

Editorial

WHO & World Health Day



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Origin of WHO :

The International sanitary conferences originally held on 23 June, 1851 was the first predecessor of the WHO. A series of 14 conferences from 1851 to 1938 of international sanitary conferences worked to combat many diseases chief among of them are cholera, yellow fever and the bubonic plague. In 1892 the international sanitary conference dealt with cholera and in 1897 the convention for plague was signed. As a result of successes of the conferences, the Pan American Sanitary Bureau and the office International d'Hygiene Publique were soon founded in 1902 and 1907 respectively. When the League of Nations was formed in 1920, they established the Health organisation of the league of Nations. After world war II the united Nations absorbed all the other Health organisations to form the WHO.

The use of the "World" rather than "International" emphasized the truly global nature of what the organisation was seeking to achieve. The constitution of the world Health Organisation was signed by all 51 countries of the united Nations and by 10 other countries on 22nd July 1946. It thus became the first specialised agency of the United Nations to Which every member subscribed. Its constitution formally came into force on the first world Health day on 7th April 1948, when it was ratified by the 26 member state.

Over all Focus :

The WHO's constitution states that its objective is the attainment by all people of the highest possible level health.

The WHO fulfills the objective through its functions as defined in its Constitution.

(a) To act as the directing and coordinating authority on international health work. (b) To establish and maintain effective collaboration with the United Nations, specialized agencies, government health administrations, professional groups and such other organisations as may be deemed appropriate. (c) To assist Government, upon request, in strengthening health services. (d) To furnish appropriate technical assistance and, in emergencies, necessary aid upon the request and acceptance of the Governments. (e) To provide or assist in providing, upon the request by United Nations, health services and facilities to special groups, such as the peoples of trust territories. (f) To establish and maintain such administrative and technical services as may be required, including epidemiological and statistical services. (g) To stimulate and advance work to eradicate epidemic, endemic and other diseases. (h) To promote, in co-operation with other agencies when necessary, the improvement of nutrition, housing sanitation, recreation, economic or working conditions and other aspects of environmental hygiene. (i) To promote cooperation among scientific and professional groups which contribute to the advancement of health. (j) To propose conventions, agreements and regulations and make recommendations with respect to international health matters and to perform.

Membership :

As of 2016, the WHO has 194 member states. A State becomes a full member of WHO by ratifying the treaty, known as the constitution of World Health Organisation. There are also some associate members like Puerto Rico and Tokelou. Several countries have been granted observer status like Palestine.

The Executive Board is composed of members technically qualified in health and gives effect to decision and policies at Health Assembly. WHO has official relations with International committee of the Red Cross, International Federation of Red Cross and Red Crescent societies.

World Health Assembly (WHA) is the legislative and supreme body of WHO, based on Geneva. It meets in May to appoint the Director General every five years. The assembly elects 34 members technically qualified in the field of health to the Executive Board for three year terms.

Head Office : Geneva, Switzerland

Regional Office :

Africa — Brazzaville, Republic of Congo. Western Pacific — Manila, Philippines. Eastern Mediterranean — Cairo, Egypt.

South East Asia — New Delhi, India. Europe — Copenhagen, Denmark. Americas — Washington D.C., U.S.A.

The constitution of world Health Organisation had been signed by 61 countries on 22nd July, 1946, with first meeting world Health Assembly finishing on 22nd July 1946. It incorporate the official International d'hygiene Publique and the League of Nations Health organisation. Since its establishment, it had played a leading role in the eradication of small pox. Its current priorities include communicable disease, in particular HIV / AIDS, malaria, & tuberculosis. In each year since the inception of the world Health day in 1950, 7th April WHO select a Theme for public awareness in support of human right for health.

It will not be unwise to name some of the theme of WHO year wise :

1994 - Global Polio Eradication. 1997 – Emerging infectious diseases. 1998 – Safe motherhood.

2004 – Road Safety. 2009 – Save lives, make hospitals safe in emergencies.

2011 – Antimicrobial resistance : no action today and no cure tomorrow.

2014 – Vector borne disease : small bite big threats.

2015 – Food safety. 2016 - Halt the rise, beat diabetes.

2017 – Depression : let's talk.

2018 & 2019 – Universal Health Coverage : everyone everywhere.

The world health Day is held to mark WHO's founding, and is seen as an opportunity by the organisation to draw world wide attention to a subject of major importance to global health each year. The WHO organizes international, regional and local events on the Day related

to a particular Theme. WORLD Health Day in acknowledge by various governments and non governmental organisations with interest in public issues. WHO also organize activities and highlight their support in media reports, such as global Health Council.

World Health Day is one of eight official global health conpaigns marked by WHO. along with World Tuberculosis Day, World Immunisation week, World Malaria Day, World no Tobacco Day, World AIDS Day, World Blood Donor Day and World Hepatitis Day.

This year 2019 the who's theme is 'Health Coverage for every-one and every where'. The slogan is 'Health for all'. This theme is for doctor and for the common people of the world to make the community health concious.

“Health coverage for every one and every where”

Key Facts

- (i) At least half of the world's population do not have full coverage of essential health services.
- (ii) About 100 million people are still being pushed in to extreme poverty because they have to pay for health care.
- (iii) One 800 millions people (about 12% of world popula-tion) spent 10% of their household budgets to pay for health care.
- (iv) All UN member States have agreed to try to achieve uni-versal health coverage (UHC) by 2030, as a part of sustainable de-velopment goals.

What is UHC?

UHC means all individuals and communities receive the health services they need without suffering financial hardship. It includes the full spectrum of essential, quality health services from health promotion to pevention, treatment, rehabilitation and palliative care.

UHC enables every one to access the services that address the most significant causes of disease and death and engases that the quality of those services which are good enough to improve the health of the people who receive them.

Protecting people from the financial consequence of paying for health services out of their own pockets reduces the risk that people will be pushed in to poverty because unexpected illness requires them to use up their life savings, self assets or barrow, destroying their futures and often those of their children.

Achieving UHC is one of the targets of the nations of the world set when adopting the sustainable Development Goals in 2030. Countries that progress towards UHC will make progress towards the other health related, and towards other goals. Good health al-lows children learn and helps people escape from poverty and pro-vides the basis for long term economic development.

What UHC is not :-

There and many things that are not included in UHC.

- (i) It doesnot mean free coverage for all possible health inter-ventions, regadless of the cost, as no country can provide all ser-vices free of charges on a sustainable basis.
- (ii) UHC is not just health financing; it encompasses all compo-nents of the health system : health service delivery system, the health workforce, health facilities and communications net work, health technologies, information systems, quality assurance mechanism and governance and litigation.
- (iii) UHC is not only about ensuring a minimum package of health services, but also ensuring a progressive expansion of cover-

age of health services and financial protection as more resources become available.

(iv) UHC is not only about individual treatment services, but also includes population based services such as public health compaign, adding floride to water, arsenic poisoning of drinking water, controlling insects breeding and so on.

(v) UHC is composed of much more than just health, taking steps towards equility, development priorities and social inclusion and cohesion.

What is primary health care?

Primary health care is an approach to health and wellbeing cen-tered on needs and circumstances of individuals, families and com-minutes. It addresses comprehensive and interrelated physical, men-tal and social wellbeing.

Who has developed a cohesive definition of primary health care based on three components:-

- (i) People's health problems are addressed through compre-hensive promotive, protective, curative, preventive, rehabilitative and palliative care throughout the life course, with the key stem functions aimed at individuals, famities and of community by a centrally integrated service delivery across all levels of care.
- (ii) Systematically addressing the broader determinant of health including social, economic environmental as well as people's characteristict and behaviours.
- (iii) Empowering individuals, families and communities to optimise their health as advocates for policies that promote and protect health and wellbeing.

Primary health care is the most efficient and cost effective way to achieve universal health coverage (UHC) around the world.

WHO uses 16 essential health services in 4 catagories as indi-cations of the level and equity of coverage in countries.

(A) Reproductive, maternal, newborn and child health :-

- Family planning
- Antenatal and delivery care
- Full child immunisation.
- Health seeking behaviour of pneumonias.

(B) Infections causes :-

- Tuberculosis treatment
- HIV antiretroviral treatment
- Hepatitis treatment
- Use of insecticide – bed sets for malaria prevention
- Adequate sanitation.

(C) Non communicable disease :-

- Prevention and treatment of hypertension.
- Prevention and treatment or diabetes.
- Cervical cancer screening.
- Tobacco smoking.

(D) Service capacity and access :-

- Basic hospital access
- Health worker density
- Access to essential medinines.
- Health security compliance with the international health regu-lations.

Each country in unique and each country may focus on differ-ent areas or develops their own ways of measuring progress toward UHC. But there is also value in a global approach that used standerised measures used internationally, as it given the chances to compare with others.

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— *Hony Editor*