

Leaving the WHO might not be as easy as Trump thinks

There is no process for member countries to withdraw. The United States should stay and help to reform the agency from within.

US President Donald Trump's decision, announced on 29 May, to withdraw funding from the World Health Organization (WHO) was never in doubt.

Since the beginning of the coronavirus outbreak, the White House has been intensifying its charge that the WHO was slow to respond to the threat, and overly influenced by China. Undoubtedly, the agency has lessons to learn, and, at the World Health Assembly last month, WHO member states endorsed an independent evaluation. It is irresponsible and dangerous for the United States – the WHO's largest donor – to bypass the agreed process and withhold roughly US\$450 million in annual funding in the middle of one of the worst pandemics in recent history. This will undermine the world's efforts to control the new coronavirus and will endanger more lives as COVID-19 continues on its destructive path.

The chances that the US decision could be reversed at this stage are slim, but there is a small window of time, during which everything possible must be tried. There is too much at stake not to do so.

The United States was among the biggest champions for establishing an international agency to assist countries in rebuilding national health systems after the Second World War. Since then, the United States' compulsory and voluntary financial contributions have enabled the WHO to carry out life-saving work in low- and middle-income countries and regions – for example, in treating Ebola, HIV and polio. And US public-health researchers and policymakers are embedded in the organization's many research and policy-making bodies.

US researchers are also members of many of the WHO's scientific-advisory groups, including those on COVID-19. And US institutions, especially the Centers for Disease Control and Prevention, work with the WHO by hosting what are called collaborating centres. One such centre, which has partners in Australia, China, Japan and the United Kingdom, monitors influenza and helps to design flu vaccines.

The US presence in the WHO was important to the reform, in 2005, of the International Health Regulations, under which countries are obliged to accurately report outbreaks, cases and deaths. The regulations needed strengthening because under-reporting had been a feature of past disease outbreaks, resulting in lost lives. The authors of these regulations could not have imagined that

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a US president would promote and then justify collecting inaccurate data. Trump did so at a rally on 20 June, when he said he had asked officials to go slow on coronavirus testing – a clear breach of these regulations.

Researchers are debating what form the US withdrawal will take, and how quickly it could happen. Funding that has been given cannot be taken back; nor can voluntary contributions that have been pledged in advance. And the WHO's founding constitution lacks a provision for countries to withdraw. Under a resolution passed by both US houses of Congress in 1948, the United States must give one year's notice and pay any outstanding funds if it wishes to leave. Whether the White House will be bound by this, and what powers Congress has to enforce its earlier decision, are a matter of debate. But, as far as the WHO constitution is concerned, countries that join remain members.

Those interviewed for this editorial – researchers in international law and public health, WHO advisers and members of other multilateral processes – agree that a member state cannot be compelled to stay. The Soviet Union famously led a walkout of Eastern bloc countries from the WHO in 1949 owing to concerns that the United States was too dominant, and these countries returned only after the death of Joseph Stalin in 1953. But the absence of a formal withdrawal mechanism allowed the WHO's first director-general, Canada's Brock Chisholm, to classify the Soviet membership as 'inactive' rather than 'withdrawn'. Something similar could happen now, creating a path for the eventual return of the United States should it leave.

The United Nations did eventually create rules – the 1969 Vienna Convention on the Law of Treaties and its 1986 extension – that cover how countries can exit a multilateral organization from which there is no provision to withdraw. But the United States is among those that have not ratified these agreements, a decision that the White House might come to regret.

Leave to remain

Trump's decision to withdraw from the WHO seems to follow a pattern of behaviour that includes the 2017 decision to leave the UN's science-cooperation agency UNESCO, and his ending of US involvement in the Iran nuclear deal. But this latest move is different in one important respect: some influential voices in Trump's own Republican Party are urging him to reconsider. That represents an audience for researchers, research institutions, industry and health campaigners to work with, to highlight the dangers of a US exit. Lawmakers must be pressed to reverse this dangerous decision, or, at the very least, to ensure that any outstanding dues are paid and that the one-year period of notice before withdrawal is respected.

If the United States wants to improve the WHO, it needs to back both the independent evaluation, as other WHO member states have done, and implementation of recommended changes – not turn its back entirely. If, as seems probable, the Trump administration does order a swift withdrawal, the WHO's constitutional duty is to keep the country's seat, so that the United States can quickly return when a future leader makes a wiser choice.