April 24, 2020

President Donald Trump
The White House
1600 Pennsylvania Avenue NW
Washington, D.C. 20500

Dear President Trump:

During this unprecedented global crisis, it is imperative for the U.S. to demonstrate leadership by working with the global community not only to stop the spread of COVID-19, but also to help strengthen the global public health architecture to mitigate a crisis of this magnitude from happening again. Therefore, we, the undersigned organizations, urge the U.S. Administration to continue to fund the World Health Organization (WHO) to end this pandemic.

The United States cannot rid this insidious virus from the country, nor around the world, without WHO.

WHO is the only organization with the technical capacity and global mandate to support the public health response of all countries during this critical time. China first alerted WHO to the possibility of a novel type of coronavirus on December 31, 2019. WHO worked closely with U.S. public health institutions like the U.S. Centers for Disease Control and Prevention (CDC) and the National Institutes of Health (NIH), as well as the global community, to collect, analyze, and disseminate public health information about COVID-19.

These actions equipped countries with advance warning and guided states’ efforts to prepare for the spread of the virus. Just one day after receiving the alert from China, WHO alerted the CDC and by January 10, WHO issued guidance to countries on how to detect, test, and manage potential cases of the novel virus, and best practices to protect health workers delivering care on the frontlines of the response.

As the threat became more understood, WHO continued to engage with the Chinese government to ensure vital public health data from the Wuhan epicenter was conveyed to the global community at rapid pace – unlike during the 2002-2004 SARS epidemic. Through this engagement, China shared genetic sequencing of the novel virus, accelerating the development of vaccine candidates and therapeutics. While their transparency in many areas was still lacking, this paved the way for a WHO technical team to visit Wuhan in late January and again in February to study the disease, gaining knowledge that informed containment and response measures now being implemented by member states globally. The February visit also included scientists from NIH and CDC.

Led by WHO, work began immediately to design a global Research & Development Blueprint. Hundreds of researchers from dozens of countries participated; paving the way for more than 78 vaccine candidates being worked on in dozens of countries, with five in clinical trials. This pace is both essential and unprecedented and would not have been possible without rapid WHO engagement.
At the same time, WHO began essential, rapid work – often done collaboratively with CDC technical experts – to design more than 50 pieces of technical guidance to help countries and communities prepare. These resources have been used by hospitals and frontline staff throughout various cities and states in the United States, as well as all over the world.

Given the lack of scientifically proven and effective treatments, by March 18, WHO launched a study called the “Solidarity Trial” to compare the effectiveness of four potential treatments for COVID-19 against one another. Over 90 countries are now participating in this trial.

During an unprecedented and hugely complex public health crisis like this, there are bound to be challenges. After WHO and the global community turn the tide against COVID-19, WHO has signaled an eagerness to assess where mistakes occurred and how best to strengthen the institution and global public health response capacities of all countries in the future.

It is without question, however, that WHO efforts have been vital to flattening the curve, slowing the virus’ spread, and ultimately saving lives in the U.S. and around the world.

As the virus continues to spread into poorer countries ill equipped to combat the disease, WHO’s role will become even more vital as it supports fragile health systems already struggling to provide basic health interventions to vulnerable populations. In this capacity, WHO’s interventions will not only save lives but also ensure economic stability as the world recovers from this devastating disease.

With a COVID-19 vaccine still at least 12-18 months away, all countries must strengthen efforts to stop the spread of the virus, save lives, and restart the global economy. At a time of the worst public health disaster in the last 100 years, suspending funding to WHO would be like cutting the water supply to a firefighter in the middle of a fire. More than 1,000 organizations and individuals are joining to express their support. We believe it is critical to continue to support WHO’s work, especially as they partner closely with leading U.S. agencies like CDC, NIH, USAID and the Department of State, to keep people safe around the world and here at home.

Sincerely,

1,000 Days
Access Challenge
Action Against Hunger
Action on Smoking and Health
Advancing Synergy
Advocates for Youth
Alliance for Surgery and Anesthesia Presence (ASAP)
America’s Voice
American Academy of Pediatrics
American College of Nurse-Midwives
American College of Obstetricians and Gynecologists
American Jewish World Service
AMERICAN LEPROSY MISSIONS
American Public Health Association
American Society for Clinical Pathology
American Society of Tropical Medicine and Hygiene
Amref Health Africa
Milwaukee Global Health Consortium
MPact Global Action for Gay Men’s Health and Rights
National Advocacy Center of the Sisters of the Good Shepherd
National Association of Pediatric Nurse Practitioners
National Birth Equity Collaborative
National League for Nursing
National Partnership for Women & Families
NC Relief Collective
Newborn Foundation
Nothing But Nets
NTI | bio
Nurses Who Vaccinate
Oxfam America
PAI
PAI Life Sciences, Inc.
Partners in Health
Partners Worldwide
PATH
Pathfinder International
Physicians for Human Rights
Physicians for Peace
Plan International USA
Planet Aid, Inc.
Planned Parenthood Federation of America
Population Connection Action Fund
Population Council
Population Institute
Population Services International (PSI)
Presbyterian Church USA
Project HOPE
Refugees International
RESULTS
RESULTS Oak Ridge
RESULTS-Asheville, NC
ReSurge International
SANIPLAN
Seed Global Health
SHARE Foundation
Shot@Life
Sister of the Good Shepherd
Sisters of Notre Dame de Namur USA
SNPhA – Student National Pharmaceutical Association
Society for Healthcare Epidemiology of America
Sojourners
Student National Pharmaceutical Association
Sustainable Sciences Institute
Sustainable Sciences Institute
Tacoma RESULTS
TB Alliance
The Conrad N. Hilton Foundation
The Episcopal Church
The G4 Alliance
The Gerontological Society of America
The Grandmother Project
The Hunger Project
The Mauricio Aquino Foundation Corporation
The United Methodist Church - General Board of Church and Society
TogetHER for Health
Triangle Global Health Consortium
Trust for America's Health
U.S. People Living With HIV Caucus
Union for Reform Judaism
Unitarian Universalist Association
United Church of Christ, Justice and Witness Ministries
United Nations Association of the USA
EngenderHealth
United Nations Foundation
United States People living with HIV Caucus
University of Washington Department of Global Health
Washington Global Health Alliance
Weaving Earth
West Central Initiative
What to Expect Project
White Ribbon Alliance
Women Deliver
Women in Global Health
WomenStrong International
World Education, Inc.
World Medical Healthcare Project
World Vision US

**International Organizations:**
Arbutus Medical, Canada
AIHMS-Global, India

Karika Ageing and HIV/AIDS Programme, Kenya
Israeli Association of Public Health, Israel
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The George Institute for Global Health, United Kingdom, The Fred Hollows Foundation, Australia Asia Pacific Network of People Living with HIV (APN+), Thailand MEDIBETH GLOBAL HEALTH CENTRE, OSOGBO, Nigeria Sukaar Welfare Organization-Pakistan, Pakistan EANNASO, Tanzania Connected Advocacy for Empowerment and Youth Development Initiative, Nigeria IMRO, Rwanda Youth Nexus, Bangladesh, USA Uhuru Community Development Project (UCDP), Kenya Uganda NCD Alliance, Uganda Shanduko Yeupenyu Child Care, Zimbabwe Blood Patients protection Council, India World Action Fund, Uganda SCI Foundation, United Kingdom, Organisation pour Développement Inclusif au Niger (ODI NIGER), Niger Institute for Tropical Medicine, Belgium VIKASH-SAMUKHYA, India Interagency Coalition on AIDS and Development (ICAD), Canada Integrated Management for Health services, Rwanda NGO- Ayandeh Sazan Fardaaye javanaan, Iran African Centre for Global Health & Social Transformation (ACHEST), Uganda Bimmed Medical Foundation Inc., Nigeria Friends of the Global Fund Europe, France Medical IMPACT, Mexico Nigerian Women Agro Allied Farmers Association, Nigeria Bestway Initiative for Health, Education and Self-sufficiency, Nigeria Foundation for African Research and Development (FARD), Ghana Bezev, Germany NCD Child, Canada RESULTS UK, United Kingdom World Vision India Our Lady of Charity of the Good Shepherd Sisters, Canada Union des Amis Socio Culturels d’Action en Development (UNASCAD), Haiti TB Europe Coalition, Netherlands SAVATHA FOUNDATION GOOD NEWS CHARITABLE TRUSTS, India Newlands west Baptist Church, South Africa CHEN - patient fertility association, Israel NGO Republic Information Education Center "INTILISH", Uzbekistan Family Planning Association of India, India Center for Health Studies, Albania Global Health Alliance Australia, Australia

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Christina Greenaway, McGill University, Canada
Claudia Kleinman, McGill University, Canada
David Thomas, McGill University, Canada
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Kathleen Leppig, USA
Kathleen Webster, USA
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Secretary of Health and Human Services, the Honorable Alex Azar
Speaker of the House of Representatives, the Honorable Nancy Pelosi
Senate Majority Leader, the Honorable Mitch McConnell
House Minority Leader, the Honorable Kevin McCarthy
Senate Minority Leader, the Honorable Charles Schumer