

World Health Organization (WHO)

Key features

Type of organisation: United Nations specialized agency

Charter/Constitution: Constitution of the WHO,
<http://apps.who.int/gb/bd/PDF/bd47/EN/constitution-en.pdf?ua=1>

Membership:

- Nature: Representatives of members
- Number: 194 Member States and 2 Associate Members

Year of establishment: 1948

Headquarters: Geneva, Switzerland

Regional offices: Brazzaville (Congo), Washington, DC (United States), Cairo (Egypt), Copenhagen (Denmark), New Delhi (India), Manila (Philippines).

Secretariat staff: 7 916 (Dec. 2016)

Total budget: US\$ 4421.5 million (budget for the financial period 2018-2019)

Type of activity: development of normative instruments, policy dialogue, data collection and analysis, information exchange, , research and technical co-operation

Sectors of activity: Inter alia: health systems and universal health care, promoting health through the life-course, non-communicable diseases, communicable diseases, neglected diseases, preparedness, surveillance and response, and health emergencies

Webpage: www.who.int

Members

Afghanistan, Albania, Algeria, Andorra, Angola, Antigua and Barbuda, Argentina, Armenia, Australia, Austria, Azerbaijan, Bahamas, Bahrain, Bangladesh, Barbados, Belarus, Belgium, Belize, Benin, Bhutan, Bolivia, Bosnia and Herzegovina, Botswana, Brazil, Brunei Darussalam, Bulgaria, Burkina Faso, Burundi, Cabo Verde, Cambodia, Cameroon, Canada, Central African Republic, Chad, Chile, China (People's Republic of), Colombia, Comoros, Congo, Cook Islands, Costa Rica, Côte d'Ivoire, Croatia, Cuba, Cyprus, Czech Republic, Democratic People's Republic of Korea, Democratic Republic of the Congo, Denmark, Djibouti, Dominica, Dominican Republic, Ecuador, Egypt, El Salvador, Equatorial Guinea, Eritrea, Estonia, Ethiopia, Fiji, Finland, Former Yugoslav Republic of Macedonia, France, Gabon, Gambia, Georgia, Germany, Ghana, Greece, Grenada, Guatemala, Guinea, Guinea-Bissau, Guyana, Haiti, Honduras, Hungary, Iceland, India, Indonesia, Iran, Iraq, Ireland, Israel, Italy, Jamaica, Japan, Jordan, Kazakhstan, Kenya, Kiribati, Korea, Kuwait, Kyrgyzstan, Lao People's Democratic Republic, Latvia, Lebanon, Lesotho, Liberia, Libya, Lithuania, Luxembourg, Madagascar, Malawi, Malaysia, Maldives, Mali, Malta, Marshall Islands, Mauritania, Mauritius, Mexico, Micronesia, Moldova, Monaco, Mongolia, Montenegro, Morocco, Mozambique, Myanmar, Namibia, Nauru, Nepal, Netherlands, New Zealand, Nicaragua, Niger, Nigeria, Niue, Norway, Oman, Pakistan, Palau, Panama, Papua New Guinea, Paraguay, Peru, Philippines, Poland, Portugal, Qatar, Romania, Russia, Rwanda, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Samoa, San Marino, Sao Tome and Principe, Saudi Arabia, Senegal, Serbia, Seychelles, Sierra Leone, Singapore, Slovakia, Slovenia, Solomon Islands, Somalia, South Africa, South Sudan, Spain, Sri Lanka, Sudan, Suriname, Swaziland, Sweden, Switzerland, Syrian Arab Republic, Tajikistan, Tanzania, Thailand, Timor-Leste, Togo, Tonga, Trinidad and Tobago, Tunisia, Turkey, Turkmenistan, Tuvalu, Uganda, Ukraine, United Arab Emirates, United Kingdom, United States, Uruguay, Uzbekistan, Vanuatu, Venezuela, Viet Nam, Yemen, Zambia, Zimbabwe.

Territories or groups of territories which are not responsible for the conduct of their international relations may be admitted as Associate Members by the Health Assembly upon application made on their behalf by the Member or other authority responsible for their international relations. The WHO has currently two Associate Members: Puerto Rico and Tokelau.

Relationship with non-members

Membership in WHO is open to all States. Members of the United Nations may become members of WHO by signing or otherwise accepting its Constitution in accordance with the provisions of Chapter XIX of WHO Constitution and their constitutional processes. States may otherwise be admitted as Members when their application has been approved by a simple majority vote of the Health Assembly.

Observers

Non-member States and other entities may be invited to attend sessions of the Health Assembly in an observer capacity. Representatives of the United Nations, its specialised agencies, programmes and funds, and other IGOs regularly attend sessions of the Health Assembly in an observer capacity.

Mandate

In accordance with Article 1 of the WHO Constitution, the objective of the WHO is the attainment by all peoples of the highest possible level of health.

IRC processes taking place within the World Health Organization



Categories of legal and policy instruments

	Is it taking place within the IO?	Approximate number
Treaties for ratification by States (excluding the funding one)	√	2
Legally binding decisions	√	2
Recommendations	√	
Political declarations	√	
Model treaties or law		
Production of technical standards		
Non-binding guidance/best practices document	√	

Interactions with other international organisations active in the field

Mechanisms of interaction	Approximate number of IOs involved	Examples
Develop joint instruments	√	
MoU or other agreements	√ 20	The WHO has established formal and informal relations with a significant number of intergovernmental organizations, and engages with non-State actors in accordance with the WHO Framework of Engagement with non-State actors.
Participate in co-ordinating institution	√ 20	
Joint meetings that provide forum for co-ordination	√ 20	
Observe relevant actions of other bodies	√ 20	
Exchange information	√ 20	

WHO history

When diplomats met to form the United Nations in 1945, one of the matters they discussed was setting up a global health organisation under the auspices of the new United Nations. The Constitution of the World Health Organization was signed on 22 July 1946 at the International Health Conference (New York, 19 June-22 July 1946) by the representatives of 61 States. WHO Constitution entered into force on 7 April 1948 – a date that now is celebrated every year as World Health Day. The WHO first priorities were to control the spread of malaria, tuberculosis and sexually transmitted infections, and to improve maternal and child health, nutrition and environmental hygiene.

Source: Updated from OECD (2016), *International Regulatory Co-operation: The Role of International Organisations in Fostering Better Rules of Globalisation*, OECD Publishing, Paris. <http://dx.doi.org/10.1787/9789264244047-en>