

# The advent of Trump: Unfreezing Global Health: Scenarios and Strategies

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On 20 Jan 2025, Donald Trump:

- [revoked](#) the Biden revocation of Trump's 2020 notice of withdrawal from WHO and ordered US officials to cease all cooperation with WHO and to cut off US financial transfers to WHO ([\\$643m or 16% of base segment in 2023](#)<sup>1</sup>). In the same order he announced plans to set up alternative structures to replace WHO.
- [announced](#) the US withdrawal from "withdrawal from any agreement, pact, accord, or similar commitment made under the United Nations Framework Convention on Climate Change".
- [announced](#) a "90-day pause in United States foreign development assistance". Health programs affected include PEPFAR (\$7b in 2023), polio eradication (\$160m in 2023), Gavi (\$400m in 2023) and the Global Fund (\$2b in 2023).

The advent of Trump is a shake-up, an unfreezing of established institutions, norms and global relationships. It is both a window of opportunity for progressive forces, but also a possible tipping point towards disaster, including a deepening health crisis, runaway global heating and devastating conflict.

## Coloniality in global health

The antecedents of WHO were created by, and to serve the interests of, the colonial powers (UK, Europe and the USA). Their colonial origins leave traces in the norms and practices of WHO (eg the IHRs) and in the attitudes that the Western powers bring to WHO.

Western governments, led by the US, have sought to hobble WHO since the early 1980s when Western control of WHO was challenged by the influx of newly decolonised countries from the global South into the World Health Assembly.

This project, to hobble WHO, was motivated by decisions taken in the WHA which the Western governments, the USA in particular, didn't like. These included the essential medicines list, ethical marketing of pharmaceuticals, the Code of Practice on the Marketing of Breastmilk Substitutes, the rational prescribing initiative, and the Commission on Innovation, Intellectual Property and Public Health.

The hobbling of WHO has been effected by imposing a freeze on assessed contributions (ACs), insisting on tight earmarking of voluntary contributions (VCs), and shifting as many programs as possible out of WHO into 'multistakeholder public private partnerships' (the ACT Accelerator being the most recent).

The impact of these policies on global health is mediated through:

- Inadequate total funding with consequences at the country office level and in the reach of various technical programs;
- Underfunding of programs seen as antipathetic to US corporate interests (food, pharma, chemicals, etc);

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1. 'Base segment' does not include contributions to polio eradication initiative, emergency appeals, or special partnerships.

- Transaction cost burden on WHO Secretariat associated with seeking, managing and acquitting grants from hundreds of donors, many quite small;
- Fragmentation and incoherence across the Secretariat as departments and units compete for donor attention (which may involve producing publications, organising conferences, developing resolutions and launching new programs);
- Fragmentation and inefficiency in development assistance for health globally associated with the proliferation of special purpose multistakeholder public private partnerships (MSPPPs) adding to the transaction costs borne by governments, of relating to various different agencies, plus the inefficiencies of vertical siloed programs (with duplications and gaps), and local brain drain to donor organisations.

The hobbling of WHO was part of a wider attack on multilateralism. The same methods of control, freezing flexible funding and the creation of MSPPPs, have been applied to the UN and other specialised agencies. The threat to transnational capitalism represented by the 1974 New International Economic Order illustrates why the Western powers needed to hobble multilateralism.

## Why the Trump withdrawal?

Corporate complaints about various WHA resolutions remains a continuing irritant for the US. Such resolutions have variously sought to reduce the price of drugs, weaken the hold of extreme IP protection, reform food systems, or regulate environmental chemicals.

However, there are factors arising from Trump's relationship with his MAGA constituency which are also driving the withdrawal from WHO and Paris and the attacks on the UN. Conspiracy theories regarding the threat of 'world government' flared during Covid, across the Trump constituency. The prospect that other countries, operating in various intergovernmental forums, might impose limits on American sovereignty offends the myth of American exceptionalism (notwithstanding the global domination of the rest of the world by US imperialism).

Trump's MAGA constituency (correctly) blames globalisation for the hollowing out of US manufacturing. Globalisation, the liberalisation of trade and investment, was effected through a carefully constructed 'rules-based order' centred on the various WTO agreements and rationalised through the Washington Consensus. The 'rules-based order' was erected under the flag of multilateralism.

Trump's undermining of the globalist 'rules-based order' goes back to 2019 when he disabled the WTO Appellate Body by refusing to agree to new appointments. This was to prevent the Appellate Body from confirming that the US's use of the so-called 'security exception' to justify trade restrictions against China was illegal.

The weakening of multilateralism and affirming American exceptionalism is core to Trump's program.

Denouncing WHO, the IPCC, or the UN may offer a sense of empowerment to people who have been disempowered by the corporate globalisers. Denigrating other peoples, including through deeply racist tropes, boosts the self-worth of the Trump constituency whose alienation is a direct consequence of the brutality of US capitalism and corporate globalisation.

China figures prominently in the Trump narrative. China is seen as challenging US superiority; its PPP GDP already exceeds that of the US although it has significantly fewer foreign military bases (one base in Djibouti compared with 800 US bases in 70 countries). Denigrating China in relation to Covid plays to the racism, disempowerment and alienation of the Trump constituency.

However, the Trump program is also targetting USAID which has led the field in disease-focused health assistance, through which it has helped to hold off any structural reform which might address the upstream drivers which reproduce the disproportionate morbidities of the global South. The attack on USAID will remove a powerful agency which has sought to minimise and distract from these upstream drivers.

The continuing global disparities in the SDG health indicators jeopardises the legitimacy of the global regime in which they arise; certainly from the perspective of the global South. The removal of USAID removes a curtain which has up until now obscured the colonial disregard for the health of people in the global South.

## Immediate impact of US withdrawal

WHO has already imposed restrictions on travel, and a pause on new hires. There will probably be retrenchments from some programs in Geneva and in some regional and country offices.

Some other HICs (perhaps Norway, perhaps France) may agree to modest increases in their voluntary contributions.

China may agree to a modest increase in assessed contributions but WHO remains subject to disproportionate Western influence and China gets more diplomatic bang for its bilateral assistance spending (such as through the Belt and Road Initiative) than from increasing its contribution to WHO.

The governing bodies will need to urgently agree on guidelines for re-prioritisation of programs and country support. Any cuts will have health consequences.

## Transnational capital will fight back

Transnational capital may not accept Trump's dismantling of neoliberal globalisation. Led by fossils, food and pharma, there is likely to be increased pressure from transnational corporates on Trump administration to protect them from a new NIEO sponsored by the BRICS and from a rise in political democracy. This may require new military adventures.

Transnational capital will also seek to shore up pro-globalist governments in Europe and in the global South, including support for fascism and militarism 'as appropriate'.

This scenario is likely to be associated with a rise of fascism, racism, casteism, and patriarchy; with a weakening of the institutions and norms of liberal democracy; and with increased conflict, domestic and international, arising from the empowerment of domestic capital in many countries.

## Domestic opposition in the US could lead to a Trump reversal

There are other interest groups in the US which are also pushing for a reversal of at least some of Trump's reforms. These include:

- Imperial officials and commentators who argue that the withdrawal of the US will give WHO space to adopt policies prejudicial to the interests of US imperialism (such as new policies on ultraprocessed foods); perhaps facilitated by the loosening of the Western alliance within the WHO governing bodies;
- Imperial officials and commentators who argue that the damage to US standing in the global South will empower China, the G77 and the BRICS to push through policies such as dedollarisation and the new NIEO;

- US global health think tanks and academics are arguing for return to WHO and for a continuation of development assistance particularly where they have been primary beneficiaries of boomerang foreign aid ([46% of US assessed contributions](#) to WHO);
- US based transnational pharma may argue that the US withdrawal has jeopardised high level IP protection and threatens to weaken their profitability (and the rent flowing to big finance which owns big pharma);
- Gradual disillusioning of the MAGA constituency, with inflation and high interest rates due to tariffs, may lead to a rethink in the White House.

The impact of these forces, if they prevail, would be a return to the status quo. Alternatively, they precipitate further conflict and chaos in the US system.

## WHO could collapse

Trump's attacks on WHO could succeed, leading to slashing of jobs, no increased funding, further criticism, and further funding sanctions. The US plan for 'alternatives' could succeed, leading to accelerated transfer of WHO programs to MSPPPs.

The consequences would include a further proliferation of vertical programs, marketised health care, individual-centred prevention and further neglect of the structural determination of health.

## Global governance could move toward more progressive positions

A more hopeful scenario might include:

- Growth in influence of progressive social and political movements, nationally and globally, alarmed by the Trump threat, demanding action for equity, sustainability and a new NIEO;
- A rising movement for meaningful democracy within countries to counter the diplomatic and corporate pressures to preserve the privileges of capital;
- Remaining countries in Paris adopt more radical mitigation policies (eg carbon border adjustment mechanisms and action on Tier 3 emissions) and increased support for adaptation in LMICs;
- BRICS countries led by China, take advantage of US isolationism to proceed with TNC regulation, tax reform and dedollarisation.

## WHO could survive and even thrive

This more hopeful scenario might be associated with positive trends in relation to WHO and global health:

- Increased global understanding of the threats to global health, arising from America-first imperialism, contributes to growth in the wider phalanx of progressive social and political movements;
- Funding to WHO is boosted from other sources (Europe, BRICS, philanthropy);
- Removal of the US yoke enables WHO to take stronger positions on pharmaceuticals (IP, prices, distributed production), food systems, and global health security;
- Wider appreciation of WHO and democratised global health governance contributes to stronger movements for equity, sustainability, and inclusion.

## Strategic campaigning

The rise of Trump has unfrozen the institutions and norms which have sustained transnational neoliberal capitalism over the last forty years. We are now in a period of

heightened geopolitical fluidity. It is a complex adaptive system which could return to its previous stability, or which could transition to a new and more hopeful geopolitical regime (or to a new and worse regime).

What are the strategic directions which might drive global health and global political economy to better outcomes including effective action on climate change?

- In global health, defend WHO; make it work better;
- Continue to build pressure for more equitable and healthy policies, converging with other progressive social and political movements and working with aligned governments;
- Promote action on climate change including meaningful support for adaptation in the global South;
- Promote anti-imperialist economic policies, including: a new NIEO, dedollarisation, tax reform, regulation of TNCs, and a new approach to international debt;
- Draw leverage from Trump's nationalist economic policies to challenge 'free trade, free flow of investment' globalisation;
- Defend democracy: resist fascism, racism, casteism, sexism and division;
- Build support for ecosocialism.