

WORLD HEALTH ORGANIZATION.

No. 93 of 1947.

An Act to Approve of Australia's becoming
a Member of the World Health Organization
and for other purposes.

[Assented to 11th December, 1947.]

WHEREAS in the City of New York on the twenty-second day of July, One thousand nine hundred and forty-six, the Constitution of the World Health Organization was signed on behalf of Australia subject to approval and acceptance by the Government of the Commonwealth ; Preamble.

AND WHEREAS in the City of New York on the same date an arrangement establishing an Interim Commission of the World Health Organization was signed on behalf of Australia subject to approval and acceptance by the Government of the Commonwealth ;

AND WHEREAS it is expedient that the Parliament should approve of Australia's becoming a member of the World Health Organization and of the acceptance by Australia of the Arrangement establishing an Interim Commission of the World Health Organization and that provision should be made for enabling the carrying out of and the giving of effect to the Constitution and the Arrangement, and matters arising thereunder, on the part of Australia :

BE it therefore enacted by the King's Most Excellent Majesty, the Senate, and the House of Representatives of the Commonwealth of Australia, as follows :—

1. This Act may be cited as the *World Health Organization Act* 1947. Short title.

- Commencement.** 2. This Act shall come into operation on the day on which it receives the Royal Assent.
- Definitions.** 3. In this Act—
 “the Constitution” means the Constitution of the World Health Organization, a copy of which Constitution is set out in the First Schedule to this Act;
 “the World Health Organization” means the Organization established under that name by the Constitution;
 “the Arrangement” means the Arrangement establishing an Interim Commission of the World Health Organization, a copy of which Arrangement is set out in the Second Schedule to this Act.
- Extension to Territories.** 4. This Act shall extend to every Territory under the authority of the Commonwealth.
- Membership of Australia of the World Health Organization, &c.** 5. Approval is given to—
 (a) Australia’s becoming a member of the World Health Organization; and
 (b) the acceptance by Australia of the Arrangement.
- Regulations.** 6. The Governor-General may make such regulations as are necessary or expedient for carrying out and giving effect to the Constitution and the Arrangement and conventions, agreements and regulations adopted under the Constitution, and in particular for prescribing penalties (not exceeding a fine of Five hundred pounds or imprisonment for twelve months) for offences against the regulations made under this Act.

THE SCHEDULES.

FIRST SCHEDULE.

CONSTITUTION OF THE WORLD HEALTH ORGANIZATION.

THE STATES parties to this Constitution declare, in conformity with the Charter of the United Nations, that the following principles are basic to the happiness, harmonious relations and security of all peoples:

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition.

The health of all peoples is fundamental to the attainment of peace and security and is dependent upon the fullest co-operation of individuals and States. The achievement of any State in the promotion and protection of health is of value to all.

Unequal development in different countries in the promotion of health and control of disease, especially communicable disease, is a common danger.

Healthy development of the child is of basic importance; the ability to live harmoniously in a changing total environment is essential to such development.

The extension to all peoples of the benefits of medical, psychological and related knowledge is essential to the fullest attainment of health.

Informed opinion and active co-operation on the part of the public are of the utmost importance in the improvement of the health of the people.

Governments have a responsibility for the health of their peoples which can be fulfilled only by the provision of adequate health and social measures.

ACCEPTING THESE PRINCIPLES, and for the purpose of co-operation among themselves and with others to promote and protect the health of all peoples, the contracting parties agree to the present Constitution and hereby establish the World Health Organization as a specialized agency within the terms of Article 57 of The Charter of the United Nations.

FIRST SCHEDULE—*continued.*

CHAPTER I

OBJECTIVE

Article 1

The objective of the World Health Organization (hereinafter called the Organization) shall be the attainment by all peoples of the highest possible level of health.

CHAPTER II

FUNCTIONS

Article 2

In order to achieve its objective, the functions of the Organization shall be :

- (a) to act as the directing and co-ordinating authority on international health work ;
- (b) to establish and maintain effective collaboration with the United Nations, specialized agencies, governmental health administrations, professional groups and such other organizations as may be deemed appropriate ;
- (c) to assist governments, upon request, in strengthening health services ;
- (d) to furnish appropriate technical assistance and, in emergencies, necessary aid upon the request or acceptance of governments ;
- (e) to provide or assist in providing, upon the request of the 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 specialized agencies where necessary, the prevention of accidental injuries ;
- (i) to promote, in co-operation with other specialized agencies where necessary, the improvement of nutrition, housing, sanitation, recreation, economic or working conditions and other aspects of environmental hygiene ;
- (j) to promote co-operation among scientific and professional groups which contribute to the advancement of health ;
- (k) to propose conventions, agreements and regulations, and make recommendations with respect to international health matters and to perform such duties as may be assigned thereby to the Organization and are consistent with its objective ;
- (l) to promote maternal and child health and welfare and to foster the ability to live harmoniously in a changing total environment ;
- (m) to foster activities in the field of mental health, especially those affecting the harmony of human relations ;
- (n) to promote and conduct research in the field of health ;
- (o) to promote improved standards of teaching and training in the health, medical and related professions ;
- (p) to study and report on, in co-operation with other specialized agencies where necessary, administrative and social techniques affecting public health and medical care from preventive and curative points of view, including hospital services and social security ;
- (q) to provide information, counsel and assistance in the field of health ;
- (r) to assist in developing an informed public opinion among all peoples on matters of health ;
- (s) to establish and revise as necessary international nomenclatures of diseases, of causes of death and of public health practices ;
- (t) to standardize diagnostic procedures as necessary ;
- (u) to develop, establish and promote international standards with respect to food, biological, pharmaceutical and similar products ;
- (v) generally to take all necessary action to attain the objective of the Organization.

CHAPTER III

MEMBERSHIP AND ASSOCIATE MEMBERSHIP

Article 3

Membership in the Organization shall be open to all States.

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FIRST SCHEDULE—*continued.**Article 4*

Members of the United Nations may become Members of the Organization by signing or otherwise accepting this Constitution in accordance with the provisions of Chapter XIX and in accordance with their constitutional processes.

Article 5

The States whose governments have been invited to send observers to the International Health Conference held in New York, 1946, may become Members by signing or otherwise accepting this Constitution in accordance with the provisions of Chapter XIX and in accordance with their constitutional processes provided that such signature or acceptance shall be completed before the first session of the Health Assembly.

Article 6

Subject to the conditions of any agreement between the United Nations and the Organization, approved pursuant to Chapter XVI, States which do not become Members in accordance with Articles 4 and 5 may apply to become Members and shall be admitted as Members when their application has been approved by a simple majority vote of the Health Assembly.

Article 7

If a Member fails to meet its financial obligations to the Organization or in other exceptional circumstances the Health Assembly may, on such conditions as it thinks proper, suspend the voting privileges and services to which a Member is entitled. The Health Assembly shall have the authority to restore such voting privileges and services.

Article 8

Territories or groups of territories which are not responsible for the conduct of their international relations may be admitted as Associate Members by the Health Assembly upon application made on behalf of such territory or group of territories by the Member or other authority having responsibility for their international relations. Representatives of Associate Members to the Health Assembly should be qualified by their technical competence in the field of health and should be chosen from the native population. The nature and extent of the rights and obligations of Associate Members shall be determined by the Health Assembly.

CHAPTER IV

ORGANS

Article 9

The work of the Organization shall be carried out by :

- (a) The World Health Assembly (herein called the Health Assembly) ;
- (b) The Executive Board (hereinafter called the Board) ;
- (c) The Secretariat.

CHAPTER V

THE WORLD HEALTH ASSEMBLY

Article 10

The Health Assembly shall be composed of delegates representing Members.

Article 11

Each Member shall be represented by not more than three delegates, one of whom shall be designated by the Member as chief delegate. These delegates should be chosen from among persons most qualified by their technical competence in the field of health, preferably representing the national health administration of the Member.

Article 12

Alternates and advisers may accompany delegates.

Article 13

The Health Assembly shall meet in regular annual session and in such special sessions as may be necessary. Special sessions shall be convened at the request of the Board or of a majority of the Members.

Article 14

The Health Assembly, at each annual session, shall select the country or region in which the next annual session shall be held, the Board subsequently fixing the place. The Board shall determine the place where a special session shall be held.

FIRST SCHEDULE—*continued.**Article 15*

The Board, after consultation with the Secretary-General of the United Nations, shall determine the date of each annual and special session.

Article 16

The Health Assembly shall elect its President and other officers at the beginning of each annual session. They shall hold office until their successors are elected.

Article 17

The Health Assembly shall adopt its own rules of procedure.

Article 18

The functions of the Health Assembly shall be :

- (a) to determine the policies of the Organization ;
- (b) to name the Members entitled to designate a person to serve on the Board ;
- (c) to appoint the Director-General ;
- (d) to review and approve reports and activities of the Board and of the Director-General and to instruct the Board in regard to matters upon which action, study, investigation or report may be considered desirable ;
- (e) to establish such committees as may be considered necessary for the work of the Organization ;
- (f) to supervise the financial policies of the Organization and to review and approve the budget ;
- (g) to instruct the Board and the Director-General to bring to the attention of Members and of international organizations, governmental or non-governmental, any matter with regard to health which the Health Assembly may consider appropriate ;
- (h) to invite any organization, international or national, governmental or non-governmental, which has responsibilities related to those of the Organization, to appoint representatives to participate, without right of vote, in its meetings or in those of the committees and conferences convened under its authority, on conditions prescribed by the Health Assembly ; but in the case of national organizations, invitations shall be issued only with the consent of the government concerned ;
- (i) to consider recommendations bearing on health made by the General Assembly, the Economic and Social Council, the Security Council or Trusteeship Council of the United Nations, and to report to them on the steps taken by the Organization to give effect to such recommendations ;
- (j) to report to the Economic and Social Council in accordance with any agreement between the Organization and the United Nations ;
- (k) to promote and conduct research in the field of health by the personnel of the Organization, by the establishment of its own institutions or by co-operation with official or non-official institutions of any Member with the consent of its government ;
- (l) to establish such other institutions as it may consider desirable ;
- (m) to take any other appropriate action to further the objective of the Organization.

Article 19

The Health Assembly shall have authority to adopt conventions or agreements with respect to any matter within the competence of the Organization. A two-thirds vote of the Health Assembly shall be required for the adoption of such conventions or agreements which shall come into force for each Member when accepted by it in accordance with its constitutional processes.

Article 20

Each Member undertakes that it will, within eighteen months after the adoption by the Health Assembly of a convention or agreement, take action relative to the acceptance of such convention or agreement. Each Member shall notify the Director-General of the action taken and if it does not accept such convention or agreement within the time limit, it will furnish a statement of the reasons for non-acceptance. In case of acceptance, each Member agrees to make an annual report to the Director-General in accordance with Chapter XIV.

FIRST SCHEDULE—*continued.**Article 21*

The Health Assembly shall have authority to adopt regulations concerning :

- (a) sanitary and quarantine requirements and other procedures designed to prevent the international spread of disease ;
- (b) nomenclatures with respect to diseases, causes of death and public health practices ;
- (c) standards with respect to diagnostic procedures for international use ;
- (d) standards with respect to the safety, purity and potency of biological, pharmaceutical and similar products moving in international commerce ;
- (e) advertising and labelling of biological, pharmaceutical and similar products moving in international commerce.

Article 22

Regulations adopted pursuant to Article 21 shall come into force for all Members after due notice has been given of their adoption by the Health Assembly except for such Members as may notify the Director-General of rejection or reservations within the period stated in the notice.

Article 23

The Health Assembly shall have authority to make recommendations to Members with respect to any matter within the competence of the Organization.

CHAPTER VI

THE EXECUTIVE BOARD

Article 24

The Board shall consist of eighteen persons designated by as many Members. The Health Assembly, taking into account an equitable geographical distribution, shall elect the Members entitled to designate a person to serve on the Board. Each of these Members should appoint to the Board a person technically qualified in the field of health, who may be accompanied by alternates and advisers.

Article 25

These Members shall be elected for three years and may be re-elected ; provided that of the Members elected at the first session of the Health Assembly, the terms of six Members shall be for one year and the terms of six Members shall be for two years, as determined by lot.

Article 26

The Board shall meet at least twice a year and shall determine the place of each meeting.

Article 27

The Board shall elect its Chairman from among its Members and shall adopt its own rules of procedure.

Article 28

The functions of the Board shall be :

- (a) to give effect to the decisions and policies of the Health Assembly ;
- (b) to act as the executive organ of the Health Assembly ;
- (c) to perform any other functions entrusted to it by the Health Assembly ;
- (d) to advise the Health Assembly on questions referred to it by that body and on matters assigned to the Organization by conventions, agreements and regulations ;
- (e) to submit advice or proposals to the Health Assembly on its own initiative ;
- (f) to prepare the agenda of meetings of the Health Assembly ;
- (g) to submit to the Health Assembly for consideration and approval a general programme of work covering a specific period ;
- (h) to study all questions within its competence ;
- (i) to take emergency measures within the functions and financial resources of the Organization to deal with events requiring immediate action. In particular it may authorize the Director-General to take the necessary steps to combat epidemics, to participate in the organization of health relief to victims of a calamity and to undertake studies and research the urgency of which has been drawn to the attention of the Board by any Member or by the Director-General.

FIRST SCHEDULE—*continued.**Article 29*

The Board shall exercise on behalf of the whole Health Assembly the powers delegated to it by that body.

CHAPTER VII

THE SECRETARIAT

Article 30

The Secretariat shall comprise the Director-General and such technical and administrative staff as the Organization may require.

Article 31

The Director-General shall be appointed by the Health Assembly on the nomination of the Board on such terms as the Health Assembly may determine. The Director-General, subject to the authority of the Board, shall be the chief technical and administrative officer of the Organization.

Article 32

The Director-General shall be *ex officio* Secretary of the Health Assembly, of the Board, of all commissions and committees of the Organization and of conferences convened by it. He may delegate these functions.

Article 33

The Director-General or his representative may establish a procedure by agreement with Members, permitting him, for the purpose of discharging his duties, to have direct access to their various departments, especially to their health administrations and to national health organizations, governmental or non-governmental. He may also establish direct relations with international organizations whose activities come within the competence of the Organization. He shall keep Regional Offices informed on all matters involving their respective areas.

Article 34

The Director-General shall prepare and submit annually to the Board the financial statements and budget estimates of the Organization.

Article 35

The Director-General shall appoint the staff of the Secretariat in accordance with staff regulations established by the Health Assembly. The paramount consideration in the employment of the staff shall be to assure that the efficiency, integrity and internationally representative character of the Secretariat shall be maintained at the highest level. Due regard shall be paid also to the importance of recruiting the staff on as wide a geographical basis as possible.

Article 36

The conditions of service of the staff of the Organization shall conform as far as possible with those of other United Nations organizations.

Article 37

In the performance of their duties the Director-General and the staff shall not seek or receive instructions from any government or from any authority external to the Organization. They shall refrain from any action which might reflect on their position as international officers. Each Member of the Organization on its part undertakes to respect the exclusively international character of the Director-General and the staff and not to seek to influence them.

CHAPTER VIII

COMMITTEES

Article 38

The Board shall establish such committees as the Health Assembly may direct and, on its own initiative or on the proposal of the Director-General, may establish any other committees considered desirable to serve any purpose within the competence of the Organization.

FIRST SCHEDULE—*continued.**Article 39*

The Board, from time to time and in any event annually, shall review the necessity for continuing each committee.

Article 40

The Board may provide for the creation of or the participation by the Organization in joint or mixed committees with other organizations and for the representation of the Organization in committees established by such other organizations.

CHAPTER IX

CONFERENCES

Article 41

The Health Assembly or the Board may convene local, general, technical or other special conferences to consider any matter within the competence of the Organization and may provide for the representation at such conferences of international organizations and, with the consent of the government concerned, of national organizations, governmental or non-governmental. The manner of such representation shall be determined by the Health Assembly or the Board.

Article 42

The Board may provide for representation of the Organization at conferences in which the Board considers that the Organization has an interest.

CHAPTER X

HEAD-QUARTERS

Article 43

The location of the head-quarters of the Organization shall be determined by the Health Assembly after consultation with the United Nations.

CHAPTER XI

REGIONAL ARRANGEMENTS

Article 44

- (a) The Health Assembly shall from time to time define the geographical areas in which it is desirable to establish a regional organization.
- (b) The Health Assembly may, with the consent of a majority of the Members situated within each area so defined, establish a regional organization to meet the special needs of such area. There shall not be more than one regional organization in each area.

Article 45

Each regional organization shall be an integral part of the Organization in accordance with this Constitution.

Article 46

Each regional organization shall consist of a Regional Committee and a Regional Office.

Article 47

Regional Committees shall be composed of representatives of the Member States and Associate Members in the region concerned. Territories or groups of territories within the region, which are not responsible for the conduct of their international relations and which are not Associate Members, shall have the right to be represented and to participate in Regional Committees. The nature and extent of the rights and obligations of these territories or groups of territories in Regional Committees shall be determined by the Health Assembly in consultation with the Member or other authority having responsibility for the international relations of these territories and with the Member States in the region.

Article 48

Regional Committees shall meet as often as necessary and shall determine the place of each meeting.

Article 49

Regional Committees shall adopt their own rules of procedure.

FIRST SCHEDULE--*continued.**Article 50*

The functions of the Regional Committee shall be :

- (a) to formulate policies governing matters of an exclusively regional character ;
- (b) to supervise the activities of the Regional Office ;
- (c) to suggest to the Regional Office the calling of technical conferences and such additional work or investigation in health matters as in the opinion of the Regional Committee would promote the objective of the Organization within the region ;
- (d) to co-operate with the respective regional committees of the United Nations and with those of other specialized agencies and with other regional international organizations having interests in common with the Organization ;
- (e) to tender advice, through the Director-General, to the Organization on international health matters which have wider than regional significance ;
- (f) to recommend additional regional appropriations by the governments of the respective regions if the proportion of the central budget of the Organization allotted to that region is insufficient for the carrying out of the regional functions ;
- (g) such other functions as may be delegated to the Regional Committee by the Health Assembly, the Board or the Director-General.

Article 51

Subject to the general authority of the Director-General of the Organization, the Regional Office shall be the administrative organ of the Regional Committee. It shall, in addition, carry out within the region the decisions of the Health Assembly and of the Board.

Article 52

The head of the Regional Office shall be the Regional Director appointed by the Board in agreement with the Regional Committee.

Article 53

The staff of the Regional Office shall be appointed in a manner to be determined by agreement between the Director-General and the Regional Director.

Article 54

The Pan American sanitary organization represented by the Pan American Sanitary Bureau and the Pan American Sanitary Conferences, and all other inter-governmental regional health organizations in existence prior to the date of signature of this Constitution, shall in due course be integrated with the Organization. This integration shall be effected as soon as practicable through common action based on mutual consent of the competent authorities expressed through the organizations concerned.

CHAPTER XII

BUDGET AND EXPENSES

Article 55

The Director-General shall prepare and submit to the Board the annual budget estimates of the Organization. The Board shall consider and submit to the Health Assembly such budget estimates, together with any recommendations the Board may deem advisable.

Article 56

Subject to any agreement between the Organization and the United Nations, the Health Assembly shall review and approve the budget estimates and shall apportion the expenses among the Members in accordance with a scale to be fixed by the Health Assembly.

Article 57

The Health Assembly or the Board acting on behalf of the Health Assembly may accept and administer gifts and bequests made to the Organization provided that the conditions attached to such gifts or bequests are acceptable to the Health Assembly or the Board and are consistent with the objective and policies of the Organization.

Article 58

A special fund to be used at the discretion of the Board shall be established to meet emergencies and unforeseen contingencies.

FIRST SCHEDULE—*continued.*

CHAPTER XIII

VOTING

Article 59

Each Member shall have one vote in the Health Assembly.

Article 60

(a) Decisions of the Health Assembly on important questions shall be made by a two-thirds majority of the Members present and voting. These questions shall include: the adoption of conventions or agreements; the approval of agreements bringing the Organization into relation with the United Nations and inter governmental organizations and agencies in accordance with Articles 69, 70 and 72; amendments to this Constitution.

(b) Decisions on other questions, including the determination of additional categories of questions to be decided by a two-thirds majority, shall be made by a majority of the Members present and voting.

(c) Voting on analogous matters in the Board and in committees of the Organization shall be made in accordance with paragraphs (a) and (b) of this Article.

CHAPTER XIV

REPORTS SUBMITTED BY STATES

Article 61

Each Member shall report annually to the Organization on the action taken and progress achieved in improving the health of its people.

Article 62

Each Member shall report annually on the action taken with respect to recommendations made to it by the Organization and with respect to conventions, agreements and regulations.

Article 63

Each Member shall communicate promptly to the Organization important laws, regulations, official reports and statistics pertaining to health which have been published in the State concerned.

Article 64

Each Member shall provide statistical and epidemiological reports in a manner to be determined by the Health Assembly.

Article 65

Each Member shall transmit upon the request of the Board such additional information pertaining to health as may be practicable.

CHAPTER XV

LEGAL CAPACITY, PRIVILEGES AND IMMUNITIES

Article 66

The Organization shall enjoy in the territory of each Member such legal capacity as may be necessary for the fulfilment of its objective and for the exercise of its functions.

Article 67

(a) The Organization shall enjoy in the territory of each Member such privileges and immunities as may be necessary for the fulfilment of its objective and for the exercise of its functions.

(b) Representatives of Members, persons designated to serve on the Board and technical and administrative personnel of the Organization shall similarly enjoy such privileges and immunities as are necessary for the independent exercise of their functions in connexion with the Organization.

Article 68

Such legal capacity, privileges and immunities shall be defined in a separate agreement to be prepared by the Organization in consultation with the Secretary-General of the United Nations and concluded between the Members.

FIRST SCHEDULE—*continued.*

CHAPTER XVI

RELATIONS WITH OTHER ORGANIZATIONS

Article 69

The Organization shall be brought into relation with the United Nations as one of the specialized agencies referred to in Article 57 of the Charter of the United Nations. The agreement or agreements bringing the Organization into relation with the United Nations shall be subject to approval by a two-thirds vote of the Health Assembly.

Article 70

The Organization shall establish effective relations and co-operate closely with such other inter governmental organizations as may be desirable. Any formal agreement entered into with such organizations shall be subject to approval by a two-thirds vote of the Health Assembly.

Article 71

The Organization may, on matters within its competence, make suitable arrangements for consultation and co-operation with non-governmental international organizations and, with the consent of the government concerned, with national organizations, governmental or non-governmental.

Article 72

Subject to the approval by a two-thirds vote of the Health Assembly, the Organization may take over from any other international organization or agency whose purpose and activities lie within the field of competence of the Organization such functions, resources and obligations as may be conferred upon the Organization by international agreement or by mutually acceptable arrangements entered into between the competent authorities of the respective organizations.

CHAPTER XVII

AMENDMENTS

Article 73

Texts of proposed amendments to this Constitution shall be communicated by the Director-General to Members at least six months in advance of their consideration by the Health Assembly. Amendments shall come into force for all Members when adopted by a two-thirds vote of the Health Assembly and accepted by two-thirds of the Members in accordance with their respective constitutional processes.

CHAPTER XVIII

INTERPRETATION

Article 74

The Chinese, English, French, Russian and Spanish texts of this Constitution shall be regarded as equally authentic.

Article 75

Any question or dispute concerning the interpretation or application of this Constitution which is not settled by negotiation or by the Health Assembly shall be referred to the International Court of Justice in conformity with the Statute of the Court, unless the parties concerned agree on another mode of settlement.

Article 76

Upon authorization by the General Assembly of the United Nations or upon authorization in accordance with any agreement between the Organization and the United Nations, the Organization may request the International Court of Justice for an advisory opinion on any legal question arising within the competence of the Organization.

Article 77

The Director-General may appear before the Court on behalf of the Organization in connexion with any proceedings arising out of any such request for an advisory opinion. He shall make arrangements for the presentation of the case before the Court including arrangements for the argument of different views on the question.

FIRST SCHEDULE—*continued.*

CHAPTER XIX

ENTRY INTO FORCE

Article 78

Subject to the provisions of Chapter III, this Constitution shall remain open to all States for signature or acceptance.

Article 79

- (a) States may become parties to this Constitution by
- (i) signature without reservation as to approval;
 - (ii) signature subject to approval followed by acceptance; or
 - (iii) acceptance.
- (b) Acceptance shall be effected by the deposit of a formal instrument with the Secretary-General of the United Nations.

Article 80

This Constitution shall come into force when twenty-six Members of the United Nations have become parties to it in accordance with the provisions of Article 79.

Article 81

In accordance with Article 102 of the Charter of the United Nations, the Secretary-General of the United Nations will register this Constitution when it has been signed without reservation as to approval on behalf of one State or upon deposit of the first instrument of acceptance.

Article 82

The Secretary-General of the United Nations will inform States parties to this Constitution of the date when it has come into force. He will also inform them of the dates when other States have become parties to this Constitution.

IN FAITH WHEREOF the undersigned representatives having been duly authorized for that purpose, sign this Constitution.

DONE in the City of New York this twenty-second day of July 1946, in a single copy in the Chinese, English, French, Russian and Spanish languages, each text being equally authentic. The original texts shall be deposited in the archives of the United Nations. The Secretary-General of the United Nations will send certified copies to each of the Governments represented at the Conference.

ARGENTINA	.. ..	Alberto Zwanck	.. ..	ad referendum
AUSTRALIA	.. ..	A. H. Tange	.. ..	Subject to approval and acceptance by Government of Commonwealth of Australia
BELGIUM	.. ..	Dr. M. de Laet	.. ..	Subject to ratification
BOLIVIA	.. ..	Luis V. Sotelo	.. ..	ad referendum
BRAZIL	.. ..	Geraldo H. de Souza	Paula	ad referendum
BYELORUSSIAN SOVIET SOCIALIST REPUBLIC	.. ..	N. Evstafiev	.. ..	Subject to ratification by the Government
CANADA	.. ..	Brooke Claxton Brock Chisholm	.. ..	Subject to approval
CHILE	.. ..	Julio Bustos	.. ..	Subject to Constitutional approval
CHINA	.. ..	Shen J. K. L. Chin Yuan Szeming Sze	.. ..
COLOMBIA	.. ..	Carlos Uribe Aguirre	.. ..	ad referendum
COSTA RICA	.. ..	Jaime Benavides	.. ..	ad referendum
CUBA	.. ..	Dr. Pedro Nogueira Victor Santamarina	.. ..	ad referendum
CZECHOSLOVAKIA	.. ..	Dr. Josef Cancik	.. ..	ad referendum
DENMARK	.. ..	J. Oerskov	.. ..	ad referendum
DOMINICAN REPUBLIC	.. ..	Dr. L. F. Thomen	.. ..	ad referendum
ECUADOR	.. ..	R. Nevarez Vásquez	.. ..	ad referendum
EGYPT	.. ..	Dr. A. T. Choucha Taha Elsayed Nasr bey M. S. Abaza	.. ..	Subject to ratification
EL SALVADOR	.. ..	Aristides Moll	.. ..	ad referendum
ETHIOPIA	.. ..	G. Tesemma	.. ..	Subject to ratification

FIRST SCHEDULE—*continued.*

FRANCE	.. ..	J. Parisot	.. ..	ad referendum
GREECE	.. ..	Dr. Phokion Kopanaris	.. ..	ad referendum
GUATEMALA	.. ..	G. Morán	.. ..	ad referendum
		J. A. Muñoz		
HAITI	.. ..	Rulx León	.. ..	ad referendum
HONDURAS	.. ..	Juan Manuel Fiallos	.. ..	ad referendum
INDIA	.. ..	C. K. Lakshmanan	.. ..	Subject to ratification.
		C. Mani		These signatures are appended in agreement with His Majesty's Representative for the exercise of the func- tions of the Crown in its relations with the Indian States
IRAN	.. ..	Ghassem Ghani	.. ..	Subject to ratification by
		H. Hafezi		Iranian Parliament (Madjliss)
IRAQ	.. ..	S. Al-Zahawi	.. ..	ad referendum
		Dr. Ihsan Dogramaji		
LEBANON	.. ..	Georges Hakim	.. ..	ad referendum
		Dr. A. Makhlouf		
LIBERIA	.. ..	Joseph Nagbe Togba	.. ..	ad referendum
		John B. West		
LUXEMBOURG	.. ..	Dr. M. de Laet	.. ..	Subject to ratification.
MEXICO	.. ..	Mondragón	.. ..	ad referendum
NETHERLANDS	.. ..	C. van den Berg	.. ..	ad referendum
		C. Banning		
		W. A. Timmerman		
NEW ZEALAND	.. ..	T. R. Ritchie	.. ..	ad referendum
NICARAGUA	.. ..	A. Sevilla-Sacasa	.. ..	ad referendum
NORWAY	.. ..	Hans Th. Sandberg	.. ..	ad referendum
PANAMA	.. ..	J. J. Vallarino	.. ..	ad referendum
PARAGUAY	.. ..	Angel R. Ginés	.. ..	ad referendum
PERU	.. ..	Carlos Enrique Paz Soldán	.. ..	ad referendum
		A. Toranzo		
POLAND	.. ..	Edward Grzegorzewski	.. ..	ad referendum
REPUBLIC OF THE PHILIP- PINES	.. ..	H. Lara	.. ..	ad referendum
		Walfrido de Leon		
SAUDI ARABIA	.. ..	Dr. Yahia Nasri	.. ..	Subject to ratification
		Dr. Medhat Cheikh-Al- Ardh		
SYRIA	.. ..	Dr. C. Trefi	.. ..	Subject to ratification
TURKEY	.. ..	Z. N. Barker	.. ..	Subject to ratification. I sign subject to approval and confirma- tion by my Govern- ment
UKRAINIAN SOVIET SOCIALIST REPUBLIC	.. ..	L. I. Medved	.. ..	Subject to ratification by the Supreme Council of the Ukrainian Soviet Socialist Republic
		I. I. Kaltchenko		
UNION OF SOVIET SOCIAL- IST REPUBLICS	.. ..	F. G. Krotkov	.. ..	Subject to ratification by the Presidium of the Supreme Council of the USSR
UNION OF SOUTH AFRICA	.. ..	H. S. Gear	.. ..	ad referendum
UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND	.. ..	Melville D. Mackenzie	.. ..
		G. E. Yates		
UNITED STATES OF AMERICA	.. ..	Thomas Parran	.. ..	Subject to approval
		Martha M. Eliot		
		Frank G. Boudreau		
URUGUAY	.. ..	José A. Mora	.. ..	ad referendum
		R. Rivero		
		Carlos M. Barberousse		

FIRST SCHEDULE—*continued.*

VENEZUELA	A. Arceza Guzmán ..	ad referendum
YUGOSLAVIA	Dr. A. Stampar ..	With reservation as to ratification

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AFGHANISTAN			
ALBANIA	T. Jakova ..	With reservation
AUSTRIA	Dr. Marius Kaiser ..	With reservation
BULGARIA ..	..	Dr. D. P. Orahovatz ..	Subject to ratification
EIRE ..	..	John D. MacCormack ..	Subject to acceptance
FINLAND ..	..	Osmo Turpeinen ..	ad referendum
HUNGARY			
ICELAND			
ITALY ..	..	Giovanni Alberto Cana- peria	Subject to ratification
PORTUGAL ..	..	Francisco C. Cambournac	Subject to ratification
ROUMANIA			
SIAM ..	..	Bunliang Tamthai ..	Subject to approval
SWEDEN			
SWITZERLAND ..	..	Dr. J. Eugster A. Sauter	Subject to ratification
TRANSJORDAN ..	..	Dr. D. P. Tutunji ..	Subject to ratification
YEMEN			

Section 2.

SECOND SCHEDULE.

ARRANGEMENT CONCLUDED BY THE GOVERNMENTS REPRESENTED
AT THE INTERNATIONAL HEALTH CONFERENCE

Held in the City of New York, from 19 June to 22 July 1946

THE GOVERNMENTS represented at the International Health Conference convened on 19 June 1946 in the City of New York by the Economic and Social Council of the United Nations,

Having agreed that an international organization to be known as the World Health Organization shall be established,

Having this day agreed upon a Constitution for the World Health Organization, and

Having resolved that, pending the coming into force of the Constitution and the establishment of the World Health Organization, as provided in the Constitution, an Interim Commission should be established,

AGREE as follows:

1. There is hereby established an Interim Commission of the World Health Organization consisting of the following eighteen States entitled to designate persons to serve on it: Australia, Brazil, Canada, China, Egypt, France, India, Liberia, Mexico, Netherlands, Norway, Peru, Ukrainian Soviet Socialist Republic, United Kingdom, United States of America, Union of Soviet Socialist Republics, Venezuela and Yugoslavia. Each of these States should designate to the Interim Commission a person technically qualified in the field of health, who may be accompanied by alternates and advisers.

2. The functions of the Interim Commission shall be:

- (a) to convoke the first session of the World Health Assembly as soon as practicable, but not later than six months after the date on which the Constitution of the Organization comes into force;
- (b) to prepare and submit to the signatories to this Arrangement, at least six weeks before the first session of the Health Assembly, the provisional agenda for that session and necessary documents and recommendations relating thereto, including:
 - (i) proposals as to programme and budget for the first year of the Organization,
 - (ii) studies regarding location of headquarters of the Organization,
 - (iii) studies regarding the definition of geographical areas with a view to the eventual establishment of regional organizations as contemplated in Chapter XI of the Constitution, due consideration being given to the views of the governments concerned, and
 - (iv) draft financial and staff regulations for approval by the Health Assembly.

SECOND SCHEDULE—*continued*.

In carrying out the provisions of this paragraph due consideration shall be given to the proceedings of the International Health Conference.

- (c) to enter into negotiations with the United Nations with a view to the preparation of an agreement or agreements as contemplated in Article 57 of the Charter of the United Nations and in Article 69 of the Constitution. Such agreement or agreements shall :
- (i) provide for effective co-operation between the two organizations in the pursuit of their common purposes ;
 - (ii) facilitate, in conformity with Article 58 of the Charter, the co-ordination of the policies and activities of the Organization with those of other specialized agencies ; and
 - (iii) at the same time recognize the autonomy of the Organization within the field of its competence as defined in its Constitution.
- (d) to take all necessary steps to effect the transfer from the United Nations to the Interim Commission of the functions, activities, and assets of the League of Nations Health Organization which have been assigned to the United Nations ;
- (e) to take all necessary steps in accordance with the provisions of the Protocol concerning the *Office International d'Hygiène publique* signed 22 July 1946 for the transfer to the Interim Commission of the duties and functions of the *Office*, and to initiate any action necessary to facilitate the transfer of the assets and liabilities of the *Office* to the World Health Organization upon the termination of the Rome Agreement of 1907 ;
- (f) to take all necessary steps for assumption by the Interim Commission of the duties and functions entrusted to the United Nations Relief and Rehabilitation Administration by the International Sanitary Convention, 1944, modifying the International Sanitary Convention of 21 June 1926, the Protocol to Prolong the International Sanitary Convention, 1944, the International Sanitary Convention for Aerial Navigation, 1944, modifying the International Sanitary Convention for Aerial Navigation of 12 April, 1933, and the Protocol to Prolong the International Sanitary Convention for Aerial Navigation, 1944 ;
- (g) to enter into the necessary arrangements with the Pan American sanitary organization and other existing inter-governmental regional health organizations with a view to giving effect to the provisions of Article 54 of the Constitution, which arrangements shall be subject to approval by the Health Assembly ;
- (h) to establish effective relations and enter into negotiations with a view to concluding agreements with other inter-governmental organizations as contemplated in Article 70 of the Constitution ;
- (i) to study the question of relations with non-governmental international organizations and with national organizations in accordance with Article 71 of the Constitution, and to make interim arrangements for consultation and co-operation with such organizations as the Interim Commission may consider desirable ;
- (j) to undertake initial preparations for revising, unifying and strengthening existing international sanitary conventions ;
- (k) to review existing machinery and undertake such preparatory work as may be necessary in connexion with :
- (i) the next decennial revision of "The International Lists of Causes of Death" (including the lists adopted under the International Agreement of 1934 relating to Statistics of Causes of Death) ; and
 - (ii) the establishment of International Lists of Causes of Morbidity ;
- (l) to establish effective liaison with the Economic and Social Council and such of its commissions as may appear desirable, in particular the Commission on Narcotic Drugs ; and
- (m) to consider any urgent health problem which may be brought to its notice by any government, to give technical advice in regard thereto, to bring urgent health needs to the attention of governments and organizations which may be in a position to assist, and to take such steps as may be desirable to co-ordinate any assistance such governments and organizations may undertake to provide.
3. The Interim Commission may establish such committees as it considers desirable.
4. The Interim Commission shall elect its Chairman and other officers, adopt its own rules of procedure, and consult such persons as may be necessary to facilitate its work.

SECOND SCHEDULE—continued.

5. The Interim Commission shall appoint an Executive Secretary who shall :
- be its chief technical and administrative officer ;
 - be *ex officio* secretary of the Interim Commission and of all committees established by it ;
 - have direct access to national health administrations in such manner as may be acceptable to the government concerned ; and
 - perform such other functions and duties as the Interim Commission may determine.

6. The Executive Secretary, subject to the general authority of the Interim Commission, shall appoint such technical and administrative staff as may be required. In making these appointments he shall have due regard for the principles embodied in Article 35 of the Constitution. He shall take into consideration the desirability of appointing available personnel from the staffs of the League of Nations Health Organization, the *Office International d'Hygiène publique*, and the Health Division of the United Nations Relief and Rehabilitation Administration. He may appoint officials and specialists made available by governments. Pending the recruitment and organization of his staff, he may utilize such technical and administrative assistance as the Secretary-General of the United Nations may make available.

7. The Interim Commission shall hold its first session in New York immediately after its appointment and shall meet thereafter as often as may be necessary, but not less than once in every four months. At each session the Interim Commission shall determine the place of its next session.

8. The expenses of the Interim Commission shall be met from funds provided by the United Nations and for this purpose the Interim Commission shall make the necessary arrangements with the appropriate authorities of the United Nations. Should these funds be insufficient, the Interim Commission may accept advances from governments. Such advances may be set off against the contributions of the governments concerned to the Organization.

9. The Executive Secretary shall prepare and the Interim Commission shall review and approve budget estimates :

- for the period from the establishment of the Interim Commission until 31 December 1946, and
- for subsequent periods as necessary.

10. The Interim Commission shall submit a report of its activities to the Health Assembly at its first session.

11. The Interim Commission shall cease to exist upon resolution of the Health Assembly at its first session, at which time the property and records of the Interim Commission and such of its staff as may be required shall be transferred to the Organization.

12. This Arrangement shall come into force for all signatories on this day's date.

IN FAITH WHEREOF the undersigned representatives, having been duly authorized for that purpose, sign this Arrangement in the Chinese, English, French, Russian and Spanish languages, all texts being equally authentic.

SIGNED in the City of New York this twenty-second day of July 1946.

ARGENTINA	..	..	Alberto Zwanck	
AUSTRALIA	..	..	A. H. Tange	.. Subject to approval and acceptance by Government of Commonwealth of Australia
BELGIUM	..	..	Dr. M. de Laet	.. Subject to ratification
BOLIVIA	..	..	Luis V. Sotelo	
BRAZIL	..	..	Geraldo H. de Paula Souza	
BYELORUSSIAN SOVIET SOCIALIST REPUBLIC			N. Evstafiev	
CANADA	..	..	Brooke Claxton Brock Chisholm	
CHILE	..	..	Julio Bustos	
CHINA	..	..	Shen J. K. L. Chin-Yuan Szeming Sze	
COLOMBIA	..	..	Carlos Uribe Aguirre	
COSTA RICA	..	..	Jaime Benavides	
CUBA	..	..	Dr. Pedro Nogueira Victor Santamarina	.. ad referendum

SECOND SCHEDULE—continued.

CZECHOSLOVAKIA	..	Dr. Josef Cančík	..	ad referendum
DENMARK	..	J. Oerskov	..	ad referendum
DOMINICAN REPUBLIC	..	Dr. L. F. Thomen		
ECUADOR	..	R. Nevarez Vásquez		
EGYPT	..	Dr. A. T. Choucha		
		Taha Elsayed Nasr bey		
		M. S. Abaza		
EL SALVADOR	..	Aristides Moll	..	ad referendum
ETHIOPIA	..	G. Tesemma		
FRANCE	..	J. Parisot		
GREECE	..	Dr. Phokion Kopanaris		
GUATEMALA	..	G. Morán	..	ad referendum
		J. A. Muñoz		
HAITI	..	Rulx León		
HONDURAS	..	Juan Manuel Fiallos		
INDIA	..	C. K. Lakshmanan	..	These signatures are appended in agreement with His Majesty's Representative for the exercise of the func- tions of the Crown in its relations with the Indian States.
		C. Mani		
IRAN	..	Ghosseme Ghani		
		H. Hafezi		
IRAQ	..	S. Al-Zahawi		
		Dr. Ihsan Dogramaji		
LEBANON	..	Georges Hakim		
		Dr. A. Makhlouf		
LIBERIA	..	Joseph Nagbe Togba		
		John B. West		
LUXEMBOURG	..	Dr. M. de Laet	..	Subject to ratification
MEXICO	..	Mondragón		
NETHERLANDS	..	C. van den Berg	..	ad referendum
		C. Banning		
		W. A. Timmerman		
NEW ZEALAND	..	T. R. Ritchie	..	ad referendum
NICARAGUA	..	A. Sevilla-Sacasa	..	ad referendum
NORWAY	..	Hans Th. Sandberg	..	ad referendum
PANAMA	..	J. J. Vallarino	..	ad referendum
PARAGUAY	..	Angel R. Ginés		
PERU	..	Carlos Enrique Paz Soldán		
		A. Toranzo		
POLAND	..	Edward Grzegorzewski		
REPUBLIC OF THE PHILIP- PINES	..	H. Lara		
		Walfrido de Leon		
SAUDI ARABIA	..	Dr. Yahia Nasri		
		Dr. Medhat Cheikh-Al- Ardh		
SYRIA	..	Dr. C. Treli		
TURKEY	..	Z. N. Barker		
UKRAINIAN SOVIET SOC- IALIST REPUBLIC	..	I. I. Medved		
		I. I. Kaltchenko		
UNION OF SOVIET SOCIAL- IST REPUBLICS	..	F. G. Krotkov		
UNION OF SOUTH AFRICA	..	H. S. Gear	..	ad referendum
UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND	..	Melville D. Mackenzie		
		G. E. Yates		
UNITED STATES OF AMERICA	..	Thomas Parran		
		Martha M. Eliot		
		Frank G. Boudreau		
URUGUAY	..	José A. Mora		
		R. Rivero		
		Carlos M. Barberousse		
VENEZUELA	..	A. Arreaza Guzmán		

SECOND SCHEDULE—*continued.*

YUGOSLAVIA ..	..	Dr. A. Stampar
		* * *
AFGHANISTAN		
ALBANIA ..	..	T. Jakova
AUSTRIA ..	..	Dr. Marius Köiser
BULGARIA ..	..	Dr. D. P. Orshovatz
ELIZ ..	..	John D. MacCormack
FINLAND ..	..	Osmo Turpeinen
HUNGARY		
ICELAND		
ITALY ..	..	Giovanni Alberto Cana- peria
PORTUGAL ..	..	Francisco C. Cambournac
ROUMANIA		
SIAM ..	..	Bunliang Tamthai
SWEDEN		
SWITZERLAND ..	..	Dr. J. Eugster A. Sauter
TRANSJORDAN ..	..	Dr. D. P. Tutunji
YEMEN		
