



*executive committee of  
the directing council*

PAN AMERICAN  
SANITARY  
ORGANIZATION

*working party of  
the regional committee*

WORLD  
HEALTH  
ORGANIZATION



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Topic 13: FELLOWSHIP PROGRAM

The Directing Council, at its IX Meeting, adopted the following resolution on the fellowship program (Resolution XVIII):

"The Directing Council,

Having considered Document CD9/5, on the fellowship program, presented by the Director of the Bureau,

RESOLVES:

1. To take note of Document CD9/5.
2. To request the Director to study as soon as possible, for possible inclusion in the respective regulations, and present to the Executive Committee for consideration, a fellowship program based on an analysis of the following points:
  - (a) The fundamental suggestions on the payment of stipends to fellows, contained in Document CD9/5.
  - (b) The creation of various types of fellowships, taking into consideration the following points, among others:
    - (i) The professional or academic status of the fellow.
    - (ii) His professional experience and number of years of postgraduate studies.

- (iii) The length and type of studies he is going to undertake.
- (iv) Whether or not he is engaged exclusively in public health work or preventive medicine, in an administrative, a hospital, or a teaching post.
- (v) The number of his dependents.
- (vi) The financial arrangements made by the respective countries for fellows."

Item 2-a of the above resolution has been given special attention. During the past year, certain stipends have been increased to an appreciable extent; in the United States of America and Puerto Rico, they were raised from \$200 to \$240 for "resident" fellows and from \$300 to \$330 for fellows on "travel status"; in Chile, from 75,000 to 90,000 Chilean pesos for "resident" fellows and from 112,000 to 135,000 for those on "travel status"; and in Brazil, from 11,000 to 12,500 cruzeiros for "resident" fellows.

The book grant is still \$50, but Regional Directors have been authorized to increase it up to a maximum of \$100 when, in their opinion, the first amount is inadequate for studies covering an academic year.

These measures, as well as others now under study, will undoubtedly have a favorable effect on the fellowship program, for the improvement in the fellows' financial situation will enable them to derive greater advantage from their studies. However, although it is true that "the award of a fellowship... implies providing the fellow with the financial means required for advanced studies abroad," it is no less true that "a stipend is not a salary... It is not supposed to cover the fellow's routine expenses at home for self or family and should therefore not be considered as a substitute for any salary paid to a fellow at home."

With respect to paragraph 2-b of the above resolution, which recommended "the creation of various types of fellowships" on the basis of specific points set forth in that paragraph, this is a matter that has been discussed at length at various meetings of the PASO Directing Council as well as in other international agencies conducting fellowship programs. Thus far, all of the UN specialized agencies have expressed opposition to setting up different categories of fellowships on the basis of professional or academic status, experience, duration of studies, number of dependents, etc. Whenever

this problem has been raised, repeated stress has been laid on the difficulties of classifying fellows into various types, owing to the fact that (1) educational methods, designation of functions and responsibilities, professional titles, etc., vary widely from one country to another, making it very difficult to draw a clear dividing line between one category and another; and (2) procedures need to be coordinated and kept uniform with those of other organizations contributing funds for fellowships.

With respect to point (1) above, the wide variations can be seen from the fact that in some countries the national public health service is a full state agency made up of numerous divisions, departments, offices, sections, etc., whereas in others it has only the status of a division or department. Another example is the situation with respect to nurses. In certain countries all nurses receive their diplomas from a university, even though the educational requirements for enrollment in the nursing school (primary and secondary studies) may be lower than those in other countries where university diplomas for nurses are given only in exceptional cases. One thus finds that some nurses possessing university diplomas have fewer qualifications and less experience than others who do not have such diplomas.

There is also wide variation in the titles given to professors in the different countries. These range from full professors and department heads to associate professors, assistant professors, adjunct professors, acting professors, adscribed professors, etc. Establishment of classifications could thus give rise to much misunderstanding and misinterpretation. Further to complicate the matter, a study of 200 fellowship applications, chosen at random from Bureau files, showed some 70 different functional titles, many of them most difficult to fit into any classification. A few of them are:

- Entomologist
- Acting Professor of Anatomy
- Chief, Vaccination Station
- Technical Adviser, Social Security Department
- Ward Chief, National Sanatorium
- Assistant Medical Officer, State Services
- Medical Officer in Communicable Disease Control
- Director, Insect Control Department
- Nursing Supervisor -- Nursing Service Instructor
- Director, Health Unit
- Chief Medical Officer, Health Unit
- Health Education Assistant
- Director of Department, Public Health Nursing
- Chief Medical Officer, Civil Hospital
- Chief of Department, Social Security Fund
- Director, School of Public Health
- Director, Municipal Works
- Zone Chief, Malaria Campaign
- Director, Child Health Division

With respect to point (2) above, concerning the need for procedures to be coordinated and kept uniform with those of other organizations contributing funds for fellowships, it should be pointed out that the fellowship program of the Pan American Sanitary Organization is financed both with regular PASO funds and with funds from the World Health Organization, the United Nations Technical Assistance Program, and the Organization of American States. Of the 276 fellowships awarded in 1956, representing total expenditures of \$511,449, 50 fellowships (\$60,408) were financed with PASO funds, 74 (\$177,939) with WHO funds, 131 (\$253,337) with funds of the United Nations Technical Assistance Program, and 21 (\$19,765) with funds of the Technical Cooperation Program of the Organization of American States.

Obviously, these contributions from various sources enable the Bureau to award a far greater number of fellowships than it would be able to finance with its own funds alone. It is also evident that uniformity and coordination must be maintained among the fellowships awarded with the funds of the agencies making these contributions. The fellowship regulations of the World Health Organization, for example, are also applicable to the fellowships awarded with Technical Assistance funds. There is, moreover, the Technical Working Group on Fellowships, composed of representatives of the United Nations and its specialized agencies, which holds meetings periodically. In this way, close collaboration and coordination have been achieved among all the agencies concerned, and year by year the standards and procedures for the award of fellowships have gradually been improved.

Notwithstanding what has been said above on the difficulties and complications connected with establishing different categories of fellowships, a possible classification into three groups has been prepared, in accordance with the suggestions of the Directing Council.

It should be pointed out, however, that this plan has met with varied reactions on the part of persons consulted. Some thought it to be incomplete, others considered it too complicated. For the reasons stated, many gaps will undoubtedly be found, owing to the great difficulty of covering within a given classification the wide variety of posts or ranks found in the governmental and educational institutions of the Member Countries of the Organization. As already indicated, for example, the chief of the health service in some countries is only the head of a department, whereas in others he is the technical director of an agency charged with all aspects of public health work.

To permit allocation of fellows under each category, consideration has been given to the possibility of establishing a point system, according to which the requirements for each of the categories might be fixed as follows:

- A - 90 points or over
- B - 40 to 89 points
- C - 39 points or under

In order to arrive at the point rating for a fellow, each of the factors mentioned by the Directing Council would be assigned a specific number of points, viz.:

# I. POSITION AND RESPONSIBILITY:

- |  |   |           |
|--|---|-----------|
| 1. Directors and assistant directors of national public health services.   | } | 55 points |
| Deans, directors, assistant directors, and officers of similar rank in schools and faculties of medicine, public health, nursing, veterinary medicine, dentistry, and engineering. |   |           |
| 2. Full and associate professors.  | } | 45 points |
| Chiefs of divisions and departments of national health services.   |   |           |
| Directors and assistant directors of university or training hospitals with 200 or more beds.   |   |           |
| Chiefs of health centers.  |   |           |
| 3. Directors and assistant directors of university or training hospitals with less than 200 beds.  | } | 35 points |
| Directors and assistant directors of non-university and non-training hospitals with 200 or more beds.  |   |           |
| Acting and adjunct professors.   |   |           |
| 4. Directors and assistant directors of non-university and non-training hospitals with less than 200 beds.   | } | 25 points |
| Chiefs of clinics.   |   |           |
| Chiefs of offices and sections.  |   |           |
| 5. Assistants in clinics or university departments.  | } | 15 points |
| Assistant chiefs of offices and sections.  |   |           |
| Nursing supervisors (supervising a minimum of 10 nurses.   |   |           |
| 6. Supervisors of sanitary inspectors (in a national department or health center).   | } | 10 points |
| Nursing supervisors (supervising less than 10 nurses.  |   |           |

## II. PROFESSIONAL EDUCATION AND TRAINING

### a. With university qualifications

- |  |   |           |
|--|---|-----------|
| 1. Physicians, engineers, dentists, veterinarians, lawyers, architects.  | } | 15 points |
| 2. Nurses, midwives, health educators, hospital administrators, medical records librarians and assistants, statisticians, dietitians, pharmacists, and technical laboratory workers. | } | 10 points |

### b. Without university qualifications

- |  |   |          |
|--|---|----------|
| 1. Sanitary inspectors, waterworks operators, auxiliary laboratory workers, nurses and midwives (non-university) and other auxiliaries in general. | } | 5 points |
|--|---|----------|

## III. TYPE AND DURATION OF POSTGRADUATE STUDIES ALREADY COMPLETED

### 1. Non-academic

- |                                      |           |
|--------------------------------------|-----------|
| a. 3 to 9 months, as a minimum ..... | 5 points  |
| b. 9 months or over .....            | 10 points |

### 2. Academic

- |   |           |
|---|-----------|
| a. Less than one year of academic studies ..... | 5 points  |
| b. One year of academic studies .....           | 10 points |
| c. More than one year of academic studies ..... | 15 points |

## IV. YEARS OF SERVICE IN GOVERNMENTAL DEPARTMENTS OR TEACHING INSTITUTIONS, FOLLOWING GRADUATION

2 points per year to a maximum of 20 points.

## V. FULL-TIME SERVICE

- |                             |           |
|-----------------------------|-----------|
| 1. Full-time services ..... | 10 points |
| 2. Part-time services ..... | 0 points  |

No reference is made in the classification to "number of dependents."

Each category however, could be subdivided into two groups:

a. Fellows without dependents.

b. Fellows with dependents (dependents being taken to mean children under 21 years of age and wife).

An additional amount, per dependent, could be assigned to the latter group.

In this paper consideration has not been given to "the financial arrangements made by the respective countries for fellows," since this would be contrary to the intent of Resolution III of the VIII Meeting and Resolution XIX of the IX Meeting of the Directing Council. It is taken for granted that the countries will fulfill the commitment they assume in requesting a fellowship, to the effect that "the absence of the candidate during his studies abroad would not have any adverse effect on his status, seniority, salary, pension, and similar rights."

It must be reemphasized that the classification proposed, or any other, would perforce need to be brought into accord with the procedures to be followed by the World Health Organization and other international organizations awarding fellowships through the Pan American Sanitary Bureau. Failure to obtain such accord would give rise to the serious problem of having to administer a fellowship program under two different sets of regulations: one for fellowships awarded with PASO funds, and another for those awarded with funds of the WHO and the Technical Assistance Program. This would undoubtedly lead to a situation in which two fellows following the same studies at the same place would be subject to different provisions and have different stipends, a situation which could give rise to great confusion. It would be very difficult, moreover, to establish a fair criterion for deciding on the award of one or the other type of fellowship to a particular applicant.