

U.S. Withdrawal from UNESCO Threatens Health and Educational Progress in Sub-Saharan Africa

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The United States' recent decision to withdraw from UNESCO [1, 2], effective December 31, 2026, threatens to undermine critical progress in health, education, and science in sub-Saharan Africa. While the U.S. State Department frames its withdrawal as a response to UNESCO's "divisive social and cultural causes" and an "ideological agenda" at odds with its "America First" policy, the consequences of this multilateral retreat will be felt most acutely by the world's most vulnerable populations. The U.S. also cited the admission of the "State of Palestine" as a contributing factor. However, UNESCO's Director-General, Audrey Azoulay, counters that the reasons for withdrawal are outdated and that political tensions have receded. She emphasizes UNESCO's universally acclaimed work on Holocaust education and fighting antisemitism, which is supported by major American and Jewish organizations. This context is particularly critical for sub-Saharan Africa, where UNESCO's mandate translates into foundational support for nation-building and human development, often operating in environments where governmental capacity is limited.

Although Director-General Azoulay affirms that UNESCO is now on a more solid financial footing, with the U.S. contribution representing a smaller share of the budget and voluntary contributions having doubled since 2018, the impact extends far beyond finances. The U.S. withdrawal represents a retreat from collaborative global problem-solving. For sub-Saharan Africa, this disengagement is alarming. UNESCO's work is essential in areas that are fundamental determinants of public health, including major programs to support girls' education and promote science and culture in conflict settings. For instance, UNESCO's teacher training programs directly address the severe shortage of qualified educators, a key barrier to health literacy in countries such as Uganda, Angola, and Ethiopia. Its initiatives in STEM education are essential for training the next generation of local healthcare professionals and researchers. Furthermore, the organization leads vital comprehensive sexuality education, including HIV prevention, and its scientific programs support water security and biodiversity, which are indispensable for community health and preventing zoonotic diseases.

These initiatives, which build human capital and social resilience, are essential for long-term health and development outcomes. The loss of U.S. partnership, expertise, and

leadership, however financially mitigated, creates a void that weakens the international cooperation necessary to address the profound educational and scientific challenges facing the continent. The global health community should see the U.S. withdrawal not as a distant political dispute, but as a direct setback for health equity and human development in Africa. We urge a reconsideration of this decision.

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