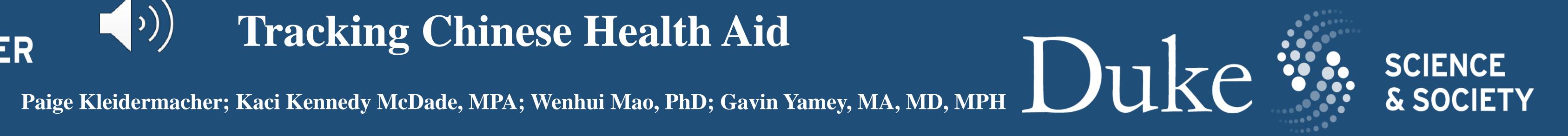


Tracking Chinese Health Aid



Center for Policy Impact in Global Health

Background

Existing Aid Tracking Landscape

- ☐ China is an emerging, non-traditional donor
- ☐ China's aid transparency is behind most other countries, as indicated by the Aid Transparency Index (1)
- ☐ The Organization for Co-operation and Development (OECD) tracks Official Development Assistance (ODA) in the Credit Reporting System (CRS) – China is not an OECD country, so they have no reporting commitment
- ☐ The Institute for Health Metrics and Evaluation (IHME) tracks Developmental Assistance for Health (DAH)
 - o The IHME uses ODA data from the OECD and includes financing from private sources. The IHME tracks aid with a different coding system than the OECD

The Current Estimates for Tracking Health Aid (2)

- ☐ Because China does not officially report aid, there have been several estimation attempts using various methods
- ☐ The current estimates use differ in many ways: definition of health aid, geographic region, time period, and level of disaggregation

Objectives

Why a New Estimate is Needed?

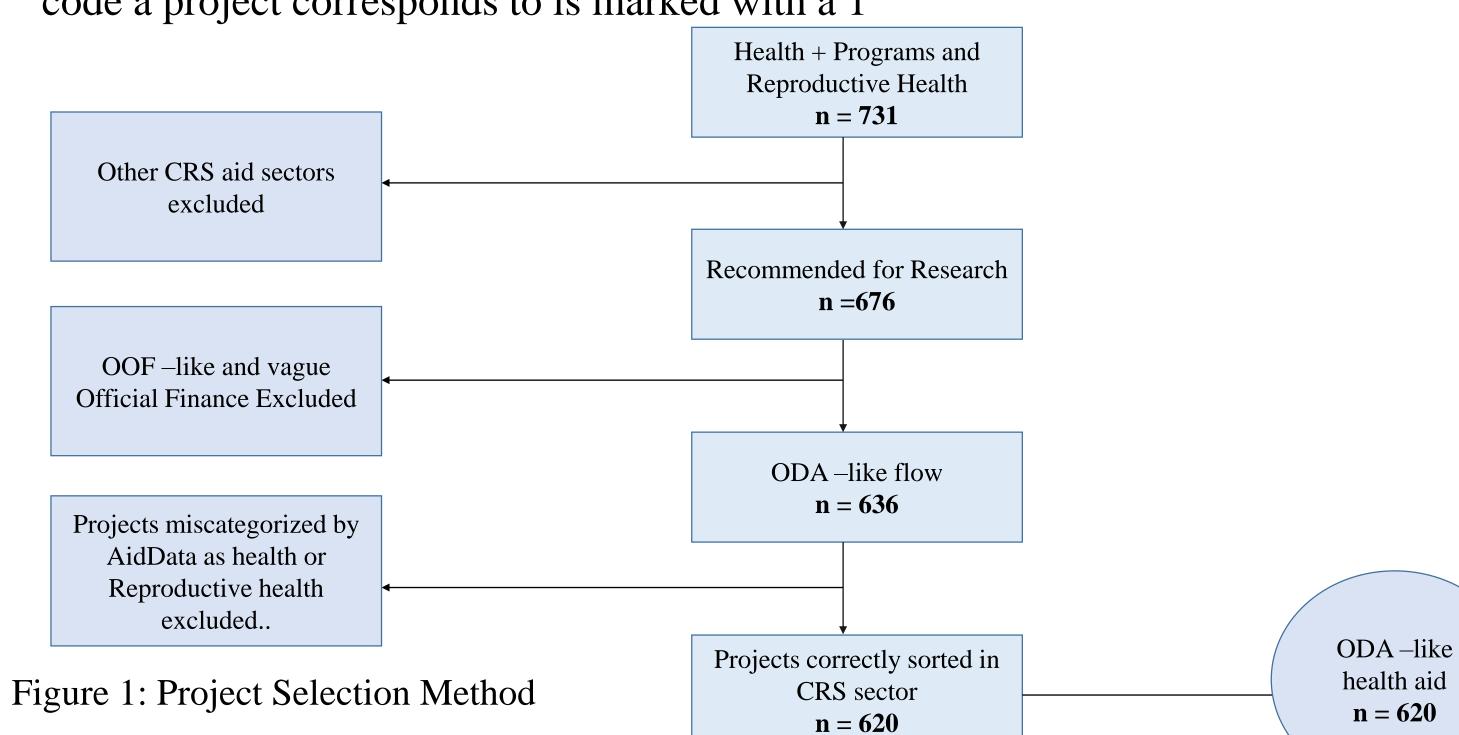
- ☐ This estimate will use global, commonly accepted definitions of aid from the OECD and IHME
- ☐ This estimate will provide more disaggregated accounts of aid and use universal categorization standards from CRS purpose codes and IHME codes
- Adopting common definitions of aid and standards for reporting, will create a more standardized estimate of aid that can be better compared to other donors

Creating the New Estimate

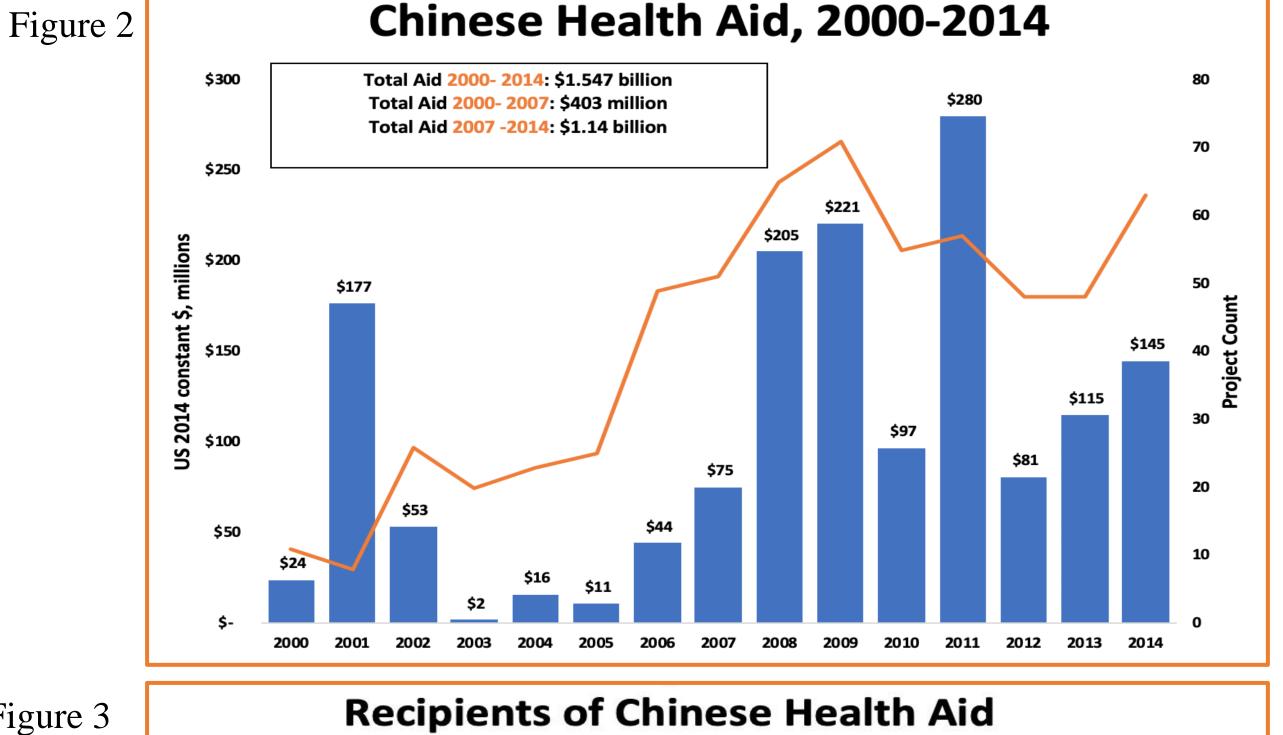
- □Categorize all applicable projects (**Figure 1**) from the AidData Global Chinese Official Finance Dataset (2000-2014, 1.0) by CRS and IHME codes
- ☐ Analyze trends in Chinese health aid and compare with other donors

Methods

□Categorize all 'health' and 'population policies/programs & reproductive health' projects from AidData's Chinese Official Finance Data Set that are applicable (Figure 1) with their corresponding CRS and IHME code. In an excel table, the code a project corresponds to is marked with a 1



Results



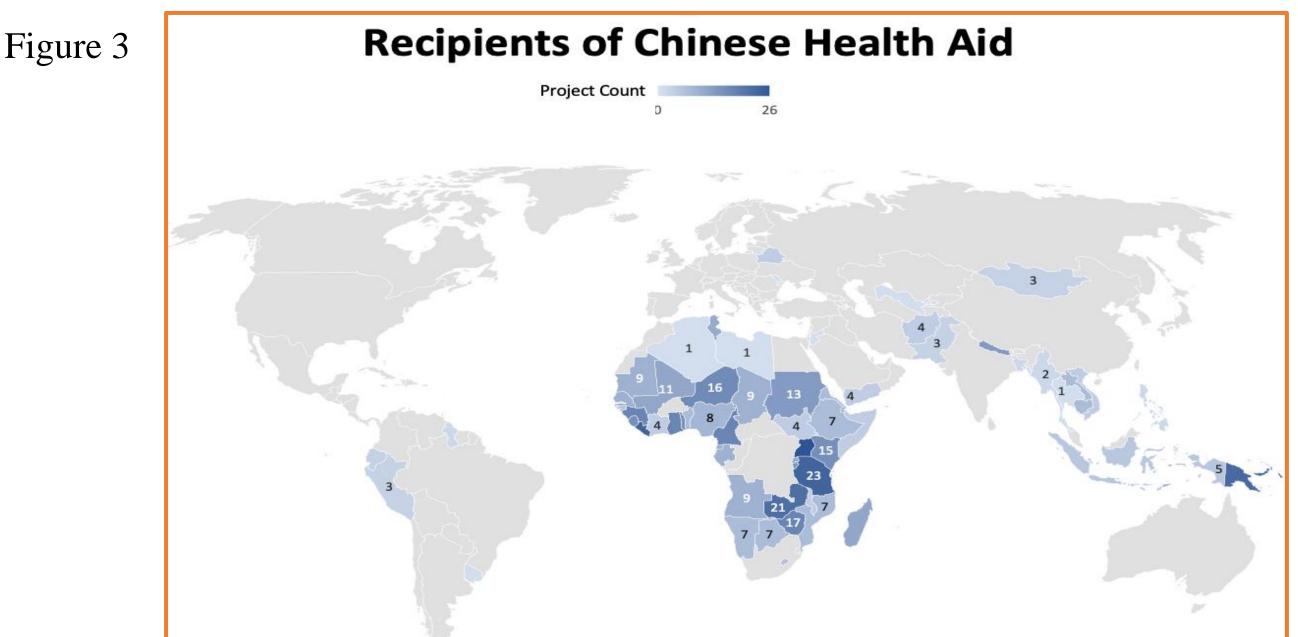
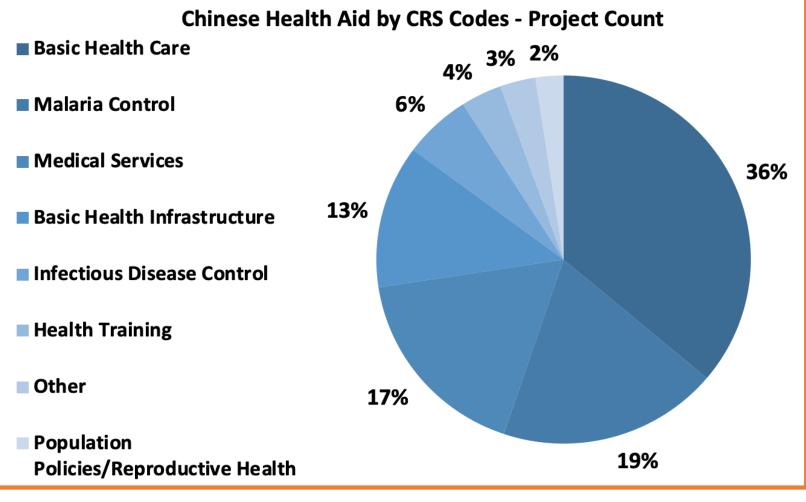


Figure 4 Figure 5



health aid

n = 620

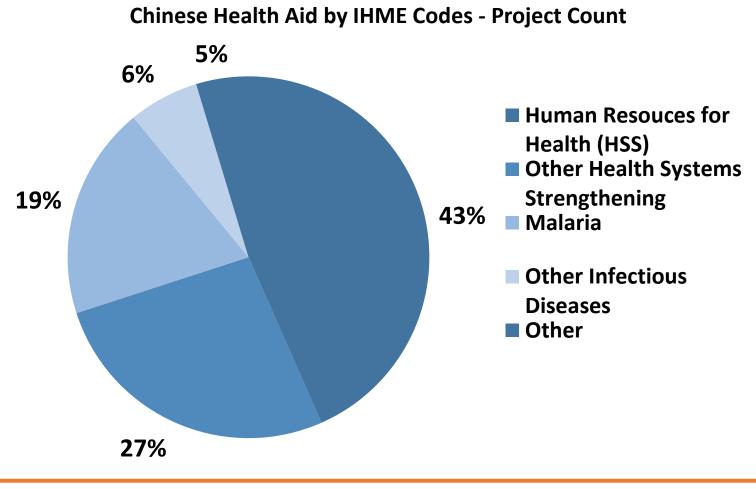
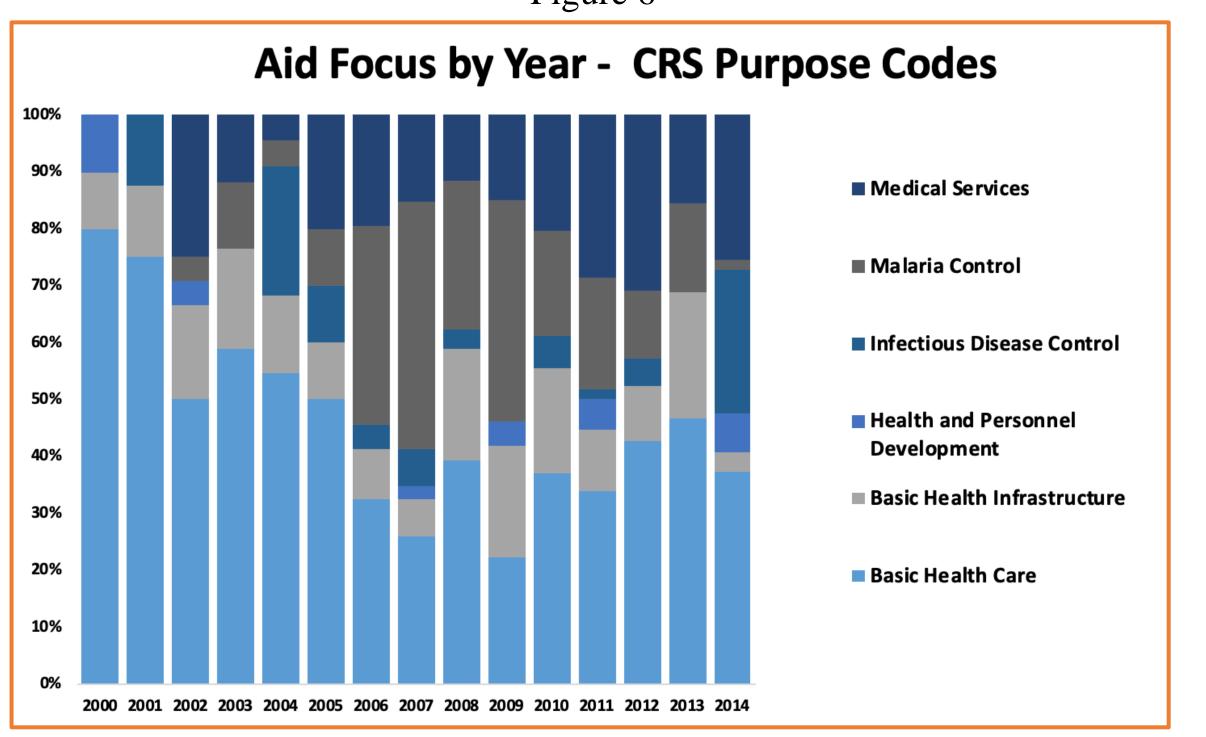


Figure 6



Takeaways and Conclusion

High-Level Overview of Chinese Aid Portfolio

- ☐ From 2000 to 2014 Chinese health aid to developing countries was around \$1.5 billion spread across 620 projects (Figure 2)
 - o 45% of health aid projects (n=277) lacked financial values, so this is likely an underestimate
- □ 20% of all Chinese aid projects are health related (n=620)
- ☐ Among health projects: 53% were grants, 45% were free-standing technical assistance, and 2% were loans
- ☐ Africa received the greatest number of health aid projects (**Figure 3**)
- o Top 5 recipients: Uganda, Tanzania, Liberia, Papua New Guinea and Zambia
- □ Volume of health aid generally increases over time with some fluctuations. Health aid peaked in 2011 and the number of projects peaked in 2009.
- ☐ Projects related to malaria control were highest from 2006 to 2011 and slowly tapered off after reaching a peak in 2007 (Figure 6)

Disaggregated Breakdown of Chinese Health Aid – CRS

- ☐ The largest sub-sectors in terms of financial contribution were: 'medical services' (specialty infrastructure, equipment and services), 'basic health infrastructure', 'basic health care' (medical teams, drugs, etc.) and malaria control
- The greatest number of projects fall under the 'basic health care' purpose code (n=224, 36%) (**Figure 4**)
- o Basic health care includes medical teams with no training elements that provide basic health services or donations of drugs and supplies aimed at "achieving universal health coverage"
- ☐ The second greatest number of projects were focused on malaria control (n=118,

Disaggregated Breakdown of Chinese Health Aid – IHME

- The largest sub-sectors in terms of financial contribution: 'health systems strengthening' (includes infrastructure, human resources equipment, drugs, supplies, etc.) and 'malaria control'
- ☐ The greatest number of projects fall under 'health systems strengthening' (n=434, 70%). 269 or 43% of those projects are 'human resources' oriented (**Figure 5**)
- \square The second greatest number of projects were focused on malaria control (n=118,

Implications

This estimate of Chinese health aid provides some insights into China's global health scope, but almost half of all health aid projects were free-standing technical assistance. Most of these projects (97%) have no financial information available, likely underestimating China's impact.

This estimate, along with prior studies, provides insights on Chinese health aid, but more data is still needed to understand Chinese health aid more thoroughly. Additionally, AidData only provides data until 2014, and China's aid footprint has likely changed since this date.

Our next goal is to compare China's aid portfolio with those of other top donors and to extend the analysis when more recent data becomes available.

References and Acknowledgements

Special thank you to my mentor Kaci Kennedy McDade and the entire CPIGH team. Thank you to the Huang Fellows Program – Dr. Andrew Huang, Professor Buz Waitzkin, and Ron Grunwald, and Dr. William Krezner – for this opportunity and funding.

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