several years ago to track the global health budget throughout the appropriations process from the budget request to the House bill, to a Senate bill, and to finally conclusion of a final bill agreed to by Congress. This effort is slightly cumbersome because it's six pages of a big table, so if someone was looking for specifically Maternal and Child Health funding they might have to flip through several pages. We realized that we wanted to create a tool that was going to be more user-friendly, something that the user can come in and filter and to find the specific information that they are interested in tracking. The result was our new U.S. Global Health Budget Tracker.

What you are looking at here is the main Budget Tracker page. This is the primary entry point for the tracker, and before we get into some of the budget numbers themselves, what I would like to do is highlight some features on this main page. First thing is the featured budget data section. As you can see here, we have three tabs that highlight specific funding. This is something that is customized by us and will be adjusted throughout the year at key points, either in the appropriations process or on a Global Health Day, say, Global

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HIV/AIDS Day which might highlight the trends in HIV funding. Today, we have chosen to highlight PEPFAR funding over time, the USAID global health budget in the budget request, and malaria funding over time.

If you were to click on any one of these images, you would be taken into the Budget Tracker itself and have a more detailed breakdown of the budget that we are highlighting. If you scroll down further, you'll see this Additional Information section. This is another section that can be customized by us where we will highlight new reports or analyses. For instance, we have highlighted the budget request analysis, and at the conclusion of this web briefing, we will upload access to this briefing here once we are done. Additionally, if you have any questions while using the Budget Tracker, we would suggest first looking at the Frequently Asked Questions section, but of course we are always available for contact should any questions arise.

Let's get into using the tool itself. As Jen mentioned earlier, there are many different ways to look at the global health budget. You can look at it by a single fiscal year, you can look at it by agency, by program area, or by initiative. Now I am going to start by looking at a specific agency. If you go to the Agency section, click the dropdown menu, you see all of the agencies that we are currently tracking.

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Today I'm going to start with USAID. You click on USAID and you are taken to the USAID global health budget page. This is highlighting the 2015 budget request. The first thing you will see here is the figure, which breaks down the total USAID global health budget by program area, so we have HIV, TB, malaria, and so on. If you take your mouse and scroll over any of these bars, a pop-up window will display which gives the overall amount for that program area as well as any specified funding within that program area. For instance, in HIV funding, that includes microbicides, IAVI, and funding for the Commodity Fund.

As you'll see with other program areas, similar pop-up windows are displayed and are a useful tool to find out if there is any funding included within that total. If you scroll down further you will see a big data table. This provides a breakdown of all the data included in that figure by the account, so you see we have the Global Health Programs account, the Economic Support Fund account, and the Development Assistance account and it is broken down by program area. You may notice that there are arrows located next to some of the program areas. If you click on this arrow, a dropdown list of funding amounts is displayed. These are sub-program funding tools that were highlighted in the pop-up window in the figure.

Let's scroll back up. There are a number of different ways that you can filter this data. If you look on the right-

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hand side we have set filters that you can use. Say you are interested in looking at Maternal and Child Health funding at USAID. You simply click on the Maternal and Child Health button, and as you will see the figure as well as the table is adjusted accordingly. If you also want to include nutrition funding, click on that box and you will have Maternal and Child Health and Nutrition, again the figure is adjusted as well as the table, and you can add any of these other program areas as you see fit. Once you're done and you want to start over you can click on clear filter areas and you go back to the original setting.

What if you're interested in a different fiscal year? Scroll up to the fiscal year section, click the dropdown menu, and choose a different fiscal year. Again, the figure and the data table are both adjusted based on your filter that you've chosen. If you would like to choose and compare two fiscal years click the radio button here, choose your two fiscal years, and as you will notice again the figure and the data table are adjusted accordingly. In this setting, as you will notice the program areas are now stacked one on top of the other so that you can see the overall amount within the agency. If you would like a broader time range, click on the custom time range button here, and as you will see you have from 2006 to 2015. If you want to adjust that time range, simply use the slider tool and adjust accordingly. Again, both the figure and

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the data table are adjusted. If you want to look at Maternal and Child Health funding over this period of time, simply use these filters and you can adjust what is being displayed.

One of the things I like to highlight on this page here is this data summary section here. This is also adjusted based on the filters you've chosen, so as you can see the timeframe is displayed, 2008 to 2015, and we have selected the Maternal and Child Health program area. If we clear the filters, as you will see, all the program areas are highlighted.

I have covered a number of different functionality options here under agency. Now I would like to hand it over to my colleague, Allison Valentine, who will look at some additional functionality by program area.

ALLISON VALENTINE: Thanks, Adam. Let's return to the homepage and take a look at program area funding. This allows you to view funding for a specific program area, and let's take a look at Maternal and Child Health. On this page, you will notice that it is structured very similarly to the by agency page that Adam just showed. You have the same filtering capabilities and can filter by year, and now on this page you can filter by agency. These changes will be made to the graph, as well as the data table, as Adam showed. You have the same ability to expand the rows and see sub-program-specific funding. Below the data table, you will also notice that there are notes and sources, which can be expanded for your

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information. Below notes and sources, we have also highlighted additional information on that topic, as well as related resources, which include other fact sheets or reports that may relate to the topic that you are viewing.

Now let's scroll to the top and take a look at the data download function. If you click on the Excel icon at the top of the page, it will allow you to download the data based on the filters that you have selected. Let's take a look at an example. This is an Excel download of the Maternal and Child Health funding that we were just looking at. At the top of the page, it shows all of the filters that you had selected previously, and it also downloads all of the relevant information that you might need such as the agency, the account, whether or not it's included as part of an initiative, the program area, sub-program area, the data itself, as well as any notes and sources, which are listed below the data.

Also, you can print the data to carry with you. This is a view of the printer-friendly version, which includes the graph that you were just looking at, as well as the table that was presented, notes and sources, and any relevant additional information. Now I will turn it back to Adam to highlight one more feature.

ADAM WEXLER: Great, thank you, Allison. One of the true benefits of our prior Budget Tracker was the ability to track the global health budget through the appropriations

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process, and this was a feature we wanted to make sure we carried through with this new tool. What we have done is included that ability throughout the site. Let's go back to an agency, USAID, and scroll up. What you will notice across the top here are several different tabs. If you click on the snapshot tab, it will take you to the current fiscal year. What this table is displaying is USAID funding for the prior fiscal year, 2014, the funding amount in the 2015 request, and then any totals that were included within the House bill and the Senate bill. Similar to the other tables throughout the site you can expand, so I have expanded the Global Health Program's account and you can see all the different program areas with their relevant budget data included.

We have also included this compare functionality over here. If you look over to the right-hand side there's a dropdown menu. If you want to compare the 2015 Senate totals to the 2015 House totals, simply click on those relevant pieces and they are automatically calculated. Here you see you have the difference between the two bills and you can change that if you want to compare the House to 2014. The comparisons are automatically made.

Something that we carried through throughout the site, so if you are in Maternal and Child Health there is a similar snapshot button that you can utilize, but also if we go back to the main page you can get the full snapshot here, the fiscal

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year snapshot. Select the year, 2015, and now we have the full snapshot very similar to the original Budget Tracker document we had created. Again, you can expand and make relevant comparisons.

We've now gone through quite a bit of functionality that we have incorporated into the Budget Tracker. We hope we've given you a good overview of the way it can be used, but really we want to hear from you now and we'd like to open it up to questions that we would be happy to answer. If you do have a question, please type that question into your chat section and we will go from here. Thank you very much.

JEN KATES: Great, hi, this is Jen Kates again, and I just want to thank Adam and Allison who spent an incredible amount of hours to get the Budget Tracker to this form, and as we mentioned from the outset, really it's our attempt to make something more useful for users at the end, so your questions are really helpful to us. We have a couple already, and just to let everyone know we have time to answer questions that come in, and if we end and there aren't questions, we are fine with that too. We will be posting the information and are available to respond after this as well.

There are a couple questions that came in and I'm going to ask Adam to respond to them. The first is, I think it is a really good question in general, but it's specific to one of the program areas. Someone is asking what is the source of the

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data for nutrition funding? This can be fairly nuanced in nutrition-specific accounts as well as nutrition-sensitive accounts. Can you talk a little bit about, in general, the source of the data and then nutrition data?

ADAM WEXLER: Sure. All data throughout the site, it comes from U.S. government sources, so foreignassistance.gov, which many of our listeners might already be aware of, is a primary source. We also use budget data included in the various appropriations bills, the Congressional justifications from the different agencies, as well as direct contact with the agency itself or with OMB. Those are the primary sources that we utilize.

For the nutrition data, the data is coming either directly from, in the case of the request, the Congressional budget justification or the foreignassistance.gov. Actually, with nutrition, and another example, water, those are crosscutting issues that some funding is included from other program areas. What we have chosen to do with nutrition and water is use the direct specific funding amount, so we are capturing the money that is specified by the administration as being nutrition or water. Their question is right. There is some other nutrition funding included in our other program areas and we tried to highlight that in footnotes throughout and we have done the same with water.

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JEN KATES: Yes, one of the things that we do at Kaiser is we try to make sure we, in a sense, triangulated the information. When we see data, we really spend time trying to make sure it's as accurate and as most recent as possible by looking at multiple sources, and we are in regular communication with agencies and with OMB and the Hill to check that.

A couple other questions and these are great. These are exactly the kinds of questions we wanted because they are about the data. Thank you. Why are we only going back to 2006 in the Budget Tracker and is it possible to get a breakdown by country?

ADAM WEXLER: Yes, very good questions. We chose to go back to 2006 because that's basically the cutoff point for foreignassistance.gov and has the most detailed information we can get at this time. If there is other information that becomes available, we are going to be updating it, but we do for some of the broad program areas, we have data going back further. We have overall HIV funding and malaria funding. For a number of program areas, going back, we just don't have it as detailed as we would like it to be presented equally on the site. If you are looking for other budget data prior to 2006, please do reach out to us and we'll be able to provide you with some specific data.

JEN KATES: Breakdown by country.

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ADAM WEXLER: Breakdown by country. That is something that we are considering doing for another version. There is data available. Foreignassistance.gov has some funding broken down by country. It's not something that we have on the site, as you can see right now, but it's definitely something we are considering for version two. Again, if you have specific country requests, we'd be happy to provide that data to you.

JEN KATES: Here's a question, I will answer this one. Is there a way to compare USG funding levels with disease burden?

Very good question and I will just let you know that there are ways to do that and it is one of the analyses that we are doing at Kaiser right now, so we hope to have that out in the next few months. We're looking at funding provided by the U.S. government to low- and middle-income countries by disease area looking at burden, so very good question and we also think it's important.

Another question is can we find data from USAID to look at funding that goes towards public-private partnerships for health? Not readily available.

ADAM WEXLER: That's a good question, but it's not something that is readily available or that we have obviously then on the site.

JEN KATES: There is a question here. Why isn't HRSA, the Health Resources and Services Administration at HHS, listed

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as a funding agency? Just to answer, HRSA does not get a direct appropriation from Congress for global health-related activities. HRSA has been the recipient of transfers from other agencies, but we are looking at the agencies that get direct appropriations from Congress for global health.

ADAM WEXLER: There are a number of agencies that have that same situation.

JEN KATES: Another good question. Can this tool be used to track achievements of indicators in program areas? For example, dollars spent in West Africa results in the provision of antiretroviral drugs for X number of patients.

ADAM WEXLER: No, not right now. What the tool strictly provides is the overall budget's amounts by program area, by agency. Again, it is something looking by country that we would like to incorporate in another version, but as far as outcomes and what that translates to, that's not something that we have right now.

JEN KATES: We are starting to get a couple specific requests on countries, which is great. We would ask that maybe you e-mail those to us so we have a way to get back to you with the data. If anyone has a specific request, please send it, but send it by e-mail. There you can see up on the screen right now the e-mail of our communications associate, Katie Smith, ksmith@kff.org, and we'll make sure that all those get

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sent to us so that we can get back to you. Are there other questions?

Just a follow-up question on the disease burden study, we're going to look at the data that are available and based on data that are available in terms of both what you can disaggregate for U.S. funding and what data you can find in disease burden, that's going to determine what we're looking at.

There's another question that I think is getting at some of the same issues, that's important. Another way to say it is how can this tool be used to ensure value for money appropriated? I would just encourage all the users here that what we're trying to do is provide you with the funding data that you can then use. In addition, we're doing some analyses with it looking at disease burden and other areas. What we're trying to do is make the data as available as possible so that you can use it to look at those kinds of questions too, so whether doing more complex analyses around value for money. The tool itself is really just designed to track the budget.

ADAM WEXLER: One of our goals was to create the ability for the users because we got a lot of questions from individuals that were interested in particular program areas or agencies, a way for them to access the information very quickly. The print function was something so that people can walk away with, in their hands, a snapshot over a specific

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period of time, and we think we've accomplished that, but again, as you're working with it, as you begin to use it after this web briefing, we'd love to get your feedback so that we could improve it.

JEN KATES: Another good question. Are we planning on combining these data with comparative data from OECD DAC countries, so with the other donor countries? Right now we do analyze those data in analytic reports. The tool was really set up to track the U.S. budget itself, but we do have those data available. I would say that the U.S., this may be counterintuitive to some, but U.S. is more transparent in terms of what's available by disease and by program area in terms of its budget than many of the other DAC countries, so it's sometimes hard to get comparative data.

ADAM WEXLER: Then to use this data and go right to the OECD data can be a challenge because OECD has its own reporting codes and so the data reported there is presented in a very different format than what we usually see in the budget requests and in appropriations bills and that's something to keep in mind.

JEN KATES: At the Foundation, our main focus in Global Health is on U.S. Global Health policies, so that's really why the tool is focused on the USG. Another good question, is there a way to see whether U.S. donation patterns assist with countries achieving the MDGs? Again, I think this is a great

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question about how you then use the data here from an analytic perspective, and this has already been looked at by some analyses where you can look at USG funding through PEPFAR, for example, and track drops in mortality rates, HIV mortality rates in many of the countries where the U.S. is heavily invested and clearly reducing the burden of HIV, what is an MDG goal. That is really the best way to try to think about the use of this tool.

Other questions? It seems like we're probably at the end of our questions, which is fine, and as I mentioned we are looking forward to continuing to be in touch with you. If you have questions for us that are specific about the tool, about funding for a country or anything else related to the budget, please feel free to send them in to us. We'd be happy to answer them, and really today we just wanted to provide an opportunity to show this to you so that you can go use it and let us know your feedback and hopefully it will be useful to you.

With that, I am going to thank Adam and Allison, and thanks to all of you for taking some time out of your day to look at this. We really appreciate it and hope that you will find this to be really useful in your work going forward. Thanks everyone.

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