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President: Mr. Raymond SCHEYVEN (Belgium).

Present:

The representatives of the following countries: Argentina, Australia, Belgium, China, Cuba, Egypt, France, India, Philippines, Poland, Sweden, Turkey, Union of Soviet Socialist Republics, United Kingdom of Great Britain and Northern Ireland, United States of America, Uruguay, Venezuela, Yugoslavia.

Observers from the following countries: Denmark, Indonesia, Israel, Italy, Japan, Netherlands, Switzerland.

The representatives of the following specialized agencies: International Labour Organisation, Food and Agriculture Organization of the United Nations, United Nations Educational, Scientific and Cultural Organization, International Monetary Fund, World Health Organization, International Telecommunication Union.

Invitation to the Government of the United Kingdom of Libya to send an observer to attend the discussion on item 21 of the agenda (question of assistance to Libya)

1. The PRESIDENT said that the Government of the United Kingdom of Libya had addressed to the Council a communication¹ in which it stated that it would like to send an observer to attend the Council's meetings during the discussion of item 21 of the agenda (question of assistance to Libya). He proposed that a reply should be sent welcoming the despatch of an observer by the Government of Libya.

It was so decided.

Point of order regarding the Council's decision to defer consideration of item 28 (Report of the International Telecommunication Union) until its seventeenth session

2. Mr. BAKER (United States of America), speaking to a point of order, said that he had not had time at the previous meeting to comment on the Council's decision to defer consideration of item 28 (report of the Inter-

national Telecommunication Union) until its seventeenth session. He had now had an opportunity of studying the report in question, and considered it to be one of the best of those submitted by the specialized agencies. He would not ask the Council to reconsider its decision, but hoped that that decision would not be interpreted as signifying lack of appreciation of the work of the International Telecommunication Union (ITU) or of the very helpful report submitted.

3. Mr. HESSEL (France), Mr. MUÑOZ (Argentina), Mr. MATES (Yugoslavia), Mr. KURAL (Turkey) and Mr. RIBAS (Cuba) agreed with the United States representative's remarks and expressed appreciation of ITU's report.

4. Mr. SEN (India) also endorsed the United States representative's observations. Referring to the suggestion made by the Swedish representative at the previous meeting that the Council might content itself with examining the regular annual reports of the specialized agencies, he expressed the view that the special reports were also very helpful to the Council, in that they brought out the main points of interest. He hoped, therefore, that the current practice would be maintained.

5. Mr. STERNER (Sweden) fully agreed with the previous speakers that the decision to defer consideration of ITU's report cast no possible reflection on the work of that excellent agency. The same was true of the decision to defer consideration of the report of the United Nations Educational, Scientific and Cultural Organization (UNESCO).

6. The PRESIDENT felt sure that the entire Council shared the views expressed by the United States representative, and requested the representative of ITU to convey the Council's appreciation to his organization and its Secretary-General.

7. Mr. TOWNSEND (International Telecommunication Union) thanked the Council for its expression of appreciation, and explained that the report could not have been submitted sooner, as it had first had to be approved by the Administrative Council of ITU at its meeting in May.

Calendar of conferences for 1953 (E/2451)

[Agenda item 34]

8. The PRESIDENT drew attention to the resolution adopted by the Commission on Human Rights (E/2451), in which the Council was invited to convene the next session of the Sub-Commission on Prevention of Discrimination and Protection of Minorities in January 1954, in order that its report could be discussed at the Commission's tenth session. He suggested that that proposal

¹ Subsequently distributed as document E/2469.

should be considered in connexion with the calendar of conferences for 1954 (item 35 of the agenda), after the Council had discussed the report of the ninth session of the Commission on Human Rights (E/2447).

9. Mr. AZMI (Egypt), speaking as Chairman of the Commission on Human Rights, considered that the question came under the calendar of conferences for 1953, rather than under that for 1954. The Council had decided to convene the Sub-Commission on Prevention of Discrimination and Protection of Minorities for the beginning of September 1953, and he wondered whether that decision still held good. The question was all the more important in that at its ninth session, held in Geneva in April and May 1953, the Commission on Human Rights had elected new members of the Sub-Commission, who were due to take office in January 1954.

10. Mr. HUMPHREY (Secretariat) explained that the Council had decided provisionally to convene a session of the Sub-Commission in September 1953, but had made the decision subject to confirmation and had asked for the views of the Commission on Human Rights. The resolution before the Council (E/2451) had been adopted in response to that request. The Chairman of the Sub-Commission had been present when the resolution was adopted, and had agreed in principle with its substance. There seemed to be no need for the Council to take a special decision cancelling the Sub-Commission's session scheduled for September 1953, since that session would not be held unless the Council specifically confirmed its previous decision.

11. Mr. MOROZOV (Union of Soviet Socialist Republics) said that procedurally it would be better for the Council to take a specific decision in the matter, but he felt that the questions of the 1953 and 1954 sessions should be dealt with separately, since the issue at the moment was only the date of the session of the Sub-Commission on Prevention of Discrimination and Protection of Minorities scheduled for 1953.

12. Mr. INGLÉS (Philippines) considered that the issue related to the calendar of conferences for 1953 rather than to the calendar for 1954, and accordingly felt that the Council should take an immediate decision on the Commission's resolution. If the decision was put off until the calendar of conferences for 1954 came up for discussion, representatives might lose sight of the fact that the session proposed for January 1954 was, in fact, merely the 1953 session postponed, and might accordingly argue against the convening of another session later in 1954. There was no need to defer the decision until the report of the Commission on Human Rights had been considered, since the Commission's views on the subject were clearly stated in its resolution.

13. Mr. PEROTTI (Uruguay), Mr. SEN (India) and Mr. HSIA (China) agreed with the Philippines representative.

14. Mr. KURAL (Turkey) was in favour of the course proposed by the President. It seemed to him more logical to take a decision after examination of the Commission's report, at a time when the Council would be in a position to know exactly what the Sub-Commission had achieved or hoped to achieve.

15. Mr. HESSEL (France) thought that for the time being the Council should merely refrain from confirming the decision to convene the Sub-Commission for the beginning of September 1953. Any other course would involve the calendar of conferences for 1954, which should be considered as a separate entity.

16. Mr. STERNER (Sweden) and Mr. FENAUX (Belgium) shared the views expressed by the representatives of Turkey and France.

17. In reply to a question from Mr. BLUSZTAJN (Poland), Mr. HUMPHREY (Secretariat) explained that the change in membership of the Sub-Commission was one of the reasons which had prompted the Commission on Human Rights to recommend the postponement of the session from September 1953 to January 1954. It was not, however, the sole reason, and the Commission had also borne in mind all the previous discussions on the question of the Sub-Commission's meeting.

18. Mr. SEN (India) proposed, as a compromise solution, that the Council might decide in principle to convene the Sub-Commission as early as possible in 1954, so that its report could be discussed at the tenth session of the Commission on Human Rights. The actual date of the session could then be fixed when the Council came to consider the calendar of conferences for 1954.

19. Mr. MATES (Yugoslavia), Mr. MUÑOZ (Argentina), Mr. RIVAS (Venezuela), and Mr. INGLÉS (Philippines) supported the proposal.

The Indian representative's proposal was adopted.

Report of the World Health Organization (E/2416 and Add.1-4 and E/L. 509 and Rev.1)

[Agenda item 25]

20. At the invitation of the PRESIDENT, Doctor DOROLLE, Deputy Director-General of the World Health Organization, explained that the Director-General was due to retire very shortly, and had therefore felt that it might be better to guarantee a certain measure of continuity by entrusting him, as Deputy Director-General, with the task of presenting WHO's report to the Council.

21. WHO had tried to take account of the comments made by several delegations at the Council's thirteenth and fourteenth sessions on the subject of the form of its reports. It had, for example, produced document E/2416, which gave an analytical summary of the documents submitted by WHO to the Council, and endeavoured to bring out those points which were of particular interest to that body.

22. Referring to the discussion at the previous meeting on the question of delays in the submission of the reports of the specialized agencies, he regretted that WHO had been unable to submit its own report within the prescribed time-limits. The delay was due to the fact that the report had had to be approved by the Sixth World Health Assembly, which had not completed its work till 26 May 1953.

23. The main point made by the Director-General in his introduction to the report, as well as in paragraph 4

of document E/2416, was the interdependence of social, economic and health problems. Where there was no economic and social development, it was impossible to raise the standard of health in any given country, or to break through the vicious circle of poverty, disease and ignorance surrounding a large number of countries. The main difficulty lay, even more than in the lack of funds, in the shortage of the qualified personnel essential for the carrying-out of programmes. The training of such personnel was WHO's fundamental task. He referred in that connexion to paragraphs 14 and 16 of document E/2416. WHO's method of promoting such training was through an exchange of knowledge and experience, which benefited not only the countries concerned, but also qualified personnel serving in WHO's medical missions. There was an old Spanish saying that no one was so poor that he had nothing to give or so rich that he had nothing to receive. In this field, WHO had laid particular stress on the training of personnel within the beneficiary countries themselves through the establishment of training and demonstration centres. It had drawn up a five-year assistance programme, under which the contributions of receiving governments would at first be small, but would reach 100 per cent by the end of the fifth year.

24. He would emphasize the fact that there had been no change in the general character of WHO's activities. The organization was in fact still assisting governments, at their request, in taking the next appropriate step in the development of their health services. It also maintained central technical services which were regularly available to all governments without the need for special application. Examples of the work done by those services were biological standardization and the unification of national pharmacopoeias; mention might be made again in that connexion of the publication of the first volume of the *Pharmacopoea internationalis*. Similarly, the epidemiological information service was mentioned. The International Sanitary Regulations had come into force throughout the world in 1952. Furthermore, WHO was establishing standards in regard to the more general problems of public health,—for example, methods of combating specific diseases, and recognized methods of medical training and of sound administration.

25. He would lay special stress on the increasing importance of WHO's role as a co-ordinator in the field of health. Its importance had been recognized by many bilateral or multilateral assistance agencies, in particular by the Technical Co-operation Administration (TCA), the Colombo Plan and the Norwegian aid to India. A conference had recently been held of representatives of TCA and WHO for the purpose of preparing a programme of practical action in the different countries. WHO was also endeavouring to comply strictly with the directives provided by the Council in resolution 324 B (XI),² and to consult the other specialized agencies before taking final decisions. Likewise, WHO reaffirmed its confidence in the Administrative Committee on Co-ordination (ACC) and the Technical Assistance Board (TAB).

² See *Official Records of the Economic and Social Council, Eleventh Session, Supplement No. 1*, page 63.

26. Activities common to several specialized agencies had always been a matter of concern to the Economic and Social Council, and they were described in the third part of the report. WHO maintained regular contact with the Food and Agriculture Organization (FAO), UNESCO, the Technical Assistance Administration (TAA) and the International Labour Organisation, while the activities of WHO and the United Nations International Children's Emergency Fund (UNICEF) were almost completely merged. UNICEF was taking an active part in the campaigns against malaria, venereal diseases and tuberculosis, and in maternal and child health and related activities, and co-operation between the two bodies was most satisfactory.

27. An essential characteristic of WHO was its regionalization. It was a highly decentralized organization, and in 1952 had opened its latest regional office—one for Africa—at Brazzaville. But it kept a constant watch on its regional activities. The regional system was a considerable help in the establishment and carrying out of programmes, as each of the regional offices was in constant touch with the countries concerned, and was acquainted with their needs, their wishes and their capacities. Programmes, prepared by the regional offices in close contact with the governments, were discussed in the regional committee, and then centralized by the Director-General, who submitted them to the Executive Board and finally to the World Health Assembly. The regional system was also helpful in the co-ordination of programmes within a given country. The report described the various aspects of WHO's regional activities.

28. The work of WHO had been greatly hampered by the fact that the funds available for technical assistance had not in the event proved to be as large as might have been expected. At the beginning of the financial year, it had been necessary to cut down the scope of several projects already under way. However, the organization had managed to overcome some of its difficulties, thanks to the understanding attitude of the Executive Board of UNICEF and of the World Health Assembly, and to the assistance provided by several international bodies.

29. At earlier sessions, the Council had intimated that it would like to have information concerning the administration of WHO. Particulars on that point would be found in paragraphs 47 and 48 of document E/2416.

30. Document E/2416/Add.2 gave a break-down of estimated expenditure (page 38). But there was a correction to be made to the total figure given there. To keep the 1954 budget at the level of the 1953 budget, the World Health Assembly had reduced the estimates by 100,000 dollars, bringing the total to 8,497,000 dollars.

31. Paragraphs 49 to 57 of document E/2416 mentioned the decisions taken by the Sixth World Health Assembly, which had met in May 1953, concerning those activities of particular interest to the Council.

32. The Sixth World Health Assembly had admitted Nepal as the eightieth member of the organization, and had extended to the Spanish Zone of Morocco the privileges of an Associate Member.

33. It had also decided to defer until a later date consideration of the question of meeting only every other

year, and would therefore continue to meet each year. Its next annual meeting, like the thirteenth and fourteenth sessions of the Executive Board, would be held at Geneva.

34. Despite a unanimous vote of the World Health Assembly, Dr. Brock Chisholm had decided not to seek renewal of his term of office as Director-General. The Sixth Assembly had accordingly appointed Dr. Candau to take his place.

35. On the question of the evaluation of programmes, the Council had expressed the wish that the specialized agencies should undertake a study of the results of the implementation of their respective programmes. WHO had replied on several occasions that it was not in a position to undertake such a study and that it would need to have acquired several years' experience before it could do so. It has now gained the necessary experience, and the Sixth World Health Assembly had instructed the Executive Board to study the question of analysis and evaluation of the programmes. That was a delicate task, which the Director-General had entrusted to a study service. The first job was to define the common purpose of the various projects, which was to strengthen national public health services in order to ensure the progress of national health. The next step would be to classify the methods by which that purpose could be attained. In order to permit a valid appraisal, it was essential to have a reliable system permitting the evaluation of a programme both at the time of its inception and at that of its implementation and completion. WHO had therefore sought to establish for this purpose a uniform scheme of evaluation, which was at present being tried out on a few selected projects. Its regional offices had given valuable service in evolving this procedure. One could therefore hope that, in a not-too-distant future, WHO would possess a useful instrument of evaluation.

36. The Director-General of WHO had not sought to present spectacular results in his report. In 1952, WHO had been content to push forward the work it had accomplished in 1951 as part of its long-term programmes. The WHO administration felt that results had been achieved when a particular activity could be brought to an end because the country concerned was in a position to carry on alone the work it had begun with WHO's assistance.

37. Mr. DHARMA VIRA (India) expressed deep appreciation of WHO's work. He was very glad to hear of the success achieved by the regional offices, particularly as some countries had originally felt misgivings about their establishment. The appointment of area representatives in certain countries to co-ordinate the work of the international agencies with that being done at national level was also proving successful, and he hoped that the experiment would soon be extended to more countries. He noted the continued emphasis on education and training, but was glad that the other activities of WHO had not been neglected.

38. At the thirteenth session, his delegation had stressed the need for dynamic budgeting. He was therefore sorry that it had proved necessary to reduce the 1954 budget. He appreciated the difficulty caused by the uncertainty about sources of technical assistance funds, but hoped

that the Technical Assistance Committee (TAC), UNICEF and WHO would be able to work out a plan for securing adequate funds in the future. It would be very regrettable if the work of WHO had to be curtailed for lack of money.

39. In conclusion, the Indian delegation wished to submit a draft resolution (E/L.509) concerning the report of WHO. He wished, however, to amend the second paragraph by substituting the words "continued emphasis on" for the words "priority given to" (see document E/L.509/Rev.1).

40. Mr. AZMI (Egypt) said that the Egyptian delegation was well satisfied with WHO's report, and wished to pay a well-deserved tribute to the organization on its work. Egypt's relations with WHO had been particularly happy, and the policy of decentralization pursued by WHO had borne fruit in respect of his country. The question of co-ordinating the activities of WHO and the other specialized agencies with activities under the Expanded Programme of Technical Assistance would certainly be raised when that programme came up for discussion. In 1952, TAC had decided, as an experiment, to appoint regional representatives to ensure that the activities of the specialized agencies in the various countries were fully co-ordinated. He hoped that that experiment would be crowned with success.

41. The shortage of funds for financing the Expanded Programme of Technical Assistance had had the unfortunate effect of compelling WHO to curtail some of its programmes. It might be anticipated that WHO's activities would expand in the future. He wished to call attention to the table of arrears of contributions to the 1952 budget in WHO's financial report (E/2416/Add.4, page 17) and to express the hope that every country would do its utmost to assist WHO in carrying out its various programmes.

42. Mr. HESSEL (France) thanked the WHO representative for his extremely lucid statement, and said that he wished to repeat the tribute, paid at the Sixth World Health Assembly by the head of the French delegation, to Dr. Chisholm, whose outstanding qualities had served to strengthen the position and enhance the prestige of WHO. Dr. Chisholm had at all times contrived to rise above immediate problems, and he (Mr. Hessel) was sure that Dr. Candau, supported by a competent staff, would give an excellent account of himself as the successor to Dr. Chisholm appointed by the Sixth World Health Assembly.

43. WHO had a heavy task before it. Its needs were immense and its resources limited. It might therefore have been tempted to be too timid or to hold aloof from co-ordination with other specialized agencies. But it had withstood those temptations. It might also have regarded as of minor importance all activities not strictly definable as health activities. Very fortunately, the Director-General had opposed that tendency, and had stressed the interdependence of economic, social and health problems. Nevertheless, a similar tendency might appear in day-to-day work and find expression in an unwillingness to accept certain types of guidance or central control.

44. WHO was performing its functions with limited

financial resources. Its first task had been to integrate international action with national development plans. In that connexion, it would be dangerous to limit the role of governments in the allocation of responsibilities.

45. International action was required in the training of basic and specialized staff. There, fellowship programmes, the implementation of which called for imaginative adaptation to local conditions, must play a leading part. Exchanges of personnel could be carried out on a regional basis, and Europe, as much as other regions, had need of the solidarity of health workers.

46. Another factor limiting the work of WHO was that too many of its members were inactive. There was one region in which the action of WHO was not making itself felt; he would like to see all countries join in that work of international solidarity.

47. The French delegation had followed with interest the efforts made by WHO in the field of regionalization, efforts which had produced valuable results. The regional programmes should, however, be examined in detail by a central body, although rigidity must be avoided and the programmes adapted to local conditions. The problem of regionalization arose for all the specialized agencies, and it was to be hoped that all of them would benefit from the experience acquired by each individual agency.

48. In drawing up long-term plans, WHO should not rely on chimerical estimates of the funds that would be available; during the next few years it should not expect any appreciable increase in its financial resources. In order to balance the budget, it might be well to reduce the frequency of meetings, which would also allow of better preparation of the work. WHO might also consider holding a World Health Assembly only every two years.

49. He was gratified to note that the Director-General had responded to the Council's comments concerning the form of the WHO reports. The submission of a short summary was particularly useful, but a table of the world health situation was still lacking. While it was true that the *Preliminary Report on the World Social Situation* contained such information, the summary was complete in itself, and the table would therefore be a useful addition. The Council should consider the work of the specialized agencies as a whole, to enable it to help them to achieve their objectives.

50. Mr. BAKER (United States of America) congratulated WHO on the progress it had made in adjusting its programme in the light of experience and in developing techniques designed to secure improvement in world health. The United States Government believed that concentration of effort on strengthening national health services was essential if international aid was to have lasting results, and admired the organization's efforts in that direction. WHO attached great importance to training public health personnel, and he quoted, as an instance of such training, the 1,147 fellowships for studies abroad awarded by the organization in 1952. He also welcomed the inauguration of programmes for the training of sub-professional or auxiliary personnel, particularly in the fields of nursing and midwifery. Such personnel could be taught more quickly, in larger numbers and at smaller expense than professional staff, to perform many of the more routine services. He was

convinced that it was shortage of trained personnel that was hampering WHO in its work.

51. He noted that major emphasis was still being placed upon programmes for combating such diseases as malaria and tuberculosis, which had been singled out because of their widespread incidence and the availability of means of control. But WHO had also adapted its activities to other needs of particular countries, and the figure of three million patients treated for yaws, like the simultaneous campaign against that disease and malaria in Liberia, reflected massive achievement. Such work led not only to the alleviation of suffering, but also to increased agricultural or industrial productivity, and hence, eventually, to improved economic and social conditions.

52. He pointed out that additional contributions from members of a region to special supplementary regional budgets, as provided for in paragraph (f) of Article 50 of WHO's Constitution, might provide means of financing additional programmes which WHO itself was unable to bear.

53. He was gratified to note the recognition by the Director-General in the introduction to the report (E/2416) of the advantages of planning and carrying out international assistance programmes in several fields simultaneously, as exemplified by the practical work being done jointly by WHO on the one hand and FAO, other specialized agencies, UNICEF and the United Nations itself on the other.

54. In conclusion, he expressed great appreciation of the importance WHO attached to the need for undertaking an evaluation of its programme activities to date. He had been somewhat concerned lest particular needs and degree of decentralization should lead to neglect of the broader international objectives, and hoped that it would prove possible by 1954 to provide an appraisal of WHO's long-range work.

55. Mr. MUÑOZ (Argentina) wished to add his delegation's expression of satisfaction to those of other delegations, and to support the Indian draft resolution (E/L.509/Rev.1).

56. His Government had followed with the greatest interest WHO's progress in the field of regional organization. At the time when the World Health Organization had been set up, the American continent had already enjoyed a tradition of efficient public health co-operation, thanks to the remarkable work of the Pan-American Sanitary Bureau (PASB). Now, the work being done by the Bureau's branch office in Buenos Aires was facilitating co-ordination and co-operation between his Government and WHO. In particular, the South-American Regional Seminar on Alcoholism, held earlier in the year in that city under the joint auspices of WHO and the Argentine Government, and the setting up there of the regional FAO/WHO Centre for the Study of Brucellosis, had been of great assistance.

57. While on the subject of regional organization, he wished to repeat the observations made at the Sixth World Health Assembly by the Argentine delegation, to the effect that the Argentine Government considered the Falkland Islands and its dependencies as part of the territory of the Republic of Argentina. His Government

had formally declared that it did not recognize colonies or dependencies of European countries in America, and reserved and upheld in their entirety its rights and legitimate claims to the Falkland Islands, South Georgia, the South Sandwich Islands and the territories situated in the Argentine sector of the Antarctic, over which the Republic of Argentina exercised sovereignty. The Republic of Argentina had also declared at that time that it could not agree to the Falkland Islands being represented in PASB by a member other than an Argentine national.

58. He realized that decisions regarding the limits of the various WHO regions in no way prejudiced the question of sovereignty, but he had felt it desirable to reaffirm his Government's position in order to remove any doubt on the matter.

59. His delegation was glad to say that Argentina had solved its own major health difficulties through special efforts in the public health field and bilateral agreements concluded with neighbouring States.

60. His Government noted with great pleasure the progress recorded in the reports before the Council (E/2416 and Add.1-4), and congratulated the Director-General on them. Dr. Chisholm had been an eminently efficient Director-General, and the Argentine delegation was particularly gratified that a South American should have been chosen to succeed him.

61. Though in general agreement with the Deputy Director-General, to whose statement he had listened with great interest, that great importance attached to the training of sub-professional and auxiliary personnel, he felt that first priority should be given to providing the economic resources required to carry out health programmes. Public health problems could be solved only through the combined use of all appropriate means, among which financial resources ranked very high. The driving force behind the debate on the Special Development Fund, which had been going on for some time in the United Nations, was the desire of the under-developed countries to see the funds necessary for carrying out that kind of programme made available. His country had itself repeatedly stated its views about the necessity for making it financially possible once and for all for those countries to achieve effective progress.

62. Mr. MEADE (United Kingdom) expressed the United Kingdom delegation's gratitude to the Deputy Director-General of WHO for his lucid and succinct account of the progress made by WHO in the past year.

63. Before commenting on that statement, he wished to express his own appreciation, and that of the United Kingdom Government, of Dr. Chisholm's vigorous personality, which had inspired the work of the Organization from its inception. He wished to convey to Dr. Chisholm his Government's thanks for the remarkable work he had done in the days of the Interim Commission of WHO, and later, when the organization itself had been set up. His delegation also wished all success to Dr. Candau, who, he felt, was extremely well qualified to serve as Director-General by his work in PASB, which had proved a model of efficiency and of co-operation.

64. WHO's reports (E/2416 and Add.1-4) presented a workmanlike picture of the technical advances achieved in the prevention and reduction of disease, and he felt that such periodic accounts of WHO's work were useful in enabling the Council to keep track of developments. He wished specially to mention the results achieved by WHO on the codification of International Sanitary Regulations, and to congratulate those responsible on the completion of the important task of dealing with reservations to those regulations entered by various governments.

65. He was glad, too, to notice that WHO proposed to spend in 1954 approximately the same amount as in 1953. Efforts to combat and control disease were of extreme importance, and it was, in consequence, difficult to impose a limit on expenditure for such purposes. Nevertheless, his Government could not contemplate with equanimity the prospect of its contributions to the specialized agencies rising year by year. He therefore hoped that a period of budgetary stability would now set in, during which WHO could adjust itself to present conditions, while continuing its steady progress.

66. In conclusion, he wished to state that Her Majesty's Government did not accept the statement of the delegation of Argentina as regards the Falkland Islands and the Falkland Islands Dependencies. Her Majesty's Government was responsible for the conduct of the international relations of the Falkland Islands and Falkland Islands Dependencies.

67. He would vote for the Indian draft resolution (E/L.509/Rev.1).

68. Mr. MATES (Yugoslavia) said that the present was the first occasion on which his country had had an opportunity of expressing its views in the Council on WHO's activities, in which Yugoslavia had taken an active part from the outset.

69. He congratulated WHO on the work done, and thanked the Deputy Director-General for his oral explanations.

70. He had followed the career of the outgoing Director-General with great admiration, and much regretted his decision to retire. He wished his successor every success.

71. He recalled the grave difficulties with which WHO had been confronted in its early days when many countries had had acute and widespread health problems, due largely to the devastation caused by the war.

72. The picture had now changed, and the emphasis had shifted to public health administration. That shift made it imperative to recognize the close connexion between social, economic and health factors. Unless public health workers fully appreciated the interplay of those three factors, progress would be impeded, especially in the field of preventive medicine and in the raising of the general level of health and hence of the standard of living.

73. As regards efforts to train a modern type of physician and health worker in general, the Yugoslav delegation considered that WHO had been completely right when deciding to give more assistance in the future to national educational institutions, and not to limit itself to programmes of foreign scholarships.

74. As to WHO's administrative structure, he was convinced that regional offices were in a better position to solve regional problems than a highly centralized headquarters organization, since they were better able to take account of peculiar local difficulties. Again, the problem of standardizing the regional offices was complicated by extraneous factors. He hoped that existing difficulties would be overcome, and that nothing would be done to restrict WHO's regional activities.

75. It was important that the WHO staff should reach a high standard of professional skill and understanding and, above all, that they should be utterly devoted to the organization's aims. Member countries should be represented in the Secretariat on, at any rate, a roughly proportionate geographical basis, although he realized the difficulty of achieving such a distribution in view of the fact that the developed countries had so many more trained experts at their disposal.

76. Contributions to international organizations constituted a very heavy burden on most of the countries where the need for help was greatest. He therefore called for strenuous efforts to secure the greatest possible degree of administrative efficiency in the organization. The funds at present available were limited, and should be devoted, so far as was possible, to enabling the maximum number of projects to be carried out. He shared the apprehensions of the Indian representative about the effects of the cuts in WHO's budget, and hoped that they would not lead to corresponding cuts in the organization's future programmes.

77. He thought that co-operation between WHO and the interested non-governmental organizations offered a useful means of extending the organization's activities, always provided that the non-governmental organizations in question were genuinely concerned with promoting health on a truly non-discriminatory basis.

78. In conclusion, he wished to express his Government's gratitude for the help given by WHO to his country, which had made it possible for a number of Yugoslav doctors to travel abroad and study foreign practice and to return home enriched with knowledge and new experience. His country had also been fortunate in the help it had received from foreign experts in organizing its own health institutes, as a result of which great progress had been made in bringing such diseases as malaria, syphilis and tuberculosis under control. He hoped that such fruitful assistance would increase, to the benefit of all concerned.

79. Mr. TUNCEL (Turkey) expressed his satisfaction with the work of WHO as described in the report and in the oral statement by the Deputy Director-General. Turkey has frequently called upon the services of WHO staff, and appreciated its competence and its experience.

80. He supported the Indian draft resolution (E/L. 509/Rev.1).

81. Mr. LEROY (Belgium) associated himself with the tribute to the WHO staff, and particularly to its Director-General, who had consistently dedicated himself to a high ideal. He conveyed his sincerest good wishes to Dr. Candau.

82. His delegation noted with appreciation the work done by WHO, and in particular the fact that the Sixth World Health Assembly had decided to admit the principle of the plurality of representation of non-governmental organizations. Within a specific field it sometimes happened that two non-governmental organizations could carry out useful work, although differing, for example, in their religious basis. An example was provided by the International Committee of Catholic Nurses and Medico-social Workers and the International Council of Nurses. By that decision, WHO would attract the devoted co-operation of certain organizations irrespective of religion, race or political opinion.

83. He expressed his satisfaction that the Sixth World Health Assembly should have accepted Mr. De Laet's proposal concerning the study of international medical law and comparative sanitary legislation. An attempt should in fact be made to frame an international code of medical ethics, the basis for which might be provided by the sanitary conventions approved in 1950 by the Geneva Conference.

84. Mr. HSIA (China) said that China had played an active part in the setting up of WHO, which he congratulated on its useful activities and, in particular, on its programmes for training health workers.

85. Turning to the question of regional organization, he explained that, as a general rule, the Chinese Government was opposed to the opening of branch offices by the specialized agencies, but that in the case of WHO it felt that such a development should be encouraged, in view of the important and successful work being carried out by that organization's regional offices, especially that done in China by the Regional Office for the Far East.

86. He wished to associate himself with the tributes paid to Dr. Chisholm for his effective and inspiring leadership over the past seven years, and to offer his best wishes to the incoming Director-General.

87. He could support the Indian draft resolution, but would suggest that the document symbol quoted at the end of paragraph 1 required some amendment, as it referred only to the analytical introduction to WHO's reports, and not to the voluminous reports themselves.

88. Mr. SHAW (Australia) wished to associate the Australian Government with the tributes paid to Dr. Chisholm, all of whose work had been marked by an extraordinary conjunction of crusading zeal and administrative efficiency. He also extended his best wishes to the new Director-General.

89. Turning to the report of the organization, he wished to make three points. In the first place, the organization's sphere of activity, and hence its needs, were constantly expanding. Resources, however, were limited, not so much in the shape of funds as in that of trained personnel and facilities, as the United States representative had already pointed out. In the case of Australia, the limiting factor in the provision of assistance was not the lack of funds; the problem had been to acquire the necessary resources with the money available.

90. At the Sixth World Health Assembly, the Indian representative, Sir Arcot Mudaliar, had observed that

a period for digestion was often desirable for growing organizations. It made possible careful consideration of the problem of priorities, and especially the elimination of work that was not of the highest priority.

91. In the second place, he welcomed the remarks of the Deputy Director-General about the increasing degree of co-ordination in technical assistance programmes being carried out at recipient government level. WHO carried out more operational work than was generally the case among the specialized agencies. Such aid was often complementary to the aid received under bilateral or multilateral arrangements. All external aid, it must be remembered, had to be fitted into the programmes of economic and social development being carried out by recipient governments. For this reason, the responsibility for administering the projects must rest with the recipient governments, which were the best judges of how the projects could best be fitted into the framework of their countries' needs as a whole.

92. Thirdly, he was glad to see a reference in the report to the need for co-ordinating WHO's activities with the work of the United Nations, chiefly through the Economic and Social Council. He welcomed such developments as the setting out of the technical assistance programme for the coming year by categories of priority, and the endorsement of the principle of concentration of effort in the social field.

93. As he attached great importance to the work WHO was doing in the training of public health personnel, he would vote for the Indian draft resolution (E/L.509/Rev.1).

94. Mr. MICHANEK (Sweden) expressed cordial approval of WHO's work. He emphasized the need for co-operation between the specialized agencies. It was, unfortunately, not always possible to deny the existence of overlapping, but critics could at least be told that co-ordination was under permanent consideration, and that, in the specific case of WHO, the subjects dealt with were of such universal importance that the organization was bound to concern itself with most schemes of a social nature.

95. He would stress the need for administrative economy. If governments were not willing to appropriate increased sums by way of contribution, WHO would have to adjust itself to the situation. He was not in principle opposed to the tendency of the specialized agencies to expand, but further expansion should be indulged in only after a period of concentration and stabilization.

96. As he understood that there was still an immense shortage of doctors in the world, he had no hesitation in supporting the Indian draft resolution (E/L.509/Rev.1).

97. Mr. RIVAS (Venezuela) expressed appreciation of the great work being done by WHO. In particular, he drew attention to the scheme for insect control in Venezuela. His Government had co-operated wholeheartedly in that work, as it was conscious of the desirability of raising standards of health, and had, indeed, carried out extensive and successful campaigns for the reduction of malaria and infant mortality.

98. He would vote for the Indian draft resolution (E/L.509/Rev.1).

99. Mr. PEROTTI (Uruguay) said that, if he did not speak at greater length, that was merely because he had not received all the documents in time. He expressed his appreciation of the work done by Dr. Chisholm, and would vote for the Indian draft resolution (E/L.509/Rev.1).

100. Mr. LOPEZ (Philippines) wished to thank the Deputy Director-General for his admirable statement, and to express his appreciation of Dr. Chisholm's work as Director-General. He added that the Philippines had benefited greatly from WHO's world-wide programme. More specifically, WHO had set up its Regional Office for the Western Pacific in his country's capital, and one of his compatriots had had the honour of presiding at the Fifth World Health Assembly.

101. He then turned to the question of regional organization, which had been discussed at a meeting of TAC during the Council's fifteenth session. He understood, too, that the Chairman of TAB had recently met the heads of the specialized agencies to discuss with them the question of co-ordinating their activities.

102. He believed in the need for co-ordination, but felt that it should not be ensured at the expense of the efficiency of WHO, the special character of whose work lent itself particularly well to regional organization. That fact should be taken into account should any attempt be made to establish a standardized pattern of centralized administration in the technical assistance field. He noted that some concern had been expressed both in WHO's report and in a resolution adopted by the Sixth World Health Assembly about the possibly unfortunate consequences of certain proposals affecting the specialized agencies were the special needs not taken into account.

103. He would support the Indian draft resolution (E/L.509/Rev.1), particularly as he attached great importance to the training of medical personnel, and because progress in the field of health lay at the very roots of social and economic progress.

104. Mr. NUÑEZ PORTUONDO (Cuba) wished to associate himself with the Uruguayan representative's statement, and to express his appreciation of Dr. Chisholm's services.

105. Mr. DHARMA VIRA (India) joined in the tributes paid to Dr. Chisholm's admirable work. His failure to do so earlier had been due to his ignorance of the fact that Dr. Chisholm was about to retire from his post.

106. Provided it commanded general support, he would have no objection to the Chinese representative's proposal concerning the Indian draft resolution.

107. At the request of the PRESIDENT, Dr. DOROLLE, Deputy Director-General of the World Health Organization, commented on the observations made on WHO's report.

108. He was gratified not only by the appreciation shown of his organization's efforts, but even more by the constructive suggestions made. In particular, he had noted the suggestion that a concise picture of public

health problems all over the world should be provided in future, and he would report the emphasis placed by representatives on the danger of uncontrolled regionalization, of which the Director-General was, in fact, fully aware.

109. He noted the desire for an evaluation of the difficulties that might result from regionalization, and agreed that that approach was necessary if effort and resources were to be properly allocated.

110. He welcomed the French representative's appeal to non-active members of WHO to return to the fold. Not only would such a step be useful to those countries themselves, but, even more, it would also enable them to make a valuable contribution to WHO's work.

111. He noted the remarks about the need for administrative economy and could assure the Council that the

Director-General exercised close and detailed control over the organization's expenditure.

112. In conclusion, he undertook to transmit to the World Health Organization, to Dr. Chisholm and to his successor, the kind words of representatives, which would be greatly appreciated.

113. The PRESIDENT thanked the Deputy Director-General for his able statements, and added his own good wishes, and appreciation of Dr. Chisholm's work, to those already expressed.

114. As to the Indian draft resolution, he suggested that the Chinese and Indian representatives might get together to draft an agreed text capable of commanding unanimous support.

The meeting rose at 6.15 p.m.