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THE ROLE OF UNITED NATIONS AGENCIES AND REGIONAL ORGANIZATIONS IN THE POPULATION FIELD W.H.O.

WORLD HEALTH ORGANIZATION



ORGANISATION MONDIALE DE LA SANTÉ

Regional Office

Bureau régional pour la Méditerranée orientale

POST WORLD POPULATION CONFERENCE CONSULTATION FOR THE ECWA REGION

Doha, 24 - 28 March 1975

THE WORLD POPULATION PLAN OF ACTION
AND ITS IMPLICATIONS FOR THE EASTERN MEDITERRANEAN REGION OF THE
WORLD HEALTH ORGANIZATION

The World Population Plan of Action which was accepted by consensus by 135 governments at the World Population Conference, Bucharest, in August 1974, as a policy instrument within the broader context of the internationally adopted strategies for national and international progress, has expressed considerable concern and confidence that health is an integral aspect of economic and social development, contributing to it in a variety of ways as well as deriving from it needed resources and impetus. The relationship between human health and the whole range of human social and economic development is intimate, progressive and mutually reinforcing.

The World Health Organization recognizes that health is a basic human right and an objective by its own merit. The Organization also recognizes that family planning is an important element in the health of the family, particularly that of mothers and children, and that couples have a basic human right to decide freely and responsibly the number and spacing of their children.

As part of its mandate and in answer to requests from governments, the World Health Organization works in three main areas relating to human reproduction, family planning and population dynamics: the introduction of family planning into health services; provision of appropriate education and training for health personnel at all levels; and research in human reproduction, both biomedical and operational. The underlying strategy of the Organization is to assist the strengthening of national health services and, in countries where national policies are favourable, family planning can be included as an integral part of health care.

The World Health Organization sponsors scientific and technical meetings in human reproduction, family planning and population dynamics, to provide an international forum for collaborative efforts and to emphasize the importance of national and international coordination of efforts and resources.

Experience increasingly shows the advantages - medical, administrative and technical - to be gained from integrating family planning services into the general health services. These concerns are reflected in the mandate and activities of the World Health Organization and in its assistance, if requested, in promoting (a) inclusion of family planning in health services; (b) education and training of health personnel at all levels; and

(c) research in human reproduction, family planning and population dynamics.

I. WHO'S MANDATE

Resolutions adopted by the World Health Assembly during the period from 1965 to 1969 have given the World Health Organization a broad mandate to work in the health-related aspects of human reproduction, family planning and population dynamics. These resolutions enable the Organization to assist Member States, on request, to develop and evaluate family planning activities within health services. They emphasize the vital need for training health personnel in family planning, the importance of integrating this service into basic health needs, including family planning. They also reiterate support for the Organization's ongoing programme of stimulating, coordinating and assisting research and reference services in the physiologic, clinical, epidemiologic, psychologic and administrative aspects of human reproduction, family planning and population dynamics.

The World Health Organization recognizes that problems of human reproduction involve the family unit as well as the community. It emphasizes that the size of the family remains the free choice of each individual family and reaffirms that all families should have the opportunity to obtain information and advice on family planning problems. While it recognizes the complexity of the relationships between population change and health and the profound effects population changes can have on individual, family, and community health, it does not endorse or promote any particular population policy. Rather, it assists in the health related aspects of family planning within any policy that might be determined by individual governments.

II. WHO EASTERN MEDITERRANEAN REGION

General

The Eastern Mediterranean Region of WHO comprises of twenty-four countries stretching from Pakistan in the east to Tunisia in the west, and from Iran in the north to Somalia in the south. The total population of the Region is about 252 million. The four largest countries of the Region, in rank order by population are Pakistan, Egypt, Iran and Ethiopia, and the smallest four are Qatar, Bahrain, United ArabEmirates and Cyprus, all of which are well below one million population. The density of population varies widely from country to country, and by areas within countries. While about one third of the countries might be experiencing various degrees of population pressure in relation to economic or natural resources, about another third of the countries are apparently not so affected, and a few countries may in fact benefit from a larger population. However, the health benefits of family planning should and might well be acceptable to most of the countries of the Region, especially because they need not have population control implications.

III. WHO ASSISTANCE - PRESENT STATUS

l. Regional Level

The Eastern Mediterranean Regional Office is informing Member countries from time to time about the health benefits of family planning, about its general approach of integrated maternal and child health and family planning activities, and about its ability to provide assistance upon request. Such information is given both formally at country level and informally through occasions of personal contacts, and sometimes takes the form of offering limited initial assistance of organizing national seminars on the health aspects of family planning or sponsoring a few participants from one country to another. The approach of organizing national seminars or sponsoring participation of a few candidates in another country has been noted to be quite effective in removing doubts and misunderstandings and establishing logical rationale of health-related family planning. In these various forms of assistance, WHO is collaborating closely with the United Nations Fund for Population Activities for joint programmes in the interested countries and projects.

Another important area where the WHO Regional Office for the Eastern Mediterranean has provided assistance to countries with or without family planning programmes or projects is the training of health personnel in various aspects of family planning. Such assistance has taken various forms ranging from national seminars, regional meetings on important selected subjects, to local training courses, and to individual fellowships for training abroad, both in specially tailored research training programmes and conventional academic training courses.

This assistance for training of health personnel in various aspects of family planning is considered of utmost importance, specially during basic professional training of physicians, nurses, midwives and other allied health personnel. Starting from 1974, such training and teaching is being stimulated and strengthened in medical faculties of interested countries, through exchange of senior professors of selected subjects, on short yet not so short visits of three weeks or more, for observation and participation in the teaching of maternal and child health and family planning. This emphasis is proposed to be continued for the next few years within the broader WHO programme of exchange of senior teachers and scientists. Such teaching is also proposed to be strengthened through the development of field training areas for supervised use of medical and other health students, and a regional meeting on this subject has been scheduled for May 1975.

2. Country-level Assistance

Four countries of the Region, Egypt, Iran, Pakistan and Tunisia, have broad-based family planning programmes with population control objectives. They have been assisted by WHO, as also by some other United Nations agencies, in the context of financial support agreements signed between the United Nations Fund for Population Activities and respective countries.

In Egypt, Iran and Pakistan, WHO has assisted mainly in the following major activities: maternity-centred family planning, biomedical research, and training and fellowships, apart from some lesser components, e.g. rural maternity homes pilot project in Egypt, and a maternity and child health based family planning project (Saveh Shahrestan) in Iran. In Tunisia, the main assistance has been oriented towards operational activities, health statistics, and training and fellowships.

It has been gratifying to note that in addition to the above four countries which have population control related family planning programmes, a number of other countries, as indicated below, have requested and received assistance for family planning activities with health objectives.

Iraq requested and received assistance to establish a maternity-centred family planning project in 1971, which was well appreciated by the public and health professionals in the country. However, it was phased out in early 1974. It is understood and perfectly acceptable to WHO that the official policy may favour population increase, which is quite feasible and compatible with health-criented family planning programmes.

During 1972 and 1973, Afghanistan, Democratic Yemen, the Sudan, Syria and Yemen Arab Republic requested and received WHO assistance for formulating project requests for health-integrated family planning activities. All the five requests have been submitted to UNFPA by respective countries through the United Nations Development Programme country offices, and assistance has been given by the WHO Eastern Mediterranean Regional Office in providing additional information, clarifications, etc. on questions and comments raised by UNFPA. The project proposals for the Sudan and the two Yemens have been recently approved, and are scheduled to be activated from mid 1975. Approval and funding of the other projects is expected soon. More recently, Jordan has requested assistance from UNFPA for a maternal and child health/family planning project.

IV. WHO PROPOSED ACTIVITIES IN CONSIDERATION OF HEALTH-RELATED RECOMMENDATIONS OF THE WORLD POPULATION PLAN OF ACTION

The salient health-related observations and recommendations in the World Population Plan of Action are noted to be the following:

- The promotion of quality of life is stressed within the broad social and economic development, and it is understood that health is an important ingredient in the quality of life.
- Reduction of mortality, especially of infants and children, and consequently increased life expectancy in less developed countries is emphasized.
- The needs of rural populations in developing countries are emphasized, including health needs and services.

- Social security and health programmes for the elderly are mentioned as another area requiring attention.
- In the statement of principles, the World Population Plan of Action emphasizes national sovereignty in formulating population policies ... without external interference; however, international cooperation is considered useful; population policies are considered constituent elements of socio-economic development policies, and not their substitutes; the rights of couples to decide freely on the size of their families and spacing of their children, and to have information and means to do so is emphasized along with the rights of women in general.
- The World Population Plan of Action recommends action in relation to the health needs of infants, children, mothers, the community in general, and specially in the rural and remote areas which have been hitherto deprived of health services as well as other social services.
- Another important recommonation relates to eradication and control of infectious and parasitic diseases and malnutrition, along with improvement and development of environmental health.
- With regard to human reproduction, family formation and the status of women, the Plan of Action recommends the meeting of needs of couples to achieve their desired number of children, treatment of sterility and sub-fertility and the integration of family planning activities into health services.
- The World Population Plan of Action also recommends action for meeting the health manpower needs and adequate planning in this regard, within national policies and through international cooperation.
- Lastly, research in the whole broad field of health is also emphasized, as well as need for research in the field of fertility regulation.

1. Global level

The World Health Organization has taken note of the above-mentioned important observations, principles and recommendations of the World Population Plan of Action, and in addition to feeling considerable satisfaction that most of the existing and anticipated programmes of WHO are in line with these recommendations, the Organization has emphasized some of these aspects in its current and prospective programmes. The WHO's medium term work programmes (fifth and sixth) for the periods 1973/1977 and 1977/1981, which are supportive to the United Nations second development decade, are being reviewed in the light of theWorld Population Plan of Action recommendations. Already WHO has been engaged in carrying out an Organizational Study on methods of promoting the development of basic health services with a view to expand the coverage of health services to the remote rural areas, encouraging Member countries for carrying out operational research in the delivery of health services, and collaborating with other United Nations Agencies especially UNICEF for undertaking a joint study on Alternative Approaches to Meeting

Basic Health Needs of Populations in Developing Countries. These broad reviews and field research observations are expected to sift the more useful from the less useful activities and define effective and relatively economic ways of delivering health services to larger populations of the world.

Moreover, WHO is embarking upon a new strategy of long-term planning, taking into account perspectives of twenty to twenty-five years duration, in response to developments in world health problems in their political, social and economic context, and in the light of advancing health and medical technology. In view of the long period required between the conception of a health programme and its widespread implementation too short a planning time horizon could carry the risk of formulating programmes that might be out-moded and out-stripped by the fast-moving events of the modern world. Of course, it is understood that such long-term plans are more in the nature of setting goals and directions, taking into account the latest existing and expected features of health technology in the context of changing political, social and economic circumstances of countries, regions and the world, and therefore have to be carefully monitored in time to be able to anticipate needed changes and accomplish suitable modifications.

In the strengthening of health services, emphasis is being given, in collaboration with health administrations of member countries, to the prevention of unnecessary wastage accruing from the processes of human reproduction and growth which tend to detract from national development. Of course, keeping in mind that the principal objective of social and economic development is the improvement of the quality of human life, there is an urgent need to establish quantitative measurements of the quality of life, based on suitable social and health indices.

The World Health Organization is prepared to play an increasing role in assisting Member countries for coordinating international aid both from the United Nations Agencies and from other countries on bilateral basis, in directing international attention to priority problems in health and for helping formulate and implement suitable programmes to solve these problems, in collaboration with national and international efforts for achieving social and economic development.

2. Regional level

The Eastern Mediterranean Region of the World Health Organization has also taken note of the recommendations of the first Regional Population Conference, Beirut, 18 February to 1 March 1974, which reflected the concerns and confidences of countries of the Region with regard to population health and family planning aspects, which must have been already noted for suitable reflection in the World Population Plan of Action. In this regard, the WHO Regional Office has particularly noted the following recommendations:

The first recommendation with regard to population and health emphasizes that governments should support maternal and child health centres and increase their numbers, concentrating in particular on the more needy population groups, in cooperation with and assistance from the United Nations and its Specialized Agencies;

- The desirability of exchange of experience and experts in all health spheres, among countries of the Region;
- That governments give attention to the subject of family health and its relationship to family size, suitable spacing of pregnancies, the age of the mother and other related factors, and cooperate among themselves and with international and regional agencies in this regard, as well as for consideration of relevant factors affecting mental health of children.
- That governments may take note of the needs for training programmes of the various categories of workers in the fields of social, health and educational services, and include in the respective training programmes subjects relating to population dynamics, health and family planning.
- The Regional Conference also recommended that governments recognize and affirm the right of every married couple to decide on its family size and the spacing between children, and to ensure the exercise of this right with consciousness and responsibility through availability of information and means for family planning, within the framework of basic health services, especially maternal and child health services.

The WHO Eastern Mediterranean Regional Office's programme of assistance is already in line with the recommendations of the World Population Plan of Action and the preceding Regional Conference of early 1974, as described in previous sections. WHO considers family planning activities as integral part of maternal and child health and health services, and provides assistance on government requests and in accordance with national policies, whether for health objectives only, or also for population control objectives.

Assistance has been provided to countries of the Region in programming and implementation of family health projects, including fellowships for training abroad, assistance for training programmes within the country, for some transport, supplies and equipment, and also advisory assistance, if needed. The Regional Office pays special attention to and often recruits qualified and competent health consultants and advisers for countries of the Region, from the Region.

In future years, WHO has already planned assistance and is in the process of formulating its Sixth General Programme of Work (1977/1981) to countries of the Region, with emphasis on national health manpower development, strengthening of health services and their expanded coverage in rural areas, disease prevention and control, and promotion of environmental health. Emphasis is proposed to be given to primary health care, specially in remote rural areas, through Expanded Programme of Childhood Immunization and additional simple health care activities including nutritional aspects for children, mothers and the community as a whole, with a view to attack and lower morbidity and mortality, specially the high infant and child mortality. Countries wishing to balance from the start the lowering of mortality with the more difficult and delaysome results in lowering of fertility, will be given all needed assistance, and it is hoped that international financial assistance from the United Nations Organizations, as well as from rich countries of the Region will be forthcoming to make the programmes effective.

