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TECHNICAL PREPARATORY COMMITTEE
FOR THE INTERNATIONAL HEALTH CONFERENCE

NOTE SUBMITTED BY THOMAS PARRAN, M.D.

Subject: Regionalization in World Health Affairs.

At this stage in the development of world co-operation in health matters, it is not possible to determine precisely the nature or degree of regional health organization which may prove to be the most effective.

It is generally agreed that there should be a strong World Health Organization and that regional offices should conduct certain activities.

It seems pertinent to note here that the general philosophy of the Charter of the United Nations does not preclude the existence of regional agencies for dealing with matters of international concern, but encourages their use by Members of the United Nations. Express provisions to this effect have been made with respect to political security (Articles 52, 53, Charter of the United Nations). The Preparatory Commission of the United Nations has also interpreted Article 57 of the Charter, which relates to social and economic fields, including health, as meaning that regional agencies shall exist in these fields and should be brought into relationship with the United Nations system. (Report of the Preparatory Commission, page 40).

From the viewpoint of health administration, two types of regional organizations may be envisaged:

- (1) Related autonomous, - established by multilateral inter-governmental agreement and brought into relationship with the World Health Organization as contemplated by Article 57 of the Charter of the United Nations. The sole present example of this type of regional health agency is the Pan American Sanitary Bureau;

(2) Dependent regional offices of a temporary or permanent nature, established, staffed and financed by the World Health Organization for the conduct of such activities as may be assigned to them.

The Charter of the World Health Organization should permit of both types of regionalization. Only the future experience of the World Health Organization and other specialized agencies in related social and economic fields will show how international health administration can be conducted most effectively in the various regions of the world. For this reason, the charter of the World Health Organization should be very flexible on this point - and, in my view, on other points as well.

There should, of course, be the closest co-operation between the Pan American Sanitary Bureau and the World Health Organization. Such co-operation should be assured through membership of all American countries (including Canada) in both organizations. The specific tasks which the Pan American Sanitary Bureau would undertake should be decided by mutual agreement and should be changed from time to time in the light of experience.

The existence of strong regional organizations is quite compatible with the development of a strong World Health Organization. The public health experience of many countries supports this view.

In the United States, for example, primary responsibility for health rests with the states and their autonomous health services. The initiative and accomplishments of more progressive states have done much to develop proper services in more backward states. Through the years, there has been a concurrent growth of both the state and national services.

In any nation of considerable size there is, and must be, a series of administrative structures between the family, which is the basic health administrative unit, and the national health service. The stratification and degree of autonomy of such administrative structures vary from country to country dependent upon variations in size, problems,

populations, history and political philosophy.

In setting the pattern for a world health organization we are faced with the question of whether there is value in a regional administrative stratum with a certain degree of autonomy, between the national level and the topmost world-wide layer.

In view of the variety of national health structures which have proven their merit in differing sets of circumstances and in view of the limited historical experience in world administration, it would appear premature and unwise to judge this issue at this time. The Charter of the World Health Organization should be kept flexible enough, on the one hand, to allow all regional organizations to be absorbed into a single administrative structure.

Meanwhile, experience with both types of regional organization should prove valuable. It is my belief that need will be found in the eventual stabilized World Health Organization for both types, in view of the complexity of the problems which will face the Organization.

I believe that friendly competition between strong regional organizations will serve as a constant stimulus to all and that their concentration on particular regional problems will add to the richness and strength of the work of the entire international health structure.

The Pan American Sanitary Bureau could be considered as the "pilot plant" in its regional activities. If the experience proved successful, comparable regional health agencies should be encouraged by the World Health Organization. If, on the other hand, the inter-relationship between the World Health Organization and the Pan American Sanitary Bureau is not successful, it should be possible under the charter for it to be absorbed by mutual agreement.

The above discussion relates only to the desirability, from a professional point of view, of ensuring the possibility of autonomous regional agencies. There are even more cogent considerations from the practical point of view. It obviously would be undesirable to liquidate the Pan American Sanitary Bureau to which all of the American Republics are signatory, prior to setting up a world health organization which in fact is world-wide in its membership.

The discussion of the Economic and Social Council moreover clearly indicated that the position of the Pan American Sanitary Bureau would not be prejudiced by the Resolution under which our Preparatory Committee is convened. In other words, the term "single international health organization" in my opinion does not necessarily contemplate the abolition or absorption of the Pan American Sanitary Bureau.

As is well-known, the Pan American Sanitary Bureau has acted since 1926 as a regional agency for several international organizations with world-wide responsibilities in the field of health, including the International Office of Public Health, the League of Nations Health Organization and U.N.R.R.A.

In addition, the member governments of the Pan American Sanitary Bureau have recently declared their desire to continue the Bureau as the general co-ordinating sanitary agency of the American Republics, and have agreed that "any world-wide public health organization duly recognize the continental character of the Pan American Sanitary Bureau, and that this Bureau be given complete support in all its functions!" (Resolution XIV, Inter-American Conference at Mexico City, 1945).

It may be noted in this connection, that the whole inter-American system has been given increased responsibilities as a regional agency under the Charter of the United Nations.

While our Committee need not, of course, be bound by actions taken by the United Nations or by specialized agencies of the United Nations with respect to regional agencies, such actions may furnish a useful guide to us. In addition to the general policy with respect to the inter-American system noted above, our governments have already been faced with a comparable problem in one closely related field. Negotiations are now officially under way, on the initiative of the United Kingdom and the United States, for the dissolution of the Rome Institute of Agriculture and the transfer of its functions and assets to the Food and Agriculture Organization to avoid duplication of work by these two organizations. On the other hand, the Food and Agriculture Organization

constitution provides for co-operative arrangements with regional organizations with related responsibilities, on the basis of mutually acceptable agreements between the competent authorities of the respective organizations (Article XII, F.A.O. Constitution). The Inter-American Institute of Agriculture Sciences is expressly mentioned as one of the organizations with which the Food and Agriculture Organization intends to enter into such co-operative arrangements. (First report to the Governments of the United Nations by the Inter-Commission on Food and Agriculture, Washington, August 1944, Ch. III, D.2).

In summary, it can be said that there are obvious professional, practical and political advantages in continuing the Pan American Sanitary Bureau as a strong regional organization to be brought within the orbit of the United Nations and of the World Health Organization.

In order to carry out this general concept and to make provision for flexibility in the development and utilization of regional agencies of different types, the following draft is submitted:

"REGIONAL OFFICES AND AGENCIES"

- "(1) The World Health Conference should establish and develop regional offices, delegating to them such authority and securing from them such services as the Conference may deem desirable.
- (2) The World Health Conference should establish relationships with regional organizations having international health responsibilities, heretofore and hereafter established by intergovernmental agreements, through appropriate agreements with competent authorities of such regional organizations, contemplated in the Charter of the United Nations.

Such agreements should duly take into account pre-existing conventions and agreements, and the operating organizations of regional agencies already established, insofar as they do not conflict with the creation and activities of the World Health

Organization.

Such agreements should define the distribution of responsibilities and methods of co-operation between the World Health Organization and such regional organizations."
