

US withdrawal from WHO

Damaging. But a time for reform?

S. Ananthakrishnan

The US withdrawal from WHO however temporary should be seen as an opportunity to revisit the numerous recommendations for reform of the structure of WHO that will, among other changes, establish a steady source of funding for the agency.

In a statement on 19 March 2020, the UN Secretary-General António Guterres, referring to COVID-19 pandemic, reminded and warned the world that it was facing a global health crisis unlike any in the 75-year history of the United Nations — one that is spreading human suffering, infecting the global economy and upending people's lives. Ironically, the UN agency that is concerned with global health, and meant to work towards the “elimination and eradication of high-impact communicable diseases” globally, the World Health Organisation (WHO), is also in crisis.

WHO is facing a crisis that challenges its operations as a global agency dealing with an all-encompassing range of work dealing with air quality to Zika virus (A-to Z). WHO is mainly a normative agency that provides guidelines and technical advice, collects data, statistics; help develop vaccines, etc. during health emergencies and in normal times. A framework Convention on Tobacco Control (WHO FCTC), the first treaty negotiated during the former Norwegian P.M Gro Harlem Brundland's tenure as the head of WHO also goes to its credit.

On July 7th The US sent a letter to the UN Secretary General announcing the termination of all ties with the World Health Organization (WHO) and thereby cutting financial support for the organization. The current US government has repeatedly criticized the WHO for handling the corona pandemic. The US has also accused the WHO of becoming a tool of Chinese authorities, and propaganda in the wake of the pandemic, whereas many other countries have expressed staunch support for the organization. Historically speaking, this is not the first time that a major power pulled out of the agency. In 1949, Soviet Union led an exit of the then Eastern bloc countries from the WHO. The Eastern bloc felt that the US was too much of a bully. However, it came back to the organisation in 1953.

The complex relationship between US and the UN can at the best be described as a love / hate one dating back to the founding of the UN in 1945. Most of all, this difficult relationship is a product of the US' self-assumed as well as expected role as the world leader, or the leader of the 'free world'. This role is reinforced by US exceptionalism that actually provides the rationale for the US to subordinate international law to its own judgement exceptional.

S. Ananthakrishnan is an independent scholar and social and rights activist based in Norway. He was formerly director of the youth programme at UN-HABITAT and currently co-chair, Urban Economy Forum (Canada).

In the context of the recent US withdrawal from WHO and stopping its financial support to the agency, it is also important to remember that challenging or being antagonistic to the UN is not a one party linked phenomenon in the United States. The Republicans, however, are viewed generally as more sceptical of the UN than the Democrats; the trend has been the same among all US presidents since 1945. The US' role as the "leader of the world also excludes the possibility that the world can lead the United States".

Even though the US was among the founders of the post- second world war multilateral system, it has time and again kept away from being a party to international obligations such as ratifying treaties and conventions. Nearly 50 internationally binding instruments such as the Conventions on the rights of the Child, Biodiversity, against discrimination of women, Paris agreement on Climate are among these. Withdrawing from UN organizations is also not a new US trend. Under President Jimmy Carter, US withdrew from the International Labour Office, ILO, only to rejoin three years later in 1980.

The current administration seems to learn from past mistakes only to repeat them easily. For example, the US pulled out of UNESCO in 2017 citing its pro-Palestine stand. The Regan administration also exited from UNESO in 1984 and President Bush Jr. re-joined UNESCO in 2003, probably taking note that engagement with the United Nations was preferable to isolation from it even though during his first term, he withdrew the U.S. from the Anti-Ballistic Missile Treaty and refused to be part of the International Criminal Court. The US has always refused to be bound by international institutions if they do not allow its hegemonic role. Also, on the other hand the US has never refused to show leadership or act unilaterally if needed as in the case of the invasion of Iraq, This paradox is reflected in its love/hate relationship with the UN and international law. And the US as a founder wants special rights based on self-perceived exceptionalism

The WHO's 2018–2019 budget was about \$6 billion. There are mainly three types of funding/contributions that WHO receives from governments, foundations, and sister agencies and individuals. They are assessed contributions, voluntary contributions and pandemic influenza preparedness. *Assessed contributions* are membership 'fees' or dues from member states, based on population and economic factors from each country. There are two types of *voluntary contributions* : non-assessed and earmarked for specific purposes and programmes and core voluntary contributions which are non-assessed with flexible usage to run programmes. Pandemic influenza preparedness (PIP) contributions constitute funding to "implement a global approach to pandemic influenza preparedness and response".

The US has by far been the biggest donor with a contribution of more than \$400 million (15 per cent of the budget) to the organization last year. The second largest funder is the US based Bill and Melinda Gates Foundation, which provides 9.8 per cent of the WHO's funds. Even if we consider only the assessed contributions, the US is still the largest contributor with USD 110 million (China's contribution being around USD 40 million). Newly announced additional support by Gates Foundation and countries like Germany and France will offset the budget problems of the agency considerably. In February, the Gates Foundation pledged \$100 million to fight the coronavirus pandemic, and it increased that to \$250 million in April after the US government

withdrew from the agency. Per capita-wise, smaller countries like Norway and Sweden are among the bigger contributors. It has been reported that the US provided US\$3.5 billion to the World Health Organization since 2010. Included in this grant is the one from the US Agency for International Development (USAID) that is at the top of all US federal agencies, \$1.5 billion. Available information also shows that nearly half the USAID grant money funded three WHO programmes: humanitarian programmes (\$345.7 million); polio eradication (\$307.8 million); and continued work to eliminate tuberculosis (\$116.6 million). ‘Assessed’ or compulsory and voluntary financial contributions of the US have indeed helped the WHO to engage in life-saving work in poorer and middle-income countries and regions —as in the case of treating Ebola, HIV and polio where partnerships with the US has produced tangible and lasting results. Important as well is the work of US public-health institutions, researchers and policymakers that are part of the organization’s many research and policy development activities. This kind of technical support to WHO through a variety of activities and partnerships has enhanced the global standing and capacity of the organization.

Responding to criticisms of omissions in reporting about the origins, scale and nature of the pandemic, mainly referring to under reporting about China, WHO has announced “an independent and comprehensive evaluation of the lessons learned from the international health response to COVID19,” which will be led by former New Zealand Prime Minister and previous head of UNDP, Helen Clark and former Liberian President Ellen Johnson Sirleaf. Questions being asked include [whether WHO was too slow to declare a global health emergency \(https://www.theverge.com/2020/1/23/21077335/coronavirus-world-health-organization-global-public-health-emergency-china\)](https://www.theverge.com/2020/1/23/21077335/coronavirus-world-health-organization-global-public-health-emergency-china), and was it [too generous in its praise of China](#) for its handling of the outbreak. This situation can also act as catalyst for much needed reforms in the UN organisation. There needs to be more transparency in its own governance. For example, many in India were surprised at the treatment of Dr Soumya Swaminathan who was appointed as the first Indian Deputy Director General of WHO in 2017 and was shunted off in 2019 as the Chief Scientist.

In financial terms WHO’s cash crunch will also force the agency to rethink its approach to dealing with member states. As an expensive lesson learned, and as a member-state organization WHO would need to seek more authority like WTO to make dispassionate and investigative assessments of states as well as help implement binding measures during serious outbreaks for the good of the peoples’ health and well being. Currently, countries are often not transparent and WHO’s weakness is that it relies on information from its member countries. Just as the delay in declaring COVID emergency, in 2014 too, WHO took months to declare Ebola a public-health emergency

WHO is well-known for its scientific skills such as in the development of small pox vaccine, epidemiological expertise, outbreak- emergency response capacity, and global networks in helping countries including China, Liberia and Sierra Leone. The COVID 19 outbreak has shown that the imperative for WHO to work with governments in battling outbreaks cannot be overstated. With a stronger mandate, WHO can hold member states accountable for mistakes.

For years civil society and citizen's groups have been demanding greater say in the running of the UN. While the UN is run by member states, ILO as an exception has a tripartite governance structure with trade unions and employers participating along with governments. In a similarly vein this is the occasion to open WHO for non-state actors along with state actors within its decision-making body. Instead of getting depressed about the US withdrawal from the body, it is time to get the act together for the WHO and world health professionals and institutions to think of new ways to strengthen the organisation to deliver its mandate for global health and go beyond the slogan of Health for All. There have been attempts such as the one with the WHO Framework of Engagement With Non-State Actors (FENSA) resolution. Although former heads such as Brundtland opened communications with companies and non-governmental organizations to tap their knowledge, others such as Chan have been negative to civil society and interest groups engagements that are hostile to the industry. Many governments have wanted to trim WHO's mandate so that it becomes more of a 'normative' agency engaged in developing norms, standards and research. Many developing countries want WHO to be an operational organization that eradicates diseases, controls pandemics, tackles humanitarian crises, and supports health systems development in the least developed countries. And some want a combination of the two. There has been successes related mainly to the development of norms and standards, advocacy for neglected issues, mental health, and highly successful smallpox eradication.

The crisis that the Agency faces in the light of the funding crunch and the urgency to tackle the pandemic, also opens up a possibility for radically changing the governance structure learning from ILO and UNAIDS the latter with a governance structure unique in its small size and its level of inclusiveness, with Member States, Cosponsors and civil society, and specifically people living with and affected by HIV, as members of its Programme Coordinating Board (PCB).

Strengthened, a reformed WHO also needs to think of partnerships at the sub national levels such as cities and municipalities. The principle of subsidiarity should be explored, also by UN agencies since central organs of states or a larger organ shall not resolve an issue that can be resolved at a more local level. Currently local and regional governments around the world are at the frontline facing the COVID-19 crisis and they also have the burden of coping with all health rated issues for the communities. For example, the fight against Ebola was successful in Nigeria, thanks to adaptability of the primary health centres to a new situation. In a reformed governance structure of the organization, there should be room for participation in decision making by civil society partners, health professionals organizations, foundations local governments and the representatives private sector of jointly with national governments. Within the UN system, WHO can set an example in participatory decision-making. This will echo one of the preambles of the agency: "The health of all peoples is fundamental to the attainment of peace and security and is dependent on the fullest co-operation of individuals and States."

The media and experts believe that a new US administration will, in all probability, rescind the US withdrawal from WHO while demanding greater accountability. Above all such a decision also will re-establish intellectual, scientific and research collaboration with US institutions. When it comes to the US-UN relationship, if the current administration continues, the UN will be further reduced to become a platform for arguments, quarrels and rhetoric than tangible results. The US

and the West will continue to face a much stronger and sophisticated adversary that China is and will continue to be, compared to what Soviet Union was.

As observed by many, with continued bilateralism of the US, marginalization of the UN will recreate a bi-polar or a G2 world with enhanced US-China confrontation that will risk paralysing the UN Security Council and multilateral system that includes many UN agencies, treaties and agreements. As there is a political consensus on dealing with China's influence, a new administration in the US will most probably consider the UN as a useful mechanism in managing China and in promoting greater burden sharing as US has demanded when it comes to NATO. Observers also think that by opening funding for UN agencies and programmes and achieving the 17 Sustainable Development Goals or SDGs, poorer countries can be brought into an alliance in containing China's influence regionally and globally.

For over two decades there have been many calls for reforms of the UN. However, there is little clarity or consensus about what reform should be in practice. While various UN Secretary Generals have attempted to reform the UN from within and among various agencies, calls from the civil society and global governance experts as well as developing country governments have been to radically change the existing structures of the Security Council as well as accommodating the participation of various stakeholders in the decision making process. UN agencies such as the WHO need adequate and predictable funding to carry out their task. Also needed are organizational reforms that will make them more accountable and accessible and less bureaucratic if they are to be relevant.

Bibliography

'The United States' current and future relationship with the United Nations', David Whineray Visiting Senior Fellow, UN University, 2020.

'The World Health Organization and Pandemic Politics, The good, the bad, and an ugly future for global health', David Fidler, April 10, 2020.

'How to fix the WHO, according to an expert: President Trump's decision to withdraw from the World Health Organization won't change it. Here's what might'. By Jen Kirby Updated May 29, 2020 (<https://www.vox.com/>).

'For the Common Good: The U.S. Role in the United Nations', *Social Education* 58(7), 1994, pp. 407-409 National Council for the Social Studies.

The U.S. Government and the World Health Organization, Apr 16, 2020, Kaiser Family Foundation.

'\$3.5 Billion Has Flowed From U.S. Taxpayers To The World Health Organization Since 2010', Adam Andrzejewski, April 14 2020, *Forbes magazine*.

'Gates Foundation Donations to WHO Nearly Match Those From U.S. Government', Deidre McPhillips, May 29, 2020, *US News and World Report*.

'World Health Organization Reform—A Normative or an Operational Organization?' Derek Yach, *Am J Public Health*. 2016 November; 106(11): 1904–1906.

eSocialSciences