

# WORLD HEALTH ORGANIZATION (WHO)

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## WORLD HEALTH ORGANIZATION (WHO)

**Primary Disciplinary Field(s):** Global Public Health, International Relations, Epidemiology, Health Policy

### 1. Core Definition

The **World Health Organization (WHO)** is a highly specialized agency of the United Nations (UN) chartered with the primary purpose of directing and coordinating international health efforts. Established in 1948, its fundamental constitutional mandate is the attainment by all peoples of the highest possible level of health, defined broadly not merely as the absence of disease or infirmity, but as a state of complete physical, mental, and social well-being. This definition elevates health to the status of a fundamental human right, guiding the organization's comprehensive approach to global well-being.

The WHO serves as the pivotal global authority on public health, operating across six regional offices and numerous country offices worldwide. It acts as the primary clearinghouse for global health policy and technical medical cooperation among countries, ensuring the alignment of national health strategies with universal standards. Its operational framework involves performing robust programs designed to manage, control, and ultimately eliminate widespread illness, such as malaria, tuberculosis, and polio. Simultaneously, the organization works diligently to strengthen health systems, promote health equity, and address the social and environmental determinants of health, thereby working systematically to enhance the overall quality and longevity of human life across the globe through preventative and curative measures.

### 2. Historical Development and Founding

The establishment of the WHO was the culmination of more than a century of efforts to formalize international sanitary agreements, reflecting the critical recognition that infectious diseases respect no political boundaries. Precursors included the International Sanitary Conferences, which began in 1851, and the Pan-American Sanitary Bureau (now PAHO), founded in 1902. The most direct predecessor was the Health Organisation of the League of Nations, which, despite operational successes between the World Wars, ultimately suffered from political instability and a lack of universal membership among key global powers.

Following the devastation wrought by World War II, the necessity for a truly global, authoritative, and politically stable health body became undeniable. This need led to the 1946 International Health Conference in New York, where representatives from 61 nations drafted and signed the WHO Constitution. The Constitution officially entered into force on April 7, 1948--a date which is now commemorated annually as **World Health Day**. This founding marked a profound shift from a reactive focus on quarantine measures to a proactive mandate granting the organization the power

not just to advise, but to set global health standards, coordinate resource mobilization, and manage large-scale health emergencies.

### 3. Mandate and Core Functions

The mandate of the WHO is structured around comprehensive, interdependent functions designed to achieve Universal Health Coverage (UHC) and protect populations from health emergencies. These functions are critical for maintaining global health security and promoting health equity. Firstly, the WHO provides decisive leadership on matters critical to health, engaging in complex multilateral partnerships where joint action and funding are required, often negotiating political and economic hurdles to achieve public health goals.

Secondly, the organization plays a vital role in shaping the global health research agenda. It stimulates the generation, translation, and dissemination of authoritative scientific knowledge, ensuring that national and international health policies are robustly **evidence-based** and grounded in scientific consensus. Thirdly, the WHO is responsible for setting global norms and standards. This involves developing and promoting the implementation of crucial global guidelines, such as the International Classification of Diseases (ICD), the Essential Medicines List, and global recommendations for immunization schedules, food safety, and environmental health.

Fourthly, the WHO provides technical support and articulates ethical policy options, assisting member states in building sustainable, resilient health systems capable of delivering essential services. Finally, and perhaps most visibly, the organization monitors the global health situation and assesses health trends, acting as the world's primary surveillance mechanism for epidemics and pandemics. This surveillance capacity is vital for detecting emerging threats and providing rapid technical medical cooperation, assisting developing nations in strengthening their primary healthcare infrastructure and implementing effective disease control measures.

### 4. Organizational Structure and Governance

The governance structure of the WHO is designed to ensure broad global representation and accountability among its 194 Member States. The highest decision-making body is the **World Health Assembly** (WHA), which convenes annually in Geneva. The WHA determines the policies and strategic priorities of the entire Organization, reviews and approves the biennial budget, and appoints the Director-General, who serves a five-year term as the chief technical and administrative officer.

Supporting the WHA is the Executive Board, composed of 34 technically qualified members elected for three-year terms. The Executive Board's core function is to prepare the agenda for the WHA, ensuring that proposals are technically sound and strategically relevant, and to implement the decisions and policies adopted by the Assembly. Crucially, the WHO operates through six

semi-autonomous Regional Offices (e.g., AFRO, EURO, PAHO). This decentralized model allows the organization to tailor global mandates and policies to the specific epidemiological, cultural, and resource-limited realities pertinent to distinct geographical areas, ensuring optimal effectiveness of program delivery at the national level. The organizational integrity depends heavily on the technical expertise of its global staff, including epidemiologists, clinicians, and policy experts.

## 5. Key Strategic Priorities

The strategic priorities of the WHO are currently guided by the Thirteenth General Programme of Work (GPW 13), which focuses on achieving the "triple billion" targets by 2023. These targets serve as measurable goals to enhance the health of billions worldwide. The first target is ensuring **one billion more people benefit from Universal Health Coverage (UHC)**, focusing heavily on strengthening primary healthcare systems and removing financial barriers to access.

The second priority is ensuring **one billion more people are better protected from health emergencies**. This involves dramatically improving preparedness for, response to, and recovery from epidemics, pandemics, and humanitarian crises, requiring robust investment in global surveillance (such as the International Health Regulations framework) and rapid deployment capabilities. The third priority is ensuring **one billion more people enjoy better health and well-being**, which necessitates a shift towards addressing non-communicable diseases (NCDs), mental health, and the social and environmental determinants of health, including climate change impacts and pollution. These strategic areas define the WHO's current operational focus, reflecting the evolving complexities of global health in the 21st century.

## 6. Major Achievements and Impact

The WHO is associated with several of the most monumental achievements in the history of international medicine. Its most celebrated success remains the successful global eradication of **smallpox** in 1980, a feat that demonstrated the unprecedented power of coordinated global surveillance, mass vaccination campaigns, and international political will. This campaign set the foundational blueprint for large-scale disease elimination efforts that followed.

Furthermore, the organization has spearheaded the significant global reduction in cases of **poliomyelitis** through the Global Polio Eradication Initiative, bringing the disease to the brink of eradication. The WHO also drives the international response to major endemic diseases such as HIV/AIDS, tuberculosis, and malaria, providing essential guidelines, promoting affordable access to diagnostics and treatments (e.g., through its Essential Medicines List), and coordinating funding partnerships like the Global Fund. Its role extends beyond direct disease intervention to establishing ethical frameworks, standardizing medical terminology, and acting as the global leader in coordinating rapid responses to emergent threats like Ebola, Zika, and novel coronaviruses,

thereby ensuring a unified global front against pathogenic risks.

## 7. Challenges and Criticisms

Despite its indispensable role, the WHO faces persistent challenges concerning its operational effectiveness, funding model, and political neutrality. A significant criticism centers on its reliance on **voluntary, earmarked contributions** from member states and philanthropic foundations, which often surpasses its mandatory, assessed contributions. This reliance can potentially distort organizational priorities, sometimes leading to a focus on donor interests rather than the most urgent global needs defined by the WHA, thereby compromising flexibility during unanticipated crises.

Additionally, the WHO has historically been criticized for bureaucratic inertia and slow response times during emerging pandemics, particularly related to the complex political environment surrounding data sharing and transparency among sovereign member states. The organization must carefully navigate geopolitical tensions while maintaining its scientific authority. Critics also point to the inherent difficulty in balancing the WHO's roles as a normative body (setting standards) and an operational body (implementing programs), suggesting that structural reforms are continuously needed to enhance its emergency preparedness fund and improve its mechanisms for rapid, independent global deployment and assessment.

### Further Reading

[World Health Organization Official Website](#)

[Wikipedia: World Health Organization](#)

[Constitution of the World Health Organization](#)