

The Future of Healthcare: Prevention, Investment & System Transformation

*Building Health, Wealth, and
Sustainable Systems*

AL
ON

ASK A DOCTOR

APPOINTMENT
REQUEST

HEALTHY LIFESTYLE
PREVENTION



GLOBAL HEALTH



PRESCRIPTION



HEALTH CHECK UP



DOCTOR ON CALL

HEALTH CARE
SYSTEM



ONLINE
MEDICAL SERVICES



WEIGHT
MANAGEMENT

**Advancing Access, Quality, and
Innovation in Global Health**



Foreword

The Global Health Crisis – A System at Breaking Point
Healthcare stands at one of the most defining crossroads in modern history.

Around the world, health systems designed for the challenges of the 20th century are now struggling to cope with the realities of the 21st. Demand is rising faster than capacity. Costs are accelerating beyond sustainability. Workforce shortages are deepening. Most critically, patient outcomes are not improving at the pace required. At the heart of the crisis lies a structural imbalance: healthcare systems overwhelmingly prioritise the treatment of illness rather than the prevention of it. Today, an estimated 97% of healthcare expenditure is directed toward managing disease leaving only a fraction invested in keeping people well.

The consequences are visible everywhere.

Waiting lists continue to grow. Health professionals are leaving the workforce faster than they can be replaced. Chronic diseases such as diabetes, cardiovascular illness, respiratory conditions, and dementia are rising sharply placing long-term strain on services and public finances alike.

This is not only a health crisis it is an economic one. Poor population health is now directly linked to reduced productivity, workforce inactivity, and slowing economic growth. Nations are spending more while achieving less, caught in an unsustainable cycle of rising treatment costs and worsening outcomes.

The COVID-19 pandemic exposed these systemic fragilities in stark terms. It demonstrated how quickly health shocks translate into economic shocks. It revealed workforce vulnerabilities, supply chain weaknesses, and inequalities in access to care. Most importantly, it reinforced a critical lesson: health security underpins economic security.

Alongside this, new pressures are emerging.

Climate change is intensifying health risks through air pollution, extreme weather, food insecurity, displacement, and mental health impacts. Ageing populations are increasing demand for long-term care. Workforce shortages threaten service continuity. Meanwhile, billions of people globally still lack access to even basic healthcare services.

Taken together, these forces signal not a temporary disruption—but a structural transformation.

Yet within this crisis lies unprecedented opportunity.

Advances in technology, data, genomics, digital health, and community-based care models are enabling healthcare to move beyond hospital walls. Prevention, early intervention, and population health approaches are gaining momentum. New financing mechanisms are attracting institutional capital into health infrastructure and prevention.

The future of healthcare will not be built solely in hospitals—it will be built in communities, homes, schools, and workplaces.

It will be digitally enabled, workforce-supported, prevention-led, and economically aligned.

This moment demands a shift in thinking: from sickness systems to health systems... from cost burdens to investment opportunities... from reactive care to proactive wellbeing.

The following report sets out the scale of the crisis and the scale of the opportunity to transform global health for generations to come.



Radical Health Festival - Finland, Gareth Presch on Future of Healthcare

Executive Summary

Global healthcare is at a tipping point. Today, 97% of spending is directed toward treating illness rather than preventing it, leaving systems overwhelmed, waiting lists long, staff overworked, and millions without access to basic care. Chronic disease, ageing populations, and climate-driven health risks are intensifying these pressures.

The economic impact is profound. Lost productivity among working-age populations in the UK alone costs ~£150bn annually, with another £70bn in government expenditure. COVID-19 confirmed the fundamental truth: better health strengthens economies—health is wealth.

This crisis also presents an unprecedented opportunity. Investing in prevention, early intervention, and community-led care can improve patient outcomes, strengthen health systems, create millions of jobs, and generate sustainable economic growth.

The global health and wellness market is enormous: \$8T+ for healthcare, \$4.4T for wellness, serving 8 billion people today and projected to reach 10 billion by 2050. Emerging technologies—AI diagnostics, genomics, digital platforms combined with innovative financing, enable scalable prevention models.

Platforms such as the WHIS and the Global Social Prescribing Alliance demonstrate how evidence-based, non-clinical interventions can be deployed globally, systematically, and sustainably. Prevention is no longer an adjunct; it is central to resilient health systems and thriving communities.

“We cannot continue spending almost all our resources treating illness while underinvesting in what keeps people well. Prevention is the foundation of sustainable health systems, resilient economies, and thriving communities. Scaling community-led, digitally enabled, and workforce-supported prevention models globally is both our responsibility and opportunity.”

By Gareth Presch, CEO, World Health Innovation Summit & Global Social Prescribing Alliance

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The Burning Platform

Global healthcare systems are under unprecedented pressure. Today, approximately 97% of healthcare expenditure is spent managing disease rather than preventing it. This reactive model is proving unsustainable—financially, operationally, and socially.

Health systems are experiencing:

- Record waiting lists
- Workforce burnout and attrition
- Rising chronic disease prevalence
- Escalating treatment costs
- Deepening health inequalities

The evidence is clear: treating illness alone is not improving population health outcomes.

Economic Impact: Health as a Growth Driver

Ill health is now a macroeconomic risk.

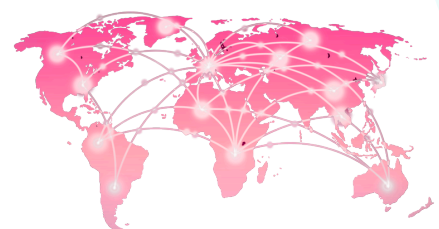
Estimates suggest that lost output among working-age populations due to ill health costs the UK economy ~£150bn annually (7% of GDP), with an additional ~£70bn in fiscal impact through lost tax revenue, welfare payments, and healthcare costs.

This reinforces a fundamental principle:

Better Health = Stronger Economy

Health = Wealth

Investing in human capital through prevention is now an economic imperative, not just a health priority.



Market Size & Institutional Opportunity

Healthcare represents one of the largest global investment markets.

- Global population: 8 billion → 10 billion by 2050
- Health sector value: \$8T+
- Wellness economy: \$4.4T

The scale of demand creates institutional opportunities across infrastructure, workforce, technology, and prevention systems. Healthcare offers long-term, diversified, impact-aligned investment potential.

Workforce Crisis

System sustainability is constrained by workforce capacity.

Key global indicators:

- 10 million health worker shortfall by 2030
- 20% of U.S. health workers left roles post-pandemic
- 83 countries below minimum workforce thresholds
- Severe physician shortages across sub-Saharan Africa
- Ageing nursing workforce in major economies

The pandemic compounded the crisis, with at least 115,000 health workers lost to COVID-19 globally.

Without workforce expansion and new roles in prevention, systems cannot meet future demand.

Rising Disease Burden

Demand pressures are accelerating:

- Dementia prevalence projected to rise from 57M (2019) to 153M by 2050
- Chronic disease rates increasing globally
- Ageing populations expanding long-term care needs

This trajectory will significantly increase fiscal and service pressures unless prevention is prioritised.

Climate & Health Convergence

Climate & Health Convergence

Health and environmental risk are now interlinked.

- Fossil fuel air pollution generated \$2.9T in health and economic costs
- Environmental factors cause ~13M deaths annually
- Climate displacement, food insecurity, and extreme weather are increasing system strain

Climate resilience is therefore a healthcare investment priority not a separate agenda.

Access Inequality

Up to 3.5 billion people lack access to essential health services, with nearly 100 million pushed into extreme poverty annually due to out-of-pocket healthcare costs.

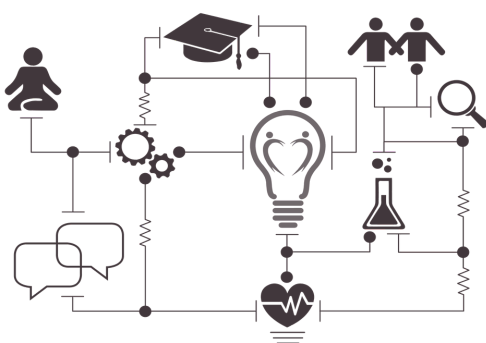
This represents both a global justice issue and a major prevention investment opportunity.

Lessons from COVID-19

The pandemic demonstrated that:

- Prevention is more cost-effective than treatment
- Public-private partnerships accelerate innovation
- Diagnostics and vaccines can scale rapidly
- Community health infrastructure is critical

Health security is economic security.



The Prevention Investment Shift

Redirecting a fraction of disease spend toward prevention could:

- Reduce hospital admissions
- Improve workforce productivity
- Extend healthy life expectancy
- Lower long-term system costs

Priority prevention investment areas include:

- Social prescribing
- Movement health
- Behaviour change platforms
- Early diagnostics
- Community health infrastructure
- Digital therapeutics

Global platforms such as the **Global Social Prescribing Alliance** are enabling adoption of non-clinical, community-based prevention models at scale.

Institutional Capital Deployment

Healthcare transformation is creating new asset classes:

- **Human Capital Infrastructure**

Prevention workforce, community health workers, rehabilitation specialists.

- **Intellectual Capital**

AI diagnostics, genomics, digital platforms, data systems.

- **Trust Infrastructure**

Primary care networks, community partnerships, prevention ecosystems.

Financing models include:

- **Blended finance**
- **Social Impact Bonds**
- **Outcomes-based contracting**
- **Public-private partnerships**

These align financial return with measurable health outcomes.

Leadership Perspective

“We cannot continue to spend the vast majority of our resources treating illness while underinvesting in the conditions that keep people well. Prevention is not an adjunct to healthcare it is the foundation of sustainable health systems, resilient economies, and thriving communities.

The future of healthcare lies in scaling community-led, digitally enabled, and workforce-supported prevention models globally. This is both our greatest responsibility and our greatest investment opportunity.”

**Gareth Presch, CEO, World Health Innovation Summit;
CEO, Global Social Prescribing Alliance**

A System at an Inflection Point

We face a structural choice:

Continue allocating ~97% of spend to disease management or invest upstream in prevention, resilience, and wellbeing.

Investing in prevention will:

- Strengthen health systems
- Improve patient outcomes
- Reduce long-term expenditure
- Create millions of new jobs
- Drive inclusive economic growth

Healthcare is now one of the defining institutional investment opportunities of the 21st century.

Conclusion & Call to Action

Prevention is no longer just good policy it is a multi-sector, investable infrastructure opportunity.

Investors, governments, and philanthropists can now participate in:

- Reducing long-term healthcare expenditure.
- Reactivating workforces.
- Generating sustainable economic and social impact.
- Advancing health equity, climate resilience, and wellbeing at scale.

The launch of ISO standards, GSPA's global adoption, WHS as a capital vehicle, and WHIS Cities as delivery engines signal that prevention is ready for investment as a structured asset class.

Join us in building the future of healthcare where health creates wealth, and wealth creates healthier societies.



References & Further Reading

References & Further Reading

- Global Social Prescribing Alliance – Global Playbook for Social Prescribing
- Global Social Prescribing Alliance – Artificial Intelligence in Digital Health & Social Prescribing (2026)
- Global Social Prescribing Alliance – Workforce Development & Opportunities (2026)
- Global Social Prescribing Alliance – Prevention as an Investable Asset Class: Building Health, Wealth & Sustainable Systems (2026)
- Global Social Prescribing Alliance – Student Movement Playbook (2026)

Additional data sources referenced:

- World Health Organization
- Deloitte
- Global Wellness Institute
- Project HOPE

Partnerships & Ecosystem

Building strong collaborations with key stakeholders to enhance healthcare quality, research, and innovation.

Collaborative Network

Government & Regulators:

Ministry of Health programs,
public health initiatives

Research & Clinical Partners

Clinical trials, new
treatment development

Academic Partners:

Joint research, student
training programs

Investors & Innovation

Funding for digital health
platforms and pilot projects

Strategic Impact

Collaboration strengthened service quality, expanded research capabilities, and improved organizational resilience, enabling us to deliver better patient outcomes and support long-term healthcare innovation.

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Contact Information

Website

www.whis.world

Email

info@whis.world

Contact

gareth@whis.world

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