

**Multilingualism as a Legal Obligation
in the World Health Organization
التعدد اللغوي كالتزام قانوني في منظمة الصحة العالمية**

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Abstract:

Multilingualism has emerged as a significant issue within international organizations from both legal and practical perspectives. This paper examines multilingualism as a legal obligation and an institutional practice within the World Health Organization (WHO). It analyzes the legal foundations of multilingualism as established in the WHO Constitution and key resolutions, which recognize the equal status of six official languages in the Organization's work. The study further explores how multilingualism is implemented in practice through meetings, documentation, publications, and digital communication. Despite this legal framework, the paper highlights the continued dominance of English and the unequal use of other official languages, revealing a gap between formal commitments and practical application. The paper concludes that multilingualism within the WHO is essential not only as a legal requirement, but also as a means to promote fairness, enhance access to information, and ensure inclusive participation of Member States in global health governance.

Keywords:

Linguistic Diversity; World Health Organization; Linguistic Equality;
Official Languages; International Law

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ملخص:

يتناول هذا المقال إشكالية التعدد اللغوي باعتباره التزاما قانونيا داخل المنظمات الدولية، مع التركيز على منظمة الصحة العالمية كنموذج للدراسة. ويهدف إلى تحليل مدى التزام المنظمة بتطبيق مبدأ المساواة اللغوية كما هو منصوص عليه في إطارها القانوني والتنظيمي، وذلك من خلال مقارنة النصوص القانونية بالممارسات المؤسسية الفعلية. يعتمد البحث على المنهجين الوصفي والتحليلي، حيث يتم استعراض القواعد القانونية للمنظمة للتعدد اللغوي داخل المنظمة، ثم تقييم كيفية تطبيقها عمليا في مختلف هياكلها ووظائفها. ويظهر التحليل أن المنظمة قد أرست إطارا قانونيا متكاملًا يعترف بالمساواة بين اللغات الرسمية، ويؤكد على أهمية التعدد اللغوي في تعزيز الشفافية والمشاركة. غير أن الدراسة تكشف عن وجود فجوة بين هذا الإطار القانوني والتطبيق العملي، حيث تستمر هيمنة اللغة الإنجليزية في العديد من مجالات العمل، نتيجة لعوامل مؤسسية وعملية، من بينها القيود المرتبطة بالموارد والكفاءة الإدارية. ويخلص المقال إلى أن تحقيق المساواة اللغوية داخل المنظمات الدولية لا يتوقف على الاعتراف القانوني فقط، بل يتطلب أيضا إرادة مؤسسية، وتخصيصا كافيا للموارد، واعتماد آليات فعالة لضمان التطبيق المتوازن للسياسات اللغوية، بما يعزز شرعية هذه المنظمات وفعاليتها أدائها في الحوكمة العالمية.

الكلمات المفتاحية:

التعدد اللغوي، منظمة الصحة العالمية، اللغات الرسمية، المساواة اللغوية، قانون دولي.

Introduction:

language plays an important role in shaping communication, identity, and cooperation among nations. It is not only a tool for exchanging ideas but also a mirror of cultural heritage and national identity. In international relations, language is more than communication; it is also a way of negotiation, diplomacy, and expressing legal ideas. For this reason, linguistic diversity has become an important legal and institutional matter for international organizations.

In recent decades, globalization has increased contact between states and international organizations. This has made multilingualism a key element in global cooperation. In these organizations,

multilingualism is not only about better communication, but also about equality, inclusion, and respect for cultural diversity.

The World Health Organization is a good example of how multilingualism works both as a legal duty and as a daily institutional practice. As a specialized agency of the United Nations, the WHO uses six official languages and applies this policy in its Constitution, resolutions, and working documents. This institutional framework reflects a formal commitment to linguistic equality and inclusive participation among Member States.

This study aims to examine the legal basis and practical use of multilingualism in the WHO. It tries to show how the Organization sets multilingualism as a legal rule and how it applies this rule in daily work, meetings, and digital communication. The study attempts to assess the effectiveness of these practices in achieving genuine linguistic equality. The study also points out the main challenges that limit full linguistic equality, such as the dominance of English and the weak use of other official languages.

Many international organizations consider multilingualism a legal obligation. However, putting this principle into practice is not always easy. This raises main question: To what extent does the World Health Organization succeed in reconciling its legal obligations toward multilingualism with the practical challenges of implementing this principle in daily work and official activities?

This paper argues that although multilingualism is a legal duty in the WHO, the way it is applied in practice shows a clear imbalance. English remains the dominant language, and this creates a gap between what the law says and what happens in reality. This gap is not just about technical problems; it also relates to how the Organization manages its resources, makes decisions, and distributes power among Member States.

To answer this question, the study uses a legal and institutional approach. It looks at the legal texts of the WHO and compares them with actual practices. The study evaluates the Organization's performance based on three main points: whether all languages have equal legal status, whether resources are fairly distributed among them, and whether all Member States can truly participate in their own language.

1.Linguistic Diversity in the International System:

Multilingualism is very important for fair participation in international relations. It helps countries and people take part equally in the work of international organizations. Many of these organizations follow legal rules that support the use of different languages. These rules help make communication more fair and clear, and they also protect the rights of people to understand and take part. Language also gives power to individuals and supports the idea of equality, especially when the world is facing big challenges like migration, globalization, and cultural differences. In this sense, multilingualism is not only a practical need but also a principle of justice and fairness in international law.

1.1 An overview of the concept of multilingualism

The idea of multilingualism has changed a lot over time. It has become important in different fields like linguistics, sociology, and international relations. As people around the world communicate more and societies become more diverse in language, understanding multilingualism is now important not only for individuals but also for institutions and international organizations.

In international organizations such as the United Nations, multilingualism plays a formal and institutional role. It involves the fair and balanced use of official and working languages in both communication and the production of official documents. (Fall & Zhang, 2011, p. XX)

The European Commission (2007) provides a broader definition of multilingualism, describing it as “the ability of societies, institutions, groups, and individuals to engage, on a regular basis, with more than one language in their day-to-day lives.” This perspective emphasizes that multilingualism is not limited to individuals but also applies to how institutions function. (Nesba, 2021, p. 1054)

These definitions reflect the growing importance of multilingualism at the international level. While general understandings focus on individual or social language use, international organizations approach multilingualism through structured and legal frameworks. Within these institutions, multilingualism is considered a core principle that promotes linguistic equality and requires the implementation of policies that respect language diversity. (King, 2017, p. 06) However, this institutionalization of multilingualism also raises questions about the extent to which such policies are effectively implemented in practice, particularly in complex bureaucratic settings.

.12. The Role and Importance of Multilingualism in International Organizations

Multilingualism is essential for how international organizations operate. It's more than just a communication tool, it's a principle that helps ensure fairness and inclusion among member states that come from many different linguistic and cultural backgrounds. Besides that, it reflects important legal values like equality, sovereignty, and justice.

International organizations bring together sovereign states that work under agreements and have their own structures. Their goals usually cover peace, security, development, and health. (Auguste, 2004, p. 05) In this context, multilingualism is key to making sure communication among member states is fair and inclusive, despite their different languages.

Because these organizations handle important tasks like making policies, negotiating treaties, and creating international rules, they need to use multiple languages. This shows respect for diversity and the idea that all states are equal (Martens, Niemann, & Kaasch, 2021, p. xx). For example, the Vienna Statement on Multilingualism (2016), supported by over 60 international organizations, emphasizes how multilingualism helps promote peace, dialogue, and understanding. It also stresses the value of local languages in areas like humanitarian aid, development cooperation, and digital communication. (United Nations Office, 2016)

Promoting multilingualism also supports Sustainable Development Goal 16, which aims for inclusive and accountable institutions. By having fair language policies, organizations let all members take part fully in decisions. This improves transparency, justice, cooperation, and strengthens their legitimacy. (United Nations General Assembly, 2024, p. 01) Nevertheless, the effectiveness of multilingualism in achieving these goals depends largely on the extent to which it is implemented beyond formal recognition, particularly in everyday institutional practices.

1.3The Legal Dimensions of Multilingualism in International Organizations

Multilingualism is not just about communication or administration; it's also a legal necessity. It reflects the principle that all member states are equal and protects individuals' rights to access legal information and services in their own language. From a legal standpoint, multilingualism contributes to the legitimacy of

international norms by ensuring that they are accessible and equally understood by all parties concerned.

1.3. 1 Multilingualism as a Legal Obligation

Many international charters include multilingualism as a binding legal rule. For instance, Article 111 of the UN Charter states that the Chinese, French, Russian, Spanish, and English texts are all equally authentic. Similarly, the Marrakesh Agreement (WTO) confirms that English, French, and Spanish versions have equal legal authority. (Agreement Establishing the World Trade Organization). These provisions illustrate that multilingualism is embedded within the legal structure of international organizations as a guarantee of normative equality.

1.3.2 A Tool to Promote Equality Among States

Using multiple languages ensures equal participation. For example, the African Union's Constitutive Act allows Arabic, English, French, Portuguese, and African languages (where possible) as working languages. Likewise, the Organization of American States recognizes English, French, Portuguese, and Spanish as official languages, ensuring balanced representation. (Article 25 of the Constitutive Act of the African Union) .In this regard, language policy becomes a mechanism through which the principle of sovereign equality is operationalized in institutional settings.

1.3.3 Guaranteeing Procedural Legitimacy

Language equality is important for the fairness of legal processes. The International Court of Justice uses French and English as official languages. In the Frontier Dispute Case (Burkina Faso v. Mali, 1986), differences between French and English treaty versions led to different interpretations. The Court had to study what the parties really meant, showing why language precision matters in international law. (International Court of Justice, 1986) . This example shows that language differences can directly affect legal interpretation, which reinforces the importance of accuracy in multilingual legal texts.

1.3.4 An Individual Legal Right

Multilingualism also protects individual rights, especially in the EU. According to Articles 21, 22, and 41(4) of the EU Charter of

Fundamental Rights, every citizen can communicate with EU institutions in their own official language and receive answers in the same language. This helps prevent language discrimination and ensures access to justice. (Phoebus, 2006, p. 06). Thus, multilingualism goes beyond relations between states to include individual rights, serving as both a collective and personal legal guarantee.

2.Multilingualism in the World Health Organization:

Multilingualism has always been a core part of how the World Health Organization operates. It is not just a principle on paper; it is supported by legal foundations and practical measures aimed at ensuring its implementation. The legal framework plays a central role in shaping the Organization's language policies and guiding its multilingual communication practices. However, the existence of a formal legal framework does not necessarily guarantee its full and effective implementation in practice, which raises important questions about institutional performance.

operationalize multilingualism, the WHO has developed a structured strategy. This includes setting priorities for translation, standardizing terminology, creating dedicated editorial teams, developing digital language tools, providing language training, and appointing a coordinator for multilingualism efforts. (Fall & Zhang, , p. 12). These measures show an institutional commitment to multilingualism, yet their effectiveness depends on available resources and administrative practices.

2.1An Overview of the World Health Organization

The WHO was established in 1948 and has since become the leading global authority on public health. Its main objective is to promote health, respond to emergencies, and support countries in strengthening their health systems (Article 01 of the Constitution of the World Health Organization, 1948). With 194 Member States, the Organization has a truly global scope.

The organization is structured around three main bodies: the World Health Assembly, the Executive Board, and the Secretariat. (Article 09 of WHO Constitution, 1948) These work together as the legislative, executive, and administrative arms to keep the WHO running smoothly and tackling health challenges worldwide . (Articles 10,37 of WHO Constitution, 1948)

What's also interesting is that the WHO has regional offices around the world. These offices focus on local health issues and make

sure global strategies fit the specific needs of each area. This regional approach helps the WHO respond more effectively. (Article 44 of WHO Constitution) . From a multilingual perspective, this diversity of regional contexts makes effective language policies even more necessary to accommodate linguistic variation across regions.

Finally, the WHO collaborates closely with national governments, United Nations agencies, and international partners, all working toward the shared goal of health equity and universal health coverage. Such a complex network of actors makes multilingual communication not only desirable but necessary for effective coordination and inclusive governance.

2.2The Importance of Multilingualism in the WHO

The World Health Organization sees multilingualism as a key element for effective communication and fair participation in international health matters. With 194 member states, each having different languages and cultures, the WHO naturally works in a multilingual environment. (Fall & Zhang, p. 14)

Multilingualism is not just a practical solution, it is also a legal and institutional responsibility. It helps ensure that all countries have equal access to health information and can respond quickly during emergencies. For example, platforms like Open WHO provide health materials, including outbreak-related content, in more than **30 languages**, showing how the WHO applies this principle in practice. (Lozinskiy, 2020)

Beyond its practical role, multilingualism helps make the Organization more transparent and inclusive. It also supports the spread of reliable health information. However, the success of these efforts must be judged in light of ongoing language imbalances, especially the continued dominance of English in many areas of communication. By including different languages in its daily work, the WHO helps make health services more available and understandable for everyone, and supports the goal of universal health coverage. (Secretariat of WHO, 2007)

2.3Legal Basis for Multilingualism

Since its creation in 1948, the World Health Organization has considered multilingualism a core legal and institutional principle. The WHO Constitution clearly supports this idea. At first, it recognized English and French as working languages. Later, it added Arabic, Chinese, Russian, and Spanish, bringing the language policy in line with that of the United Nations. Article 51 of the WHO Constitution

confirms that these six languages are official and must be used in speeches and official records.

The choice of these languages reflects broader practices in the UN system and takes into account historical and geopolitical factors. In the beginning, the WHO followed the official languages of the UN Security Council: Chinese, English, French, Russian, and Spanish and then added Arabic in 1977.

This shows WHO's commitment to international standards and its goal of improving global communication. The Organization continues to apply this commitment through the regular use of all six official languages in legal documents, decisions, and official procedures. For example, World Health Assembly resolutions WHA50.32 and WHA71.15 both emphasized the equal use of the six languages in meetings, correspondence, and official publications. (World Health Assembly, 2018)

This legal obligation is further strengthened by the International Health Regulations, which state in Article 66 that all communications and reports submitted under these regulations must be in one of the six official WHO languages. This rule helps establish linguistic equality as a legal standard in global health governance. (Article 66 of the International Health Regulations , 2005)

While these legal provisions create a clear framework for language equality, their application in practice remains uneven. This gap between formal legal recognition and actual institutional practices is a central issue in evaluating how effective multilingualism really is within the WHO.

2.4 Language Status in the WHO

The World Health Organization follows a well-defined multilingual system that distinguishes between official and working languages. According to Article 34 of the WHO Constitution, the six official languages of the Organization are Arabic, Chinese, English, French, Russian, and Spanish. These languages are used in all major meetings of the Organization's governing bodies and for the production of official documents. Each version holds equal legal value, ensuring full linguistic equality in formal procedures.

Working languages, on the other hand, are used in daily communication among staff members and delegates. Initially, English was the main internal working language, with French playing a secondary role. However, as the WHO's responsibilities grew globally, the World Health Assembly adopted Resolution WHA61.12 (2008),

which called for the gradual inclusion of all six official languages as working languages, especially during regional and formal sessions. This resolution aimed to enhance linguistic diversity and promote fair participation from all Member States in the Organization's routine operations. (World Health Assembly, 2008, p. 02)

Despite these efforts, the distinction between official and working languages has contributed to reinforcing linguistic inequality in practice, as the predominance of English in internal communication continues to shape institutional behavior. This situation illustrates the tension between legal equality and functional efficiency within international organizations.

3.Implementation of multilingualism in WHO:

The World Health Organization has adopted a range of strategic and practical measures to implement and promote multilingualism throughout its institutional structure. Since the early 2000s, the World Health Assembly has regularly highlighted the importance of linguistic equity through a series of resolutions, particularly urging equal treatment of all six United Nations official languages in the WHO's work. In response, the organization introduced several initiatives, such as improved access to documents and publications in all official languages and appointed a Special Coordinator to lead and support multilingualism efforts across the organs of the organization.

While these measures show a clear institutional commitment, their effectiveness must be judged by actual results, not just formal declarations. This requires examining whether multilingualism is truly put into practice or remains partly symbolic.

3.1The language practices in organs of the WHO

The World Health Organization employs six official languages :Arabic, Chinese, English, French, Russian, and Spanish, across its principal organs. These languages are used both as official and working languages, reflecting the Organization's sustained commitment to linguistic equality and the inclusive participation of all Member States. However, having both official and working languages also creates a practical hierarchy that affects how languages are actually used within the Organization.

As the Organization's supreme decision-making body, the World Health Assembly has consistently reaffirmed this commitment through various resolutions. Notably, Resolutions WHA50.32 and WHA71.15 underscore the importance of ensuring the equal and balanced use of the six official languages in all meetings, documentation, and official

communications. These formal commitments establish a clear framework for language equality, but their practical impact depends on how well they are actually implemented.

A further distinction was introduced by Resolution WHA31.13 (1978), which differentiates between official languages, designated for interpretation and publication, and working languages, which are employed in the internal communication of the Secretariat and technical staff. This policy aims to balance operational efficiency with the principles of multilingualism. In practice, however, this distinction tends to favor certain working languages, particularly English, thereby creating a gap between formal equality and actual use.

Historically, English has been the dominant language used in internal communication, with French also playing a significant role. However, in response to the Organization's growing global responsibilities, the World Health Assembly adopted Resolution WHA61.12 (2008), which encourages the progressive use of all six official languages in the Organization's daily functions, particularly within its governing bodies. This development demonstrates the WHO's intent to enhance inclusivity and cultural respect in its operations. (Kudryavtsev & Ouedraogo, 2002, p. 10) Nevertheless, the continued dominance of English suggests that these reforms have only partly succeeded in changing long-standing language practices.

In the context of the Executive Board, language use is governed by specific procedural rules. According to Article 20 of its Rules of Procedure, the Secretariat is required to prepare concise summaries of each session in the working languages, which are promptly distributed to members. Members are permitted to submit written corrections within a period defined by the Director-General, thereby promoting both accuracy and transparency in official records. While these procedures aim to be inclusive, relying on working languages may still limit full language equality in discussions.

Additionally, Article 5 of the same Rules mandates that the Director-General must send official invitations and circulate all relevant working documents in the six languages at least six weeks prior to each session. These materials are also made available online, enhancing accessibility and enabling broader participation, regardless of linguistic background. Despite these guarantees, differences in the timing, quality, or availability of translations may affect the ability of all Member States to participate equally in the Organization's activities.

3 .2Language Equality in WHO Policies

The World Health Organization has consistently affirmed its institutional commitment to the principle of linguistic equality, recognizing it as a cornerstone for inclusivity, fairness, and respect for cultural diversity. In this context, the World Health Assembly has repeatedly emphasized that all official languages of the Organization must be accorded equal status in every aspect of its operations. This formal recognition creates a strong foundation for multilingualism and positions it as a key part of institutional legitimacy.

This position is clearly articulated in Resolution WHA71.15 (2018), which reaffirmed that achieving linguistic equality is essential to ensuring the equal participation of all Member States and to preserving the Organization's commitment to cultural and linguistic pluralism. The resolution calls for the equitable use **of the** six official United Nations languages: Arabic, Chinese, English, French, Russian, and Spanish, across all WHO communications, documents, and meetings. This comprehensive and inclusive approach applies not only to the work conducted at WHO headquarters, but also extends to its regional offices and country-level representations. (World Health Assembly, 2018)

In furtherance of this principle, Resolution WHA50.32 (1997) established procedural obligations requiring the WHO Secretariat to ensure that all documentation related to the agendas of the World Health Assembly and the Executive Board is made available simultaneously in all six official languages. This obligation has been effectively implemented since 1998, reflecting WHO's operational capacity to uphold linguistic equity in practice.

Moreover, during all sessions of WHO governing bodies, simultaneous interpretation into the six official languages is provided, thereby safeguarding the right of delegates to participate meaningfully and without linguistic disadvantage. This practice contributes to procedural fairness, promotes transparency, and reinforces the WHO's broader mandate of fostering inclusive global health governance. (World Health Organization, 2004, p. 01)

Despite these formal guarantees, the implementation of language equality remains uneven in practice, as administrative and resource-related challenges may affect its full realization.

3.3 Language Services and Documentation in WHO

In accordance with Articles 90 and 92 of the Rules of Procedure of the World Health Assembly, the WHO Secretariat is mandated to prepare verbatim records of plenary meetings and summary reports of committee discussions. Upon the conclusion of each session, the Director-General is required to transmit the final documentation, including all resolutions, recommendations, and related instruments, to Member States, observers, and concerned UN entities.

To uphold the principle of linguistic equality and ensure that documentation is accessible to all stakeholders, the WHO has established specialized language services across its headquarters and major regional offices. These services are entrusted not only with the translation and production of official documents, but also with the oversight of multilingual corporate communications and publications. In order to maintain high standards of quality and terminological consistency, certain technical and scientific texts are outsourced to certified external translators, particularly when addressing complex subject matter. (Director-General of WHO, 2019, p. 03)

The importance of multilingual documentation is further reinforced by Resolution WHA50.32 (1997), which introduced binding procedural obligations on the Secretariat. The resolution mandates the simultaneous provision of documents related to the agendas of the Health Assembly and the Executive Board in all six official languages. Since its implementation in 1998, this policy has significantly advanced the Organization's commitment to linguistic equity. (World Health Organization, 2004, p. 01)

Additionally, the WHO ensures simultaneous interpretation into Arabic, Chinese, English, French, Russian, and Spanish during all official sessions of its governing organs, thereby guaranteeing equal access to deliberative processes for all delegations, irrespective of their linguistic backgrounds.

In terms of administrative communications, WHO Headquarters annually issues over 45 circular letters addressed to Member States and more than 4,000 individualized letters to senior government officials and institutional partners. These correspondences are dispatched in the official languages preferred by each Member State. Likewise, regional offices maintain linguistic alignment with the dominant languages of their respective regions, thereby ensuring effective and culturally sensitive communication across all organizational levels. (Director-General of WHO, 2019, p. 03)

Nevertheless, operational challenges remain. The prioritization of certain documents, reliance on external translation services, and possible delays in document availability may affect equal access to information. These limitations show the practical difficulties of fully implementing multilingualism within a complex institutional framework.

3.4 Interpreter and Translation Services for Meetings

In accordance with the World Health Organization's institutional commitment to linguistic equity and inclusive governance, the Organization provides real-time interpretation and translation services during its official meetings, conferences, and deliberative sessions. These services are fundamental in ensuring that all Member States, regardless of their linguistic background, may participate effectively, express positions clearly, and contribute meaningfully to the decision-making process in their preferred official language.

Simultaneous interpretation is systematically guaranteed in the six official languages of the Organization during the sessions of the World Health Assembly, the Executive Board, and regional committees. This multilingual infrastructure ensures not only procedural fairness, but also the preservation of the sovereign equality of Member States as enshrined in the Constitution of the WHO.

Furthermore, in line with established procedural practice, the WHO ensures that all official documents relevant to the Health Assembly are translated and circulated in the six official languages no later than thirty days prior to the opening of the session. This timeframe is designed to provide delegates with adequate opportunity to examine the materials, formulate their interventions, and consult with their national authorities if necessary.

Through these comprehensive interpretation and translation arrangements, the WHO reaffirms its legal and ethical obligation to uphold linguistic inclusivity, institutional transparency, and equal access to information in the conduct of its global health governance functions. (Organization, World Health, 2004, p. 01) . Nevertheless, practical constraints may affect the quality or timeliness of these services.

3.5 Multilingual Publishing Strategy.

As part of its institutional mandate to promote linguistic diversity and ensure equitable access to public health information, the World Health Organization has adopted a multilingual publishing policy grounded in both operational necessity and legal commitment. This

strategy reinforces the Organization's objective of facilitating broad and inclusive dissemination of scientific and technical knowledge across its diverse Member States.

Among its flagship publications, the Bulletin of the World Health Organization is issued in its entirety in English, with abstracts provided in Arabic, Chinese, French, Russian, and Spanish, the six official languages of the Organization. The Eastern Mediterranean Health Journal, a key regional publication, is made available in full in Arabic, English, or French, with abstracts systematically translated into all three languages to enhance regional accessibility.

Additional multilingual publications include:

- The Public Health Journal of Eastern Europe (available in English and Russian),
- The Weekly Epidemiological Record (published in English and French),
- The Pan American Journal of Public Health (issued in English, Portuguese, and Spanish),
- The Drug Information Bulletin, which is published in English and includes international nonproprietary drug names in multiple languages: English, French, Latin, and Spanish, to support clarity and standardization in pharmaceutical communications.

To further institutionalize multilingualism within its editorial processes, the WHO has implemented an integrated multilingual publishing strategy, whereby translation is incorporated at the initial stages of document preparation. This proactive approach ensures the simultaneous release of materials in multiple official languages, thereby promoting timely and equitable access to critical health information across linguistic and geographic boundaries. (Director-General of WHO, 2019, p. 03) . However, English remains the primary language for many full-text publications, which may limit accessibility for some users.

3.6 Multilingual Website and Digital Access

In the context of global governance, multilingual digital platforms have become a crucial institutional mechanism for promoting linguistic equality, ensuring transparency, and facilitating equitable access to information. Within the World Health Organization, the development and maintenance of a multilingual web infrastructure reflect the Organization's operational and legal commitment to inclusivity in the digital space.

To operationalize this commitment, the WHO established a centralized editorial team responsible for managing its official website in the six United Nations languages: Arabic, Chinese, English, French, Russian, and Spanish. This multilingual platform hosts thousands of pages offering scientifically validated health content accessible to diverse linguistic communities worldwide.

In support of decentralized contributions, the Organization implemented a content management system (CMS) that enables WHO personnel across global and regional offices to directly upload and manage content in any of the official languages. This system includes multilingual search functions and user-friendly navigation tools, allowing users to access information in their preferred language without technical barriers or the need to revert to the homepage.

The WHO Library and Information System (WHOLIS) serves as a complementary tool, offering digital access to approximately 110,000 bibliographic records and over 30,000 full-text documents in multiple languages. These documents, available in PDF format, are systematically preserved and publicly accessible, thereby strengthening the Organization's multilingual knowledge dissemination efforts in line with its constitutional principles. (World Health Organization, 2005, p. 01) . Some differences in content availability and updates across languages may still occur.

3.7Global Language Training for Staff

As part of its institutional commitment to multilingualism, the World Health Organization has recognized the strategic importance of enhancing the linguistic capacities of its staff to ensure effective communication, inclusive participation, and operational coherence in a multilingual environment. This commitment is reinforced through resolutions of the World Health Assembly, which underscore the necessity of providing equitable access to high-quality language training across all levels of WHO personnel.

In response, the Organization established a comprehensive global language training programme aimed at strengthening internal communication and supporting multilingual service delivery. The programme offers structured courses in the six official United Nations languages, as well as in German and Portuguese, in consideration of their relevance in certain regional contexts. Training modules are available across all proficiency levels, from beginner to advanced, and are delivered primarily through distance learning platforms, thereby ensuring broad accessibility for staff regardless of duty station.

Between 2016 and 2018, the programme reached about 3,676 WHO staff members. Participants included speakers of Arabic 139, Chinese 69, English 1,206, French 1,571, German 118, Portuguese 78, Russian 69, and Spanish 426. These figures reflect the Organization's growing commitment to developing linguistic capacity and ensuring fair multilingual participation in global health governance. (World Health Organization, 2018, p. 02) . However, some languages remain more widely used within the Organization than others.

3.8 Special Coordinator for the Promotion of Multilingualism

In alignment with its institutional strategy to promote linguistic equality, the World Health Organization, through the World Health Assembly, has adopted a set of targeted measures aimed at reinforcing multilingualism within its operations. One of the most notable initiatives in this regard is the appointment of a Special Coordinator for Multilingualism, tasked with supervising the implementation of language policy across the Organization.

The mandate of the Special Coordinator includes maintaining structured dialogue with groups of Member States on mechanisms to enhance multilingual and multicultural practices within the WHO. The incumbent is also entrusted with the responsibility of monitoring compliance with the Organization's language policy, identifying operational challenges, and submitting periodic reports to the Director-General detailing progress and recommendations for improvement. (World Health Assembly, 2018, p. 02)

This mechanism serves not only as an oversight function but also as a proactive institutional tool to ensure the effective realization of multilingualism as a legal and operational principle, thereby strengthening transparency, inclusivity, and equal participation in WHO governance.³⁴ (Organization, World Health, 2004, p. 02) . The effectiveness of this role depends on the level of institutional support and available resources.

Conclusion:

This study has shown that multilingualism has become both a legal obligation and a practical necessity within international organizations. The case of the World Health Organization illustrates a clear institutional commitment to linguistic diversity, supported by a comprehensive legal and regulatory framework.

However, the analysis also reveals that the implementation of multilingualism remains uneven. In particular, the continued predominance of English highlights a gap between formal legal commitments and actual institutional practices. This gap can be explained, to a large extent, by practical constraints related to resources, administrative efficiency, and established working habits within the Organization.

From this perspective, multilingualism in the WHO operates at two levels: a formal level, where linguistic equality is clearly recognized, and a practical level, where disparities in language use persist. This distinction may indicate that legal recognition alone is not always sufficient to ensure full linguistic equality.

Addressing this situation requires sustained efforts, including improved resource allocation, better integration of multilingualism into decision-making processes, and the use of appropriate technological tools to facilitate communication.

In conclusion, while the World Health Organization has established a comprehensive framework for multilingualism, its effective implementation remains uneven. Addressing these limitations requires not only reaffirming legal commitments, but also adopting concrete institutional measures. In this regard, future reforms should prioritize dedicated funding for multilingual services and strengthen institutional accountability mechanisms in order to ensure a more balanced and effective realization of linguistic equality.

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