Chapter V

World Health Organization (WHO)

In 2000, the World Health Organization (WHO) adopted a new corporate strategy that focused on reducing excess mortality and disability; reducing risk to human health; developing health systems that equitably improved health outcomes; and placing health at the centre of economic and development policy. The strategy also identified WHO’s core functions: advocacy for health; information management; technical support; partnership-building; innovation; and the development and monitoring of norms and standards.

The World Health Assembly, WHO’s governing body, at its fifty-third session (Geneva, 15-20 May), adopted resolutions on HIV/AIDS; the Global Alliance for Vaccines and Immunization; the draft framework convention on tobacco control (see p. 1170); the prevention and control of non-communicable diseases; the Stop Tuberculosis Initiative; and food safety. The issue of HIV/AIDS in Africa and its impact on peace and security was debated by the Security Council (see p. 81). WHO played a leading role in launching the global strategy to combat HIV/AIDS worldwide.

The one hundred and fifth session of the WHO Executive Board (Geneva, 24-29 January) endorsed the organization’s new corporate strategy, recommended several resolutions for adoption by the World Health Assembly, and, among other things, took action regarding collaboration with non-governmental organizations and several other financial and management matters. At its one hundred and sixth session (Geneva, 22-23 May), the Board discussed smallpox eradication, the Roll Back Malaria Initiative, and the 2002-2003 programme budget as a key tool for implementation of the new corporate strategy, in addition to other management and financial matters.

The World Health Report 2000-Health Systems: Improving Performance offered new approaches to the analysis of health systems. The report focused on the essential functions and performance of health systems, including their responsiveness to people’s needs and the equality of health financing.

In 2000, WHO membership remained at 191, with two associate members and four observers.

Health policy

During the year, WHO worked with national health authorities around the world to formulate better health-care policies, design more efficient health systems and deliver better health care, especially to those in greatest need. In March, the organization merged its programmes on non-communicable disease and social change and mental health into a single cluster covering chronic health conditions, accidents, disabilities, violence and mental health. WHO also launched a global strategy on mental health, as well as its global strategy on non-communicable diseases, and initiated its first world report on violence and health to raise awareness regarding the public health aspects of violence.

Health and development

In 2000, WHO established the Commission on Macroeconomics and Health, which brought together a group of the world’s leading economists and economic policy makers to assess the linkages between health and development and between poverty and disease, with the aim of identifying the potential for better health as a contributor to human well-being and prosperity. The urgency of targeting the causes and consequences of health conditions that affected the poor and perpetuated poverty was also emphasized at the Third International Conference on Priorities in Health Care (Amsterdam, Netherlands, 22-24 November).

Disease trends and control efforts

New initiatives launched in 2000 by WHO to improve the health of poor people included: Roll Back Malaria; the Global Alliance for Vaccines and Immunization; Stop Tuberculosis; the International Partnership against AIDS in Africa (see p. 1166); Kick Polio Out of Africa; and Making Pregnancy Safer. Those new ventures brought in new WHO partners, broadening international efforts to improve global public health. As a result of those efforts, more than 190 countries and territories were expected to be polio-free by the end of 2000. WHO also succeeded in its global elimination target for leprosy by the end of 2000.
At the end of 2000, WHO employed a staff of 3,486, including 1,293 posts at the Professional and higher categories and 2,065 in the General Service category.


NOTE: For further details of WHO activities, see the World Health Report 2000 and 2001, published by the organization.