World Health Organization (WHO)

Location:

Geneva, Switzerland

Contact Information:

World Health Organization 20 Avenue Appia, CH-1211 Geneva 27 Switzerland

World Health Organization Office in the UN 1 Dag Hammarskjold Plaza New York, NY 10017 USA

Focal Point:

Mr. Andrey V. Pirogov Assistant Director General Executive Director

Tel: +1 212 963 6004 Fax: +1 212 963 8565

E-mail: apirogov@whoun.org

Website: www.who.org

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CTITF Working Group Membership:

- Preventing and Responding to WMD Terrorist Attacks
- Border Management Related to Counter-Terrorism

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The World Health Organization (WHO) is the United Nations specialized agency responsible for directing and coordinating the multilateral response to emerging international health challenges.²¹⁶ Its primary functions include: shaping the research agenda and providing substantive inputs regarding health issues, monitoring developments and trends related to international health, articulating policy, and setting global norms and standards.

The WHO has over 8,000 public health experts in 147 countries, and six regional offices to advise states' ministries and provide assistance in areas such as HIV/AIDS, chronic diseases, tuberculosis, malaria, and maternal health. Moreover, the WHO strengthens the preparedness of states at risk of public health emergencies and supports countries responding to or recovering from a crisis through its Humanitarian Health Action Programme.²¹⁷

In addition, the WHO provides a framework for detecting, assessing, notifying, and responding to threats to public health through its International Health Regulations (IHR), which are binding on its 194 states parties. These regulations define the rights and obligations of countries to report public health events, and outline follow-up procedures for the WHO.²¹⁸ The WHO also provides technical assistance to states to ensure implementation of these standards.

The issue of states' responsiveness to a public health crisis in the wake of a chemical, biological, and/or radiological terrorist attack has become increasingly salient in the WHO's work in the past decade. Participants at the Fifty-Fifth World Health Assembly in May 2002 underlined the WHOs growing attention to the implications of these types of attacks on public health. It was noted that chemical, biological, and radiological agents can be disseminated through a number of mechanisms, including food and water supply, and that the WHO should expand its role in assisting states to build the capacities of national health systems to respond to these threats.²¹⁹

The WHO now provides this kind of guidance to states. Most of the organization's work directed towards global health security and emerging threats takes place within its Health Security and Environment Cluster. This cluster has produced manuals on the public-health management of chemical incidents. Additionally, a 2002 report entitled *Terrorist Threats to Food* explores prevention and response systems for the deliberate contamination of food.²²⁰ The WHO also works to build state capacity by providing technical assistance and training to states. For example, The WHO has created a network called the Radiation Emergency Medical Preparedness and Response Network (REMPAN), which includes more than forty specialized institutions worldwide that offer training and technical assistance to requesting public-health institutions, helping them to prepare for a public health emergency in the case of a radiological attack.²²¹

Concern over emerging threats to public health, including the outbreak of Severe Acute Respiratory Syndrome (SARS) in 2003, catalyzed the revision of the International Health Regulations, which were completed in 2007 after several years of negotiations. According to David Heymann, the assistant director general for the WHO's Health Security and Environment Cluster, "the revised regulations have dramatically changed the way that key public health events of international significance are handled by the international community." The updates to the regulations reflect the transnational nature of threats to public health and identify specific capacity requirements that must be in place in each country within a fixed timeframe.

Moreover, in an effort to support greater collaboration on and preparedness for public health emergencies, the WHO maintains the Global Alert and Response System, which identifies and assesses public health threats and emergencies so that the organization can work with states and partners to coordinate an appropriate response.

The inclusion of the WHO in the Counter-Terrorism Implementation Task Force reflects recognition of the potential consequences of a terrorist attack on public health across state borders. This is further emphasized by the WHO's membership in two CTITF working groups: Preventing and Responding to WMD Terrorist Attacks and Border Management Related to Counter-Terrorism. As a member of the Working Group on Preventing and Responding to WMD Terrorist Attacks, the WHO has contributed to a report on *Interagency Coordination in the Event of a Nuclear or*

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Radiological Terrorist Attack: Current Status, Future Prospects. Within the report, the WHO notes its coordination with the International Atomic Energy Agency (IAEA) on medical responses to nuclear or radiological incidents.²²³ As a member of the Working Group on Border Management Related to Counter-Terrorism, the WHO is contributing to the development of a comprehensive compendium for legal, institutional, and practical issues related to counterterrorism.²²⁴

Working Groups of the Counter-Terrorism Implementation Task Force