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Argentina Exits WHO – The Rise of Health Sovereignty and Its Dangers

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Argentina Exits WHO — The Rise of Health Sovereignty and Its Dangers

 The Indian Express

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INTERVIEW ANGLE

"Is the withdrawal of major nations from multilateral health institutions like WHO a threat to global pandemic preparedness, or a legitimate assertion of national sovereignty?"

WHY IN NEWS

Argentina became the second country to formally withdraw from the World Health Organization (WHO) in March 2026, following the United States. President Javier Milei cited “health sovereignty” and opposition to what he called WHO’s “ideological overreach.”

The Editorial Argument

The Indian Express editorial warns that the growing “health sovereignty” movement — now claiming two major nations — threatens the multilateral architecture built after World War II to prevent pandemics. The editorial argues that WHO, despite its flaws, remains the only institution capable of coordinating global disease surveillance, vaccine equity, and emergency response.

WHO — Structure and Governance

FEATURE	DETAIL
Founded	April 7, 1948 (World Health Day)
Headquarters	Geneva, Switzerland
Member states	194 (before withdrawals)
Director-General	Dr. Tedros Adhanom Ghebreyesus (since 2017, re-elected 2022)
Governing body	World Health Assembly (WHA) — meets annually in May
Budget (2024-25 biennium)	~\$6.83 billion
Withdrawal notice	1 year under WHO Constitution

The Withdrawal Timeline

DATE	EVENT
January 20, 2025	US President Trump signs executive order to withdraw from WHO
January 2026	US withdrawal takes effect (after 1-year notice)
March 2026	Argentina's President Milei announces withdrawal
March 2027 (expected)	Argentina's withdrawal takes effect

Why Nations Are Leaving

Both the US and Argentina cite similar grievances:

- ❶ **Pandemic response failures:** WHO's delayed declaration of COVID-19 as a pandemic (March 11, 2020) and perceived deference to China in the early weeks
- ❷ **“Ideological overreach”:** Objections to WHO's positions on gender identity, reproductive health, and climate-health nexus
- ❸ **Funding imbalance:** The US contributed ~22% of WHO's assessed contributions — the largest single donor
- ❹ **Sovereignty concerns:** Opposition to the proposed Pandemic Treaty (under negotiation since 2021), which would create binding international health regulations

Impact on Global Health

Financial

- US withdrawal removes ~\$1.5 billion in annual funding (assessed + voluntary contributions)
- Argentina's contribution is smaller (~\$15 million/year) but the political signal is damaging
- WHO is already chronically underfunded — only 16% of its budget comes from mandatory assessed contributions; the rest is voluntary and earmarked

Operational

- **Disease surveillance:** WHO coordinates the Global Outbreak Alert and Response Network (GOARN). Fewer members mean weaker surveillance coverage
- **Vaccine equity:** COVAX (co-led by WHO) distributed 2 billion+ COVID vaccines to low-income countries. Without major donors, future vaccine equity programmes are at risk
- **Pandemic Treaty:** Negotiations (ongoing since December 2021) may collapse if more nations exit

India's Position

India has consistently supported WHO while pushing for reforms:

- India is the **world's largest vaccine manufacturer** (Serum Institute, Bharat Biotech, Biological E) — WHO's prequalification programme is critical for market access
- India supported the **Pandemic Treaty** negotiations but seeks protections for domestic pharma/vaccine IP
- India contributed to COVAX and supplied 250+ million vaccine doses to 100+ countries during COVID-19
- India's assessed WHO contribution: ~0.9% of budget (~\$30 million/year)

The Multilateral Health Architecture at Risk

The WHO withdrawal trend coincides with broader multilateral retreat:

INSTITUTION	CHALLENGE
WHO	US and Argentina withdrawals
WTO	Appellate Body dysfunctional since 2019
Paris Agreement	US withdrew (2017-2021, then rejoined, now uncertain)
UN Human Rights Council	US withdrew 2018, rejoined 2021, now uncertain
UNESCO	US withdrew 2017, rejoined 2023

The editorial concludes that India should lead a coalition of “middle powers” (Brazil, South Africa, Indonesia, Nigeria) to reform WHO from within rather than abandon it.

UPSC RELEVANCE

WHO founding date, headquarters, DG, World Health Day (April 7), assessed contributions, Pandemic Treaty

Multilateral institutions — relevance and reform; global health governance; India’s role in vaccine diplomacy

★ FACTS CORNER — KNOWLEDGEPEDIA

WORLD HEALTH ORGANIZATION:

Founded: April 7, 1948; Headquarters: Geneva, Switzerland

Member states: 194 (pre-withdrawal); DG: Dr. Tedros Adhanom Ghebreyesus (since 2017)

Governing body: World Health Assembly (WHA); meets annually in May

Budget (2024-25): ~\$6.83 billion; assessed contributions: only 16%

World Health Day: April 7 (anniversary of WHO Constitution coming into force)

WITHDRAWALS:

US: Executive order January 20, 2025; effective January 2026

Argentina: Announced March 2026; effective March 2027 (1-year notice)

US was largest single contributor: ~22% of assessed contributions (~\$1.5 billion total)

INDIA AND WHO:

India: World's largest vaccine manufacturer (SII, Bharat Biotech, Biological E)

India supplied 250+ million COVID vaccine doses to 100+ countries

India's assessed WHO contribution: ~0.9% (~\$30 million/year)

India supports Pandemic Treaty but seeks pharma IP protections

OTHER RELEVANT FACTS:

COVAX: Co-led by WHO, Gavi, CEPI; distributed 2 billion+ COVID vaccines to LICs

GOARN: Global Outbreak Alert and Response Network (WHO's surveillance arm)

Pandemic Treaty: Under negotiation since December 2021 at WHA special session

IHR (2005): International Health Regulations — binding on all WHO members

Sources: [Indian Express](#), [WHO](#), [The Hindu](#)



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