Background

Although an analysis of the changes that have taken place in the health problems of the American countries in the last thirty years enables us to assess the extent and the depth of the progress made, it also shows the limitations of resources and methods used and the need for new approaches.

Experience has shown that the local or national approach to some health problems is not enough to solve them. An analysis of the background to these problems shows that they must be viewed from a global point of view which encompasses the entire Hemisphere or at least each of its major regions. The concept of integrated development, according to which health problems extend beyond the field of biology and sanitation proper into the fields of economy, the behavioral sciences, etc., makes it indispensable to mobilize very broad and diversified areas of knowledge which must be used with coordination in mind in studying such complex systems. While there is already such an acceptance of such approaches in our main universities and technical institutions concerned with health and while a number of programs pursuing these objectives are under way in various areas of South and Middle America, it is becoming more and more obvious that some supplementary integrating machinery is needed for analyzing the problems and seeking solutions with an impartial and broad approach unimpeded by the limitations that are imposed on many initiatives by local circumstances. It is also felt that only a comparative examination of some problems will make it possible to deal with them in their entirety and to utilize all the existing possibilities to the full. And there is a growing conviction not only in our Continent but also in other regions of the world that such comprehensive approaches and comparative analyses will be fully effective only when they are undertaken at the international level by agencies with the necessary capacity and experience for doing so.
As regards the institutional resources available at the national and regional level for training, research and provision of services in the health field, it may be noted that while better opportunities are lacking in some fields there is also underutilization of facilities already available in many others. In recent years the Latin American countries have developed centers of excellence whose potentialities have not been fully exploited especially at the Continental level, partly out of ignorance of the scientific standing they have achieved but also because of the lack of machinery for making full use of the capacity of each Center.

Something similar may be said of some programs and activities of the Pan American Health Organization and the centers supported by it or in which it participates on a significant scale. These centers have a highly qualified staff, extensive experience, a wealth of data, and opportunities for learning, training and research which while already utilized to a considerable extent could be used even more dynamically and on a vaster scale by emphasizing their possibilities as impellers of scientific and technological progress applied to the health field.

The development and diffusion of knowledge about public administration and the complexity of the problems engendered by the development of Latin American countries have made it necessary for the Governments concerned, regardless of their political configuration, to take an increasing interest in the problems of planning in general and of health planning in particular. In so doing they are becoming aware of the need for a more accurate knowledge of the problems in order to set priorities; of methods of research and operations research, in order to evaluate procedures and correct them; of mechanisms for making better use of existing knowledge in order to deal with specific problems; and of a policy enabling each country to make maximum use of the capabilities and talents of its public health workers. In so far as manpower training is concerned, such needs can only be met by a postgraduate education program which takes into account the priorities set by the countries or arising from an overall view of regional and hemispheric problems and which is sufficiently flexible to favor the use of teaching institutions and of the research and service resources available in each area.

Awareness of the above-mentioned needs and a desire to satisfy them have led to the search for suitable machinery for that purpose and this has been call the "Pan American Health University".

Concept and Name

It is not intended to be just another university similar to those now in existence which would duplicate what they are already doing. The idea is to have machinery rather than an institution which would coordinate the possibilities offered by existing institutions boldly and dynamically into a system for promoting the study and solution of specified health problems in
the American countries and the postgraduate training of professional health workers in those countries who are concerned with health matters.

Although the title "Pan American Health University" is used, the concept set forth in this document is different from the usual concept of a university. The difference is much more one of form than of substance. We all know that the very concept of a university as an institution and the definition of its purposes is in full evolution. Side by side with institutions that endeavour to cling with varying degrees of success to the concept of Humboldt, or of Newman, or of Flexner, there are the "multiversity" of Kerr or the "open university" of the British. It seems that we are growing closer and closer to the idea that the essence of the university lies in the nature and level of its studies and research and in the breadth of the criteria for carrying them out, and not in special features and facilities, university life, habits and customs, which it attained at a certain stage of its development.

This also appears to be the view of the Advisory Committee on Medical Research to which the project was submitted at its XI Meeting and whose final report it is stated: "The concept of the University as used in the present project is a return to the more classical definition of the university and, as such, is of great value in removing artificial restrictions at present hampering the efficiency of postgraduate education."

Objectives

The objectives of the Pan American Health University would be:

a) To help, by coordinating existing possibilities and promoting new possibilities, to identify the health problems of the Hemisphere and to develop new methods and approaches to them by stimulating original thought and scientific and technological creativity.

b) To promote the postgraduate training of professional health workers of the Western Hemisphere in methodologies and areas of knowledge which have priority for their respective countries.

c) To identify centers of excellence in the health field in the various countries of the Continent, to help to develop other centers, to publicize the education, research and training opportunities in them, and to facilitate their maximum utilization.

d) To establish liaison with the Technical Departments and other units of PAHO or in which it takes a significant part with a view to improving the coordination of efforts in postgraduate education, strengthening programs and activities in the field of health and developing a global policy of the Organization at that level.
Organization and Activities

In pursuit of the above-mentioned directives and having regard to the best and most logical method of achieving them, it is proposed that the University should be composed of bodies at two institutionally and operationally different levels, namely:

a) Central Coordinating Bodies

b) Operational (or Participating) institutions

The Central Coordinating Bodies would have the necessary academic and administrative responsibilities for formulating and implementing the academic policy and plans of action of the University, for liaison with the Operational institutions in accordance with the principles mentioned above; for the search for funds; and for dealing with any other matters relating to the life and objectives of the University.

The Central Executive Body would be an Executive Committee whose Chairman would be a coordinator. For discussions of academic policy and curricula and for such other matters as it may be necessary to discuss, the Executive Committee would have available to it the advice of outstanding personalities in the scientific and academic world.

Operating or participating institutions would be those which, as centers of excellence and by mutual agreement with the Executive Committee, agree to take part in carrying out specific teaching and research projects. Various types of institutions are envisaged: universities, schools, institutes, other teaching or research bodies at the advance level; Government or non-Government agencies concerned with health matters in each country; PAHO departments and programs; centers sponsored by PAHO or in which it takes a significant part; other institutions whose nature is difficult to anticipate which might contribute to the studies in view.

Relations with operational institutions and their participation in the activities of the Pan American Health University would be conducted in such a way as not to interfere with the independence or policy of those institutions. Any common activity would be determined by mutual consent and it would be made perfectly clear that the Pan American Health University has no intention of interfering in the life of the institutions or of imposing rules of procedure on them and that it would play not a competitive but a complementary and coordinating role.

In using the teachers, research workers, and technicians of the operational institutions, the Pan American Health University would do so in such a way as not to facilitate or encourage the brain drain, for which purpose efforts would be made to ensure that most of its activities were carried out at the local level in the institutions. It is to be hoped that
the work of the University would induce professional health workers to remain in their countries by creating for them new motivations and opportunities.

The courses would consist partly of research and training in the field and partly of formal studies in the operational institutions participating in the program. Research and training would be carried out wherever possible in the light of the health problems the students would have to tackle on returning to their countries of origin. Fellows would be selected on the basis of their personal qualifications bearing in mind the postgraduate level of the studies and their relationship to specific health problems.

Relations between the University and the Pan American Health Organization

Because of its nature and objectives, the Pan American Health University should be academically autonomous. Administratively it would form part of the Pan American Health Organization. The execution of the program by putting the initial concepts to the test and with the fund of experience gained would make it possible to take better informed decisions about the position of the University in the structure of PAHO. At the outset it would be best for the University to begin as a program conducted by PAHO through its Department of Human Resources Development.

The cost of studying the project and of initiating the activities of the University would undoubtedly be low and could be absorbed within the current budget of the Organization without substantially modifying it and the program in operation. The structure proposed would not involve large investments in buildings, laboratories, libraries and other resources indispensable for the operation of a university as usually conceived, since such resources would exist in the operational institutions or in the headquarters area of the Central Coordinating Bodies. To the extent that the plans for achieving the objectives stated were being carried out, it is to be hoped that the activities undertaken would provide a feedback mechanism for financing subsequent initiatives.

The fact that the proposed structure entails a minimum established staff and a maximum of flexibility will make it possible to correct errors and to rectify plans of activity without losing much time or funds and without prejudicing the fundamental objectives of the University.

Development of the Project

In December 1971, the Director of the Pan American Sanitary Bureau, Dr. Abraham Horwitz, engaged a short-term consultant, Professor Rubens Maciel of the Federal University of Rio Grande do Sul, to prepare a preliminary document on the project for the establishment of the Pan American Health University. When the document had been discussed and the main aspects of the project delineated, Professor Maciel was authorized to visit some of
the Latin American countries with a view to explaining the project to health authorities and to authorities and eminent figures in the field of education and to obtain their opinions and pertinent suggestions. The idea of creating the mechanism described was very favorably received in principle and encouragement was given to its further exploration.

This proposal was presented to the Advisory Committee on Medical Research at its XI Meeting held in Washington, D. C., from 19 to 23 June 1972. The Committee discussed various aspects of the project, and emphasized that coordination of efforts would greatly improve postgraduate education in the health sciences and would help to integrate many PAHO activities at present in operation; it would undoubtedly help to strengthen programs for the training of public health workers.