

**ECONOMIC
AND
SOCIAL COUNCIL**

**CONSEIL
ECONOMIQUE
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ORIGINAL - ENGLISH

TECHNICAL PREPARATORY COMMITTEE FOR THE INTERNATIONAL
HEALTH CONFERENCE

HEALTH ORGANIZATION OF THE UNITED NATIONS

Memorandum by Dr. L. Rajchman, Former Director of the
League of Nations Health Organization.

1. International Technical collaboration should be based on direct contacts between those who have constitutional and technical responsibility in their spheres of action. Just as in the United Nations Security Council the Foreign Ministers themselves take part in the discussions and decisions, in an International Health Organization the ministers responsible for public health and social welfare should be able to meet together and to give the necessary leadership. This is all the more necessary at present when problems affecting the health of the nations as well as problems of population represent, at long last, a major preoccupation of the governments of all civilized nations.

The ministers would act on the advice of their principal medical officers, who must likewise be brought together periodically on an organized basis. Finally, any policies to be adopted by the United Nations in the field of public health should have the sanction of "consumers of health", that is to say, those for the benefit of whom the various measures are being contemplated.

2. To achieve the above ends a United Nations Health Organization should be composed of three standing organs:

- (a) A committee of ministers of health.
- (b) A standing health committee composed of chief medical officers of health and of chairmen of the standing technical commissions.
- (c) A general assembly composed of representatives of social security organizations (in accordance with the several national types of agencies), of representatives of academies of medicine,

of Red Cross Societies and other responsible voluntary agencies.

3. Since the Economic and Social Council of the United Nations is composed of eighteen nations, elected by the United Nations Assembly, and since the terms of reference of the Council are to co-ordinate the activities of the various technical agencies of the United Nations, the simplest solution would consist in providing for the same eighteen nations to delegate their ministers of health, and chief medical officers for the two standing committees of the United Nations Health Organization. The Health Assembly, however, would have to represent all the member states of the United Nations. The Assembly would meet once a year at a date so chosen that their report should be available for the Annual General Assembly of the United Nations. The ministers of health should meet at least twice a year immediately after the session of the Standing Health Committee. The Standing Health Committee would appoint a smaller group as an executive board to direct the work of the organization. The Health Committee would appoint a number of standing permanent commissions such as Biological Standards, Malaria, T.B., Medical Education, Colonial Medicine, Sanitary Conventions, etc., etc., and chairmen of those various standing commissions would ex officio be members of the Health Committee. This privilege need not be extended to chairmen of ad hoc technical commissions set up for a short duration.
4. The General Director of the Organization would be appointed by the General Health Assembly on the nomination of the Committee of ministers acting on the advice of the Standing Health Committee.
5. The finances should be derived from two sources:
 - (a) Administrative expenses covering salaries and the usual overhead should be provided out of the general budget of the United Nations Organization so as to enable the General Assembly of the United Nations to exert control over executive officers of the Health Organization.

(b) An annual appropriation for technical and research work to be provided out of a special United Nations Health Fund.

6. All of the members of the United Nations should be called upon to contribute 100,000,000 U.S. dollars for the Fund on a scale of contribution identical with that agreed upon for the International Monetary Stabilization Fund. The \$100,000,000 would be invested in bonds issued by the International Bank at $2\frac{1}{2}\%$. The fund would be administered by a Board of Trustees elected by all the contributors under a chairman and director appointed by the Chairman of the General Assembly of the United Nations. The Board of Trustees would appropriate sums provided for under 5(b) on the recommendations from the Standing Health Committee.

The Board of Trustees would also award annually a prize for the outstanding achievement or outstanding research in the field of public health in the widest sense of the word. The award would be made by the Chairman of the General Assembly at a public meeting.

7. There remains the question of how best to utilize the existing International Health Organizations.

The files and the plentiful documentation of the Health Section of the League of Nations Secretariat will, no doubt, be taken over by the new organization; so will be the few remaining members of the technical staff.

The Office international d'Hygiène publique should also be incorporated in the new organization, provided:

- (a) Its staff be internationalized, and the proviso that the Director must be French eliminated;
- (b) English as well as French becomes the official language.

The "Office" ought to be utilized as a standing technical commission on sanitary conventions and also as a standing annual conference of Directors of Public Health Services on the model of such a conference in the Western Hemisphere which proved so fruitful.

The Quarantine Council of Egypt, as well as the Near Eastern Epidemiological Branch, should be subordinated to the new organization and should report through the Paris "Office".

The Pan American Sanitary Bureau and the Inter-American Liaison Organization should have a status of regional offices to which the United Nations Health Organization delegates all, or part, of its authority.

Similar arrangements would have to intervene in regard to the Far East and the South Western Pacific. The Singapore Bureau should be revived under the new organization for the purpose of the Epidemiological Intelligence to serve the needs of the maritime traffic. But an additional bureau should be set up at a key centre of civil air navigation to deal with the much more important problem of sanitary control of air traffic. It will even be necessary to establish many such bureaux, in Africa, the Middle East and the Far East.

There should also be, preferably at Shanghai, a regional office to deal with all problems within the competence of the new United Nations Health Organization.

8. Finally, two administrative services might be established without much delay on an international basis.

A sanitary inspectorate of inter-continental air traffic and a consolidated colonial medical service.

The Sanitary Inspectorate should consist of a small team of very highly skilled epidemiologists and Public Health Administrators, fully conversant with Sanitary Conventions, who would periodically visit the various air traffic control bureau and advise on measures to be taken to prevent the propagation of disease.

As to the Colonial Services, all countries having overseas responsibilities find it extraordinarily difficult, if not impossible, to recruit adequate technical personnel; their objective is to train indigenous technicians in all the branches of public health and medicine but pending the establishment of medical services in dependant

territories manned by native staffs, the widest and closest collaboration should be established between the existing colonial services in order to utilize all the available national facilities for the common end. A commission representing the interested services should be set up without delay to make concrete proposals.

9. The war has demonstrated that medical research organized on a large scale, and based on multivalent teamwork, will produce vitally important results. Even better results would be obtained if similar methods were applied on an international scale, thus integrating results now being reached separately by the several nations. An International Institute of Medical Research should be established for this purpose under the U.N.H.C. to be financed out of the United Nations Public Health Fund as well as from special endowments.
