

directing council



PAN AMERICAN
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ORGANIZATION

regional committee

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Topic 24: GENERAL PROGRAM OF WORK OF PAHO/WHO COVERING THE PERIOD
1962-1965

1. Introduction

1.1 The Directing Council, at its XII Meeting, adopted the following resolution:

RESOLUTION XXVI

"The Directing Council,

Having studied the Third General Program of Work of the World Health Organization, as presented in WHO Official Records N^o 102; and

Considering the importance of long-range planning on a sound basis which will take into account the needs of the countries of the Hemisphere as well as the state of advancement of the art and science of public health in all its branches,

RESOLVES:

1. To take note of the Third General Program of Work adopted by the World Health Organization.

2. To instruct the Director to prepare and submit to the XIII Meeting of the Directing Council a General Program of Work for the Pan American Health Organization for the period 1962-1965, taking into account the comments made by the various delegations during the discussion of this topic."

1.2 In compliance with that mandate, the Director is submitting the present document to the Directing Council for consideration and approval. The program it contains has been prepared in such a way as not to interrupt the continuity of earlier programs of the Organization and taking into account the observations made by the Representatives during the discussion of this topic at the XII Meeting.

1.3 In addition, due consideration has been given, in drawing up the program, to the perspectives for public health in the Americas opened up by the Act of Bogotá and the responsibilities this entails for PAHO, as well as the pertinent resolutions that appear appended to the Charter of Punta del Este, as they were adopted by the Special Meeting of the Inter-American Economic and Social Council at the Ministerial Level.

1.4 Finally, in the preparation of the program account has been taken of the pertinent resolutions and recommendations of the governing bodies of the World Health Organization, particularly as regards framing the regional programs within the Third General Programme of Work adopted by the Thirteenth World Health Assembly in its Resolution WHA13.57.

2. Principles and Criteria

2.1 It must be repeated that projects of assistance to Governments are actually projects of the Governments themselves and that the function of PAHO/WHO is limited to cooperating until the national services are able to do without this collaboration and maintain the programs themselves. Consequently, in selecting the projects in whose implementation PAHO/WHO is to collaborate, consideration will be given only to those that have sufficient support from the interested Government and for whose development and maintenance well-founded plans have been established.

2.2 This specific planning must be a part of the preparation of the national plans for the next decade, referred to in Resolution A.2 appended to the Charter of Punta del Este, which resolution also recommends to the Governments that, whenever they consider it advisable, they utilize the technical advisory services of PAHO/WHO in the preparation and execution of these plans.

2.3 As there will always be a disparity between the financial resources of PAHO/WHO and the volume of assistance needed by the Governments, it will be necessary to make a selection among the activities that are requested and indicate those which should preferably be undertaken by the Organization. The selection can be made employing one of the following criteria or a combination of them: those activities which are technically and economically sound and can best be carried out with international aid; those that appear to be of greatest urgency; and those which, as far as possible, are capable of yielding demonstrable results. In addition, the desirability that their results should benefit the largest possible number of countries and people should be taken into consideration, along with the possibility of obtaining the greatest yield from the resources available.

2.4 In planning the programs for each country, account will be taken of the country's own resources and of the aid for this kind of activities already provided or to be given by PAHO/WHO and other organizations of a multilateral or bilateral nature whose services are available to the country in question.

2.5 The following general criteria have been applied in drawing up the general program of work:

2.5.1 All countries, including non-self-governing territories, should participate and cooperate in the work of the Organization and are naturally open to receive its benefits.

2.5.2 The services of PAHO/WHO must continue to be available to all the states and territories in the Americas without distinction, with the exception of the effect that may be given to the recommendation of the Charter of Punta del Este that priority be given in the use of the funds coming from the Alliance for Progress for the countries that are relatively less developed.

2.5.3 Assistance for programs of exclusively national scope will be given only to Governments that expressly request it.

2.5.4 Services should foster national self-reliance and initiative in health activities, which should not normally be implemented directly by the Organization.

2.5.5 The work of the Organization should be so planned and implemented as to attain the utmost degree of integration and coordination with the related activities conducted by the United Nations, the specialized agencies, the Organization of American States, the International Atomic Energy Agency, and other agencies operating in appropriate international fields.

2.6 In the rapid evolution of research and medicine and increasing social and economic development, new problems constantly arise and new techniques, methods and practices have to be developed. Questions which today do not appear to call for action on the international plane may suggest or even demand such action before the end of the specific period. Consequently, the general program of work must be flexible and open to periodic review.

3. Program for 1962-1965

3.1 General Remarks

For historical and traditional reasons the first and second programs of work for specific periods have emphasized the distinction between services of general international interest and the strengthening of national health services. Experience has shown that this distinction has become more and more artificial. For instance, assistance is required to strengthen national services for international quarantine, the control of addiction-producing drugs, and for the examination of pharmaceutical preparations. On the other hand, advisory services for action against diseases such as malaria, smallpox, and many others, now comprehend a research component and a synchronized or coordinated action, both of world-wide character.

It must be realized also that the success of international health activities such as the collection and compilation of epidemiological intelligence and statistical information, and the application of international standards and regulations, etc., depends directly on the efficiency of local health administrations. Such international services will become fully utilizable only when the local health services are sufficiently developed to contribute effectively to international requirements.

However, it is to be hoped that in conformity with paragraph 1-c of Resolution A.2 appended to the Charter of Punta del Este, it will be possible, during the period covered by this general program of work, "to improve the collection and study of vital and health statistics that will serve as a basis for the formulation and evaluation of national health programs."

3.2 International Services of General Interest

3.2.1 Among the subjects of potential world-wide interest are international epidemiology and quarantine, the compilation and analysis of statistical material from all countries, the establishment of international standards, and the publishing and keeping up to date of texts such as the International Pharmacopoeia and the International Classification of Diseases, Injuries, and Causes of Death. These activities provide essential services to governments, to educational and research institutions and to industry, trade and communications. In most of these functions WHO is either the only source of such services or is generally recognized as especially fitted to discharge the world-wide responsibilities involved. It is hoped that WHO will increasingly centralize the activities of international quarantine and epidemiological information during this third program of work.

3.2.2 The Organization is gradually accumulating an enormous store of information on health conditions and actual or potential facilities for health work in the Hemisphere. More and more the Organization is being called on to serve as a clearing-house and to disseminate this information among health workers.

It is expected that an increased number of these activities will be carried out at the regional level in the period covered by the third program of work. Thus, it is almost certain that research activities under way in cooperation with the National Institutes of Health of the USPHS on geographical epidemiology, certain cardiovascular diseases, and some types of cancer will be intensified during this period. And the study under way in the Region of the Americas will no doubt make a contribution toward the next revision of the International Classification of Diseases, Injuries, and Causes of Death.

3.2.3 The approach of the Organization to radiation and health should continue on a wide basis, encompassing both the use of radiation and isotopes in health care (including research) and the health problems associated with the increasingly widespread use of radiation and radioactive material and the development of atomic energy for peaceful purposes. The Organization should be prepared to continue assistance to countries in evolving balanced programs in radiation health, including protection of mankind from ionizing radiation hazards from all existing sources, especially from the application of X-rays; associated with such programs there is need for continued help in the specialized training of various types of personnel necessary for this type of work. An important aspect of the program will be assistance in the development of basic data on the effects of radiation and the behaviour of radio-nuclides, necessary for sound international recommendations for health protection. In this regard, it should be recalled that during the discussion of this topic at the XII Meeting of the Directing Council, it was suggested that the basic problems could be left to the initiative of WHO, with PAHO undertaking the utilization of data and experience gathered at WHO Headquarters.

3.3 Strengthening of National Health Services

3.3.1 Under this heading are included a great variety of activities that actually cover all aspects of medical and health practices in any or all stages of planning, implementation, or evaluation. Projects of this nature may be narrowly localized or may cover one or more countries in one or more regions and include countries in different stages of development. Governments may request assistance from PAHO/WHO to establish, reorganize, or improve curative or rehabilitation services, or services for prevention of disease or promotion of health. In any event, the Organization should render its assistance in such a way as to ensure that the country is taking appropriate steps towards the ultimate goal of establishing properly balanced and integrated national health services.

In this connection, it should be noted that properly organized and integrated health services cannot be considered as isolated agencies, for they are closely related to numerous social and economic services and are subject to the influence of local and international factors beyond the control of the Organization. Nevertheless, when giving assistance to governments, the Organization should endeavor to help the countries to attain the following ends, through simultaneous or synchronized activities:

- (a) integration of national health services;
- (b) national coordination of health activities with economic and social activities;
- (c) well-balanced development of PAHO/WHO programs in the country;
- (d) coordination with the other international agencies working in the health, economic, and social fields;
- (e) protection of health covering the control of every potential harmful factor (including radiation) of human ecology, with particular reference to PAHO/WHO's interest in and support of the program of community water supplies;
- (f) promotion of health, by positive measures aimed at the improvement of all factors of the physical, biological, and social environment of the individual and of the community.

3.3.2 The achievement of integration of national health services is of particular importance in the Americas, where a large part of the population receives medical care and assistance through public funds spent under the headings of public welfare, social security, workmen's medical compensation agencies, or others affecting specific population groups; these being headings that, in most of the countries, escape the jurisdiction of the Ministry of Health. The high cost of medical care can be reduced through adequate organization and administration that will avoid duplication or competition for available resources among the various agencies entrusted with providing those services.

3.3.3 With respect to point (e) it is appropriate to mention that in the Ten-Year Public Health Program contained in Resolution A.2 appended to the Charter of Punta del Este the specific recommendation is made that the Governments of the Americas formulate projects for gradual development designed to "supply potable water and sewers for at least 70 per cent of the urban population and 50 per cent of the rural population during the present decade, as a minimum."

3.3.4 In relation with point (f) it should be noted that in Title I of the Charter of Punta del Este mention is made, as a specific objective for the progress of the peoples of America, "to increase the construction of low-cost houses for low-income families in order to replace inadequate and deficient housing and to reduce housing shortages; and to provide necessary public services to both urban and rural centers of population."

3.3.5 It is acknowledged that integration and coordination are among the most difficult tasks in public administration. It should also be recalled that, on instructions from the Health Assembly and the Governing Bodies of PAHO, the Organization has sponsored campaigns against specific diseases and has promoted specialized services. It is probable that in the very near future the governments will request assistance for converting these campaigns and services into more integrated programs and the Organization should be ready to provide this assistance.

3.3.6 Last to be mentioned, but perhaps first in importance in the implementation of the activities enumerated above, and specifically in connection with points (b), (c), and (d), it must be noted that at the Special Meeting of the IA-ECOSOC in Punta del Este the Latin American countries agreed to introduce or strengthen periodic examination and revision of the national plans for economic and social development. Periodic review carries with it the concept of evaluation.

3.4 Measures against Disease

3.4.1 Communicable Diseases

The PAHO/WHO should continue to promote the eradication of communicable diseases when technically and economically sound programs are feasible. It is vital not to relax the drive towards malaria eradication, for at this critical stage any remission of work might lead to irretrievable loss. The constantly increasing evidence of mosquito resistance to insecticides is an established threat to the success of the program. It is necessary, therefore, to find answers to the problems that will inevitably arise as a result of the application of insecticides.

(a) It is also expected that the governments will require assistance in the eradication of smallpox, an activity for which PAHO/WHO has already assumed responsibility, and in which it is almost certain that the desired results will be attained during this third general program of work.

(b) While the continuation of the campaign to eradicate the urban vector of yellow fever might be questioned from the epidemiological point of view, given the positive results so far achieved, it must be carried on for reasons of public health administration.

(c) The eradication of yaws must also be continued; the Americas have demonstrated that the theoretical possibility of eradication of this disease, which has such great economic and social repercussions, can become a reality when the available techniques are adequately applied.

(d) During this period the Organization must devote special attention to research and cooperation with the interested governments in the execution of pilot projects designed to control onchocerciasis, Chagas' disease, schistosomiasis, hydatidosis, leprosy, and other communicable diseases that can be controlled with a modest per capita investment.

(e) PAHO/WHO must also give particular attention to the problem of tuberculosis, and study to what extent bovine tuberculosis should be combated in the Americas as a part of the control of human tuberculosis, particularly pulmonary tuberculosis.

(f) PAHO/WHO must contribute to these activities of not only regional but world-wide scope and also cooperate in the establishment of appropriate national and international machinery to consolidate and maintain the results obtained, as well as to profit fully from the social and economic changes which will occur as a consequence of campaigns of eradication or control of communicable diseases.

3.4.2 From the interest which is being aroused in the attempt to control certain non-communicable diseases, especially degenerative diseases of the heart and circulation, and malignant tumors, it may be expected that the countries will request assistance for programs in these fields. In the same way, it is to be expected that requests will be received for assistance from the Organization in dealing with problems arising from rapid urbanization and industrialization, among them those related to mental health, such as alcoholism, homicide, and juvenile delinquency. The Organization should be technically prepared to meet such requests.

3.5 Education and Training of Professional and Auxiliary Personnel

Activities related to the education and training of professional and auxiliary personnel will remain for a long time one of the most important functions of the Organization; in many countries the shortage of adequately trained staff still impedes the development of health programs. Since the professional and technical education of personnel is of fundamental importance to the strengthening of national health services, these two objectives must be closely connected in the policy of the Organization.

The problem is both quantitative and qualitative. With the necessary differences in approach from one country to another, the common purpose is: (a) to reduce the shortage of trained staff by increasing the opportunities for teacher training and encouraging the entrance of suitable persons into the medical teaching profession; and (b) to provide the highest possible technical efficiency among undergraduates and trainees by improving the type and raising the quality of education.

In various countries more attention to the study of local circumstances of health and disease is called for. This includes the development of departments of preventive and social medicine in medical schools and post-graduate courses. Governments are also becoming more interested in problems of mental health and in the need for increasing their personnel in this field; assistance in improving the knowledge of the undergraduate and the general physician will be useful.

In this regard, it would be advisable to make a careful check of the curricula of many universities in order to ascertain whether or not they are producing professionals of the kind needed by the countries for developing their health programs.

Much emphasis has been laid until now upon education and training of health personnel as a whole, but, in the light of ten years' experience, more specific needs are apparent. It is realized, for instance, that particular attention should be given to the education of persons who are to assume, within the health services of their countries, high technical or administrative responsibilities, or who are to become senior teachers. This is a notable example of the close link between the two objectives referred to above.

Specific efforts towards the education of auxiliary personnel of all categories appear as a more and more pressing need in all countries. The most urgent need is the instruction of those who are selected

to teach auxiliaries in their own countries. The next step would be to promote the creation of local schools for auxiliaries on a broad basis prior to specialized training.

It will be the responsibility of PAHO/WHO to continue during this specific period to develop its fellowships programs, consultant services, assistance to educational institutions and exchange of scientific information, in order to help countries to realize what their needs are and to promote such measures as are required by national and local conditions.

3.6 Medical Research

For the period 1962-1965 the Organization will develop its program of more extensive and intensive international co-operation in stimulating, co-ordinating, promoting and, where appropriate, supporting medical research.

3.6.1 The following types of research are most suitable for international co-operation:

- (i) problems for which only world-wide experience is adequate, such as demographic and genetic studies of populations, measurement of incidence and prevalence of disease, characterization of environmental factors which influence health;
- (ii) communicable diseases which are either world-wide or which occur in large geographical areas;
- (iii) unexplained variations in the incidence and prevalence of disease and the comparison of health and illness in contrasting environments;
- (iv) investigation of certain rare conditions about which adequate information can be collected only by pooling wide experience and which may have practical applications in fields far beyond its immediate purpose;
- (v) provision of research services to participants in broad programs particularly well suited to an international framework.

3.6.2 In its research programs PAHO/WHO will keep the appropriate governmental authorities informed of its activities, and utilize existing organizations and institutions by supplementing, and not by supplanting or duplicating, national research activities. The Organization also will assist the advance of research in countries where this is in the early stages of development.

PAHO/WHO will carry out these objectives by:

- (i) the training of research workers;
- (ii) assisting in the planning of research programs and institutions;
- (iii) improving communication between scientific workers;
- (iv) developing methods of research particularly applicable to regional health problems;
- (v) subsidizing medical research in the form of personnel, equipment or grants.

3.6.3 The Organization has entrusted research to INCAP, the Pan-American Zoonoses Center, and the Pan-American Foot-and-Mouth Disease Center, but if, as is probable, scientific medical research becomes intensified, PAHO/WHO will have to promote and assist in the development of national research centers even in countries where there are only potential researchers and facilities but where the existing problems require investigation.

3.6.4 Up to now the Organization has been interested mostly in research related to and arising from the practical disease control programs in which it was actually engaged and this effort should continue, but it must be realized that any extended program of research even planned with a utilitarian aim inevitably gives rise to problems of basic research to an extent which can only be forecast as the research unfolds.

3.6.5 In whatever field of medical research the Organization operates, one of its primary tasks should be to promote the standardization of techniques and materials. PAHO/WHO should facilitate the distribution of such standard materials among research centers and research workers.

3.6.6 The shortage of trained personnel for research is probably more acute than in any other medical field. If the medical research program should be amplified more people must be trained to become medical research workers. This need should be urged upon every country where there is a medical school and assistance must be given to countries to institute a training scheme for research workers. This scheme will be, at the same time, a most influential factor in leading a country to improve the quantity and quality of its medical teaching.

3.6.7 In Paragraph 3.3.5 it was stated that the Organization should be prepared to assist governments in the orderly integration of health services. Many countries find this problem difficult of solution and operational research should be introduced into organizational and administrative practices, resulting in a more effective development and administration of health programs. Needless to say that the PAHO research program will be completely coordinated with that of WHO.

3.7 Co-ordination of Health with other Social and Economic Activities

Co-ordination of health work means the concentration of all efforts from whatever source, so that they can be fully effective for achieving the stated objectives. Effective co-ordination, national or international, depends less on formal agreements than on mutual understanding, goodwill and respect.

For purposes of coordination outside the Region of the Americas, the Pan-American Health Organization makes use of the relations established by WHO.

3.7.1 WHO has established working relations that fall into four main groups: (a) with the United Nations, the specialized agencies and the International Atomic Energy Agency; (b) with other inter-governmental or governmental agencies engaged in international health work; (c) with non-governmental organizations interested in health problems; (d) with a large number of other organizations and institutions, official and private, and individuals in many parts of the world. Some of these are concerned principally with health; for others, health is incidental to some other primary objective. The number (more than 1500) and the different types of agencies in these four groups indicate the size and complexity of the problem of co-ordination, but the development of such a system of relationship since the establishment of WHO testifies to the growing general recognition of its co-ordinating responsibilities and of the results that such co-operation can secure. In this specific period WHO will continue to expand the basis of this system and to increase its effectiveness. This will necessarily involve consultations, reciprocal representation at formal and other meetings, contacts at secretariat level and, when called for, joint planning and organization of common undertakings.

PAHO represents WHO at most of the meetings and consultations with international, governmental, and non-governmental organizations in the Region of the Americas.

3.7.2 As part of its co-ordinating role, PAHO/WHO should endeavour to stimulate appropriate, effectively co-ordinated health activities by other agencies; in its working relations with the four groups mentioned in 3.7.1 above, PAHO/WHO will, therefore:

(i) seek co-ordination of health elements in plans and programs world-wide, regional, inter-country and national;

(ii) co-operate at all levels with undertakings that contribute to health, by making available the benefit of PAHO/WHO's technical resources and experience.

3.7.3 Notwithstanding that co-ordination of international health work is dependent on co-ordination of national plans for social and economic development, of which health is an integral part, there has been and there will be more and more room for PAHO/WHO to play its role in collaboration with the Economic and Social Council and the other agencies concerned, so as to ensure from the health point of view a proper balance within the socio-economic development as a whole.

3.7.4 Among the programs of concerted action in the economic and social fields PAHO/WHO should continue to promote further expansion of the health role in overall programs of community development. Similarly, the Organization will maintain its interest in other broad programs of concerted action, such as water resources, industrialization and productivity, utilization of all sources of energy, urbanization and housing, nutrition.

3.7.5 The breadth of the field of radiation in relation to health and the wide interest which it is raising will require close working contact with other organizations giving attention to these questions, including the United Nations Scientific Committee on the Effects of Atomic Radiation, the specialized agencies, the International Atomic Energy Agency, and the International Commissions on Radiological Protection and on Radiological Units and Measurements.

3.7.6 For its part, PAHO will continue to maintain close co-ordination with the FAO (Food and Agriculture Organization) in the field of nutrition and with the United Nations Childrens Fund in that same field and those of eradication and control of communicable diseases and, particularly, protection of mothers and children.

3.7.7 Finally, PAHO must continue to maintain the closest relationships, in particular, with the Organization of American States and its other specialized agencies, as well as with the Inter-American Development Bank and the U. S. International Cooperation Administration.

4. Health Education and Public Information

Mention has repeatedly been made in this document of the favorable attitude of the Governments of the Americas toward the planning of development programs, including health activities. It must be recognized, however, that unless planning can be successfully combined from the top, with active cooperation from below, the desired results will not be attained. It is therefore necessary to intensify as much as possible the activities of health education and public information.

5. Conclusion

The sectors of activity described in this program are all related to the ultimate purposes of PAHO, which are to combat disease, lengthen life, and promote the physical and mental health of the people of all countries of the Americas.

The Organization in the past has been carrying on programs of work similar to the one here formulated. Nevertheless, it has never before faced the challenge of setting up systems for health planning in the Latin American countries for the next ten years. If the governments and peoples of the Americas continue to give the Organization, as they have in the past, sufficient financial and moral support, the Organization can be expected to fulfill the objectives for which it was created, in the measure that the decade in which we live demands.