

# Future of Health Financing Webinar

## Summary Document

### Background

2025 has been a time of significant shifts to international health financing and the global health infrastructure. To support staff and allies navigate and strategically engage in these shifts, Aidsfonds and the Love Alliance hosted a webinar on the future of health financing. Representatives from the International Treatment Preparedness Campaign (ITPC), the One Campaign, and Resilience Action Network Africa (RANA) shared their experiences and recommendations.

### 1. Dreams of a More Just Health System

Panelists emphasized the need for a health system that delivers health, not just healthcare. Models and principles of a more just system include:

- **Global Public Investment (GPI):** A model where all countries contribute according to their ability, all benefit, and all decide. This challenges traditional donor-recipient dynamics and ensures that global issues – like infectious disease outbreaks – are responded to comprehensively.
- **Predictable, Sustainable, and Long-term investment:** Health systems require long term, predictable funding to increase focus on health promotion and disease prevention, including in anticipated increasing pandemics.
- **Democratic and Accountable Financing for health systems:** Access to global health financing cannot be dependent on political whims of wealthy countries.
- **Domestic Resource Mobilization:** Increase government contributions, reduce out-of-pocket spending, and new forms of private and diaspora financing.
- **Community Leadership and Data:** Importance of community-led monitoring/ data collection, data-driven prioritization, and inclusive decision-making in the creation of a future system that serves the needs of communities.

### 2. Time Horizons and Strategies for the Changes We Need

The current health financing system prioritizes efficiency over justice. We must use this imperfect system to save lives, at the same time that we work to change the system.

- **Short-Term (Redirect):** Use existing tools – like community data – to unlock what funding already exists and redirect it to areas most in need. Build justice-focused elements, like better governance, into the existing system where possible. Find new messengers and new arguments to make the case for impactful programs.
- **Medium-Term (Restructure):** Continue to shift power and financing flows. For example, institutionalize community involvement and co-financing, expand GPI-aligned pilots, embed community accountability and transparency metrics into International Financial Institutions (IFIs), and include equity metrics in blended finance models. Reduce the cost of debt, bring more transparency to public spending to increase transparency and impact. Identify innovations and deploy them broadly.
- **Long-Term (Reimagine):** Redesign global health architecture, codify the right to health with enforceable funding obligations at the global level. Incentivize justice and putting community at the center, rather than incentivizing efficiency.

### 3. Other Key Points and Reflections

- **Political Mobilization and Cross-Sectoral Collaboration:** Across all time horizons we should re-politicize health to build cross-sectoral coalitions and consensus that speak to the prevalent fear across countries. Elevating messages of more just systems.
- **Civil Society's Role and Leadership:** Civil society must step into leadership, drawing on the legacy of HIV activism.

### Recommendations for Funders, Community Organizations, Policymakers

#### For Funders

- Support predictable, democratically governed financing models that prioritize prevention and public health.
- Invest in community-led initiatives and data systems that elevate local priorities and accountability.
- Support cross-sectoral organizing and avoid siloed funding approaches.
- Identify pre-existing coalitions, spaces, and international fora where resources can help institutionalize a health-justice focus, rather than trying to build something new.

#### For Community Organizations

- Step into leadership roles and assert community expertise in decision-making spaces.
- Engage in short-term strategies to redirect existing resources while advocating for long-term systemic change.
- Use community-led monitoring and data to influence funding and policy priorities.
- Join and build cross-movement coalitions to amplify collective impact and political mobilization. Identify pre-existing coalitions, spaces, international fora where activists can help institutionalize a health-justice focus, rather than trying to build something new.

#### For Policymakers

- Shift focus from delivering healthcare to delivering health through preventive and equity-centered systems.
- Institutionalize community involvement in health financing governance and policy design.
- Address structural barriers such as debt burdens that limit public investment in health.
- Promote domestic resource mobilization and regional collaboration to build resilient health systems.
- Reframe conversations on development aid from charity to a focus on the need for mutual investments to build collective wellbeing and security.

### Additional resources shared

- [Global Public Investment Network](#)
- [A "Hinge Moment" for Africa's Health Security](#)

#### Contact

For more information, please contact  
Julia Lukomnik, Strategic Policy Advisor,  
[jlukomnik@soaids.nl](mailto:jlukomnik@soaids.nl)