A World Health Organization for the 21st Century

- The WHO has played a key role in some of the most important health initiatives of the last three decades
- But at the beginning of the 21st century it is underfunded and operating in a difficult and hostile environment
- Aside from more money and a more enabling environment, greater openness to civil society and internal management reform are necessary if WHO is to regain its position as leader in world health

WHO is an unrivalled source of objective, evidence-based health information and effectively performs global communicable disease surveillance and control. Over the last thirty years it has demonstrated its potential to be an agent for good, helping to devise a list of essential drugs, a code on breastmilk substitutes, a convention on tobacco and the Alma Ata Declaration.

However, starved of core resources due to UN budget cuts, WHO has proved no match for the World Bank which has exerted a greater influence on the public policy decisions that governments make, or the WTO which is able to influence the design and orientation of health care and food security systems through trade rules.

The proliferation of global health initiatives, many of which are unaccountable and strongly influenced by corporate 'partnerships', also undermine WHO's position and mandate. The lack of health leadership at the global level results in Ministries of Health being forced to operate in a circus of multiple and uncoordinated demands from global institutions, donor agencies and international NGOs.

WHO has been poorly led by its governance structures. The World Health Assembly and its Executive Board have weakened WHO's resolve to act as a 'global health conscience' and its mandate to address the social and economic determinants of ill health.

They have also allowed WHO to be part of the proliferation of narrow, technology-focussed disease based programmes;



WHO - up in the clouds? (P Virot/WHO)

failed to protect WHO from undue and inappropriate bilateral influence and political pressure; and ignored the need to ensure a revitalisation of WHO's internal management processes and staff morale.

A strong, effective and more publicly accountable WHO, able to respond to the major global health challenges of the day, is needed. Signs that WHO is returning to the values encapsulated in the Alma-Ata declaration are welcome; but the challenges in a world focussed on technological and market-driven solutions to health problems are great.

What needs to happen Steering the global health ship

- Funding for WHO must be substantially increased, with more proportionately devoted to its core budget with fewer strings attached.
- The fragmentary nature of global health governance requires a greater clarity of roles and mandates. WHO's role should be strengthened at country level and include helping governments co-ordinate global, multilateral, bilateral and international NGO initiatives to improve health.
- WHO's record of acting as the world's health conscience should be revitalised, and governments should not be afraid of creating a rod for their own backs. History shows that change happens when governments and civil society work together under strong WHO leadership - even when it is uncomfortable for powerful interests (see box 12).
- A debate needs to be opened on WHO's key roles in the future to avoid mission-creep and to develop consensus within and beyond the organization.

An organization of the people not just of governments

- The democratization of the institutions of global governance is high on the political agenda. Today's complex global problems need increasingly wide representation, especially from civil society actors. WHO should not be exempt from the 'democracy wave'.
- The Civil Society Initiative at WHO should be expanded. Southern civil society organizations in particular need to be given a more direct voice. Care must be taken to differentiate public-interest organizations from those acting as a front for commercial interests.
- The politicised nature of the WHO leadership elections should be tempered: possible solutions include a wider franchise, perhaps of international public health experts and civil society organizations. Candidates should be required to publish a manifesto and debate their vision for the organization publicly.

Improving the Organization

- Radical changes are needed within the organization a wider variety of health professionals, more social scientists, economists, pharmacists, lawyers, and public policy specialists, more representation from developing countries, stronger regional offices run by experienced professionals, and greater transparency and accountability leading to a more collaborative way of working.
- Proof of effective leadership and management should be a criterion for staff recruitment, especially at senior levels. There should be a special emphasis on learning from good practice and sharing ideas.
- Stronger capacity and independence of WHO personnel departments with better staff support, and more effective mechanisms which can eradicate corruption, nepotism and abuse of staff.



Health ministers gather for the 57th World Health Assembly (P Virot/WHO)

Working together to promote health

An estimated four million people die each year from a tobacco-related illness.

In 2001, the World Health Assembly called on WHO to monitor the global impact of tobacco, paving the way for the world's first public health treaty, unanimously adopted by the 192 WHA countries in 2003.

The resulting Framework Convention on Tobacco Control (FCTC) shows how the WHO, supported by national governments and civil society, can challenge a global threat to health – and win.

From the beginning, some governments – including from developing countries – pushed hard for effective measures to reverse the global tobacco epidemic and to hold the giant transnational tobacco companies to account.

More than 200 NGOs were involved in the formation of the treaty. These NGOs monitored and exposed tobacco industry abuses, created a media furore and raised public awareness.

This effective and powerful joint action has exposed the truth behind the corporate image of tobacco, reduced its political and economic influence and saved millions of lives.

Watching WHO

Health workers and campaigners can act to make WHO more effective and accountable. They can:

- Demand and campaign for:
 - governments to make greater financial contributions to WHO.
 - the proliferation of public-private partnerships be opened up to independent review and critical scrutiny.
 - WHO to be given the funds and mandate to perform the function of ensuring better coordination amongst donors and international health agencies within developing countries.
- Organize meetings with their health ministries to discuss the issues raised above in advance of the next World Health Assembly.

- Demand that WHO be given a stronger health protecting role and mandate in global and regional trade discussions and negotiations.
- Call on WHO to increase its engagement with civil society, through expanding the Civil Society Initiative at headquarters; ensuring that country and regional offices are conducting outreach; and revising its rules on interactions with non governmental organizations.
- Initiate local and regional Watches of WHO activities (WHO has country and regional offices).
- Initiate local and regional Watches of other relevant bodies such as the World Bank, International Monetary Fund and World Trade Organization.