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ECONOMIC AND SOCIAL COUNCIL

TECHNICAL PREPARATORY COMMITTEE FOR THE INTERNATIONAL HEALTH CONFERENCE

SIXTEENTH MEETING Held on Monday, 1 April 1946, at 10.30 a.m. at the Palais d'Orsay, Paris.

Chairman - Dr. René Sand

Welcome to Dr. Cumming

The CHAIRMAN welcomed Surgeon-General Cumming, Director of the Pan-American Sanitary Bureau.

Dr. CUMMING expressed his satisfaction at having been called upon to take part in the Committee's work. He reminded the Committee of the work done in the sphere of public health after the war of 1914-18, and recalled a number of conferences including that at Cannes in 1919 which had been attended by the present Chairman of the Committee, Dr. Rene Sand, and other distinguished health experts. He emphasized the delicate nature of the task to be performed, and recalled all the difficulties which had been encountered in endeavouring to set up a otherent organization of public health in the international sphere. Despite the division of work between a number of co-existing international bodies, good results had been achieved between the two wars. The time now seemed to have come to establish a single international health organization, but he did not think it desirable to create a body with too marked a super-governmental character. He considered regional offices to be essential, and those already in existence should be maintained and developed, among them the Pan-American Sanitary Bureau, of whose work in the last half century he gave a brief outline. Its importance had continually grown, and its action in defence of health was now exercised in all the countries of Latin America.

Regional Agreements (continued)

The COMMITTEE resumed the discussion of the draft concerning regional agreements prepared by Dr. Mani and Dr. Sze (Document E/H/PC/W/11), the first two points of which had already been adopted and the third only touched upon.

Dr. EVANG recalled that in virtue of a resolution by the Economic and Social Council regarding the creation of a single international health organization, the Committee had been given a very difficult task. The proposals submitted to the Committee by certain of its members had been prepared on this basis, and it was on this basis that the Committee's debates had taken place. They were now faced, however, with a conflict between the proposal to set up regional organs under the authority of the central organization on the one hand the maintenance of autonomous regional organs on the other.

In Dr. Parran's draft (Document E/H/PC/21) this distinction was made quite clear. Dr. EVANG'S view was that regional offices should have a certain measure of autonomy without being completely independent. It was quite in order that they should be authorised to undertake research in matters of concern only to their area, and the funds required for this purpose should be provided by the area in question and not by the central organization.

He considered that the solution adopted in Dr. Parran's draft involved a risk that some of these regional offices might uphold sectional interests within the central organization to the detriment of the general interest. Moreover, in the present situation, with some countries devastated by war and others fortunately left intact, it would seem advisable to establish a strong central organization capable of maintaining a just balance in the performance of the common task. Any elements of weakness should be ëliminated from the outset.

Dr. MANI supported the views put forward by Dr. Evang. He thought that all the members were in agreement on the purpose to be achieved, but that there were many differences of opinion as to the means by which this should be done. This was why interim arrangements were provided for in

/H/PC/29 Page 3

the drafts submitted by Dr. Sze and himself. The regional offices at present in existence, such as the Pan-American Sanitary Bureau, would gradually become incorporated in the forld Health Organization. He showed by means of a diagram how he envisaged the relations between the central headquarters and the regional offices, the latter being assigned functions of a general character in connection with quarantine, epidemiological intelligence, etc., and functions of a regional character such as those referring to rural sanitation, water supply to villages and so on.

Dr. SHOUSHA PASHA, with regard to an allusion made by Dr. Mani to the establishment of a regional office in the Middle East at Alexandria, recalled that as soon as the Office International d'Hygiène Publique had been set up the Sanitary Maritime and Quarantine Council of Egypt at Alexandria had collaborated with that international body. When in 1938 the Council had disappeared and the quarantime services had been taken over by the Egyptian administration, the agreements between the Paris Office and the Alexandria Bureau had been maintained and even strengthened, and despite the var this Bureau had eontinued to supply epidemiological information. Immediately upon its constitution, the Fan-Arab League, consisting of Iran, Iraq, Transjordan, the Hedjaz, the Yenen, Syria and the Lebanon, had decided to maintain this regional organ and to increase its povers, particularly as regards pilgrimages. It would be seen later what place it could take in the general organization.

Dr. MACKENZIE feared that the simultaneous existence of several autonomous organizations would lead to competition which might have unfortunate results. Other points raised by Dr. Parran caused him some roncern, such as the provision of staff for the regional offices, the absence of Canada, Newfoundland and the Nest Indies, etc., from the Pan-American Sanitary Bureau, and the nature of the relations between the central organization and the regional offices. He thought that the Committee's first task was to establish the central organization and make interim arrangements.

Dr. PARRAN replied to the objections made to certain points of his proposals. The future single organization would have to be made as supple

as possible so that it would be adapted to circumstances and requirements The competition to which he referred in his memorandum must exist between regions themselves and not between organizations in the same region. He recalled that the United Nations Charter had made provision for bringing the specialized agencies into direct relationship with the United Nations.

To sum up, he considered that the Committee should leave the way open for at least two types of regional organization. If experience showed that it was necessary to provide for stricter control of the regional offices by the central organization, arrangements could always be made for this purpose. In reply to a question, he expressed the opinion that colonial countries which were not members of the central organization could nevertheless participate in the work of the regional offices on certain conditions.

Dr. CAVAILLON was also in favour of the greatest elasticity in organizing the regional offices. They should, however, be very definitely attached to the central organization, and he was opposed to anything in the nature of a federation. It went without saying that in each area there should only be one organ, either under the direct authority of the World Organization or attached to it in some looser manner as proposed by Dr. Parran.

Dr. SZE was in agreement with Dr. Parran. Existing regional organs should be taken **into** consideration as provided for in the Economic and Social Council's resolution. He, too, was in favour of adopting as elastic a system as possible.

Summing up the debate, the CHAIRMAN observed that all members of the Committee agreed in considering that they need not draft final texts for submission to the Conference; that the World Health Organization would have to be established in such a way that it could be readily adapted to all situations; and that interim arrangements were necessary. The docurren prepared by Dr. Mani and Dr. Sze seemed to answer to these conditions, subject to the replacement of the word "should" by the word "may" in Point 3.

The meeting rose at 2.30 p.m.