



REGIONAL OFFICE FOR THE WESTERN PACIFIC
BUREAU RÉGIONAL DU PACIFIQUE OCCIDENTAL

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SELECTION OF TOPIC FOR THE TECHNICAL
DISCUSSIONS DURING THE TWENTY-FOURTH SESSION
OF THE REGIONAL COMMITTEE

The Executive Board at its eighth session adopted a resolution inviting the regional committees to consider the advisability of holding technical discussions on matters of regional interest.¹ This suggestion was supported by the Committee² and since 1952 technical discussions have taken place at each session.

Attached is a list of the subjects which have been selected during past years. As far as the topic for the technical discussion in 1973 is concerned, the Committee may wish to consider the following suggestions of the Secretariat.

The Committee will recall that at its twenty-second session, it accepted the invitation of the Government of New Zealand (see resolution WPR/RC22.R27)³ to hold its twenty-fourth session in that country. The New Zealand Government in a letter dated 16 May 1972 drew attention to the fact that Topic 1, "The Role of the Hospital in the Community and the Financing of Hospital Based Medical Care", and the one finally chosen for this year's technical discussions (Environmental Pollution Problems and Approach to their Control in the Western Pacific Region) received almost equal support from the delegations to the Committee's twenty-second session. It stated further that "this topic is most appropriate to New Zealand, particularly as the Royal Commission to Inquire into and Report Upon Hospital and Related Services will be sitting at that time".

/1. THE ROLE ...

¹ Resolution EB8.R24, Handbook of Resolutions and Decisions, 11th ed., 269.

² Resolution WPR/RC3.R14, WPR Handbook of Resolutions and Decisions, 1972, 7th ed., section 5.5.1, page 23.

³ WPR Handbook of Resolutions and Decisions, 1972, 7th ed., section 5.3.2 (21), page 11.

1. THE ROLE OF THE HOSPITAL IN THE COMMUNITY AND
THE FINANCING OF HOSPITAL BASED MEDICAL CARE

In many developing countries, hospitals claim a major share of the national health budget while, in some cases, continuing their traditional role of rendering medical care exclusively.

Experience indicates that the hospital could exercise a more dynamic role in furthering community health. Certain requisites must be met: a regionalized hospital system must be developed; hospital management should be improved so that services can operate both effectively and economically; and the hospital should recognize and respond to the felt needs of the community. In order to provide better health care for the population, the hospital should also develop a close functional and operational relationship with the general community health services.

Considerable advantages will accrue to the hospital as an integral part of the community health system. Apart from the goodwill and co-operative spirit engendered, public interest and support of the hospital will be stimulated.

In the development of a hospital system the provision of capital for construction and financing of medical care institutions raises problems in all countries. Capital costs vary considerably according to site, design, type of construction and proposed function. It is highly desirable to explore the methods by which hospitals suited to the particular requirements and conditions of each country can be provided and maintained at a minimum cost.

Adequate financing of hospital medical care by health insurance, a social security system or other means should be ensured if the hospital system is to fulfill its role.

Two related trends in the cost of hospital care are visible in all countries. One is the increasing cost of in-patient care. The other is the rising proportion of the total government health budget allocated to the hospital system. There is a need to see how the demand for costly in-patient care can be reduced by strengthening preventive action or by making more use of less-expensive outpatient and domiciliary services and those available from sources other than the hospital.

A technical discussion on the role of the hospital in the community can highlight experience from areas where the hospital has a community health orientation. Modern trends in hospital management and financing may be reviewed. The discussion could then be directed to feasible ways of applying those experiences and encouraging those trends in the countries in the Western Pacific Region.

2. PREVENTION AND MANAGEMENT OF DRUG DEPENDENCE

The non-medical use of dependence-producing drugs, particularly by young persons, is causing rapidly increasing concern in most areas of the world, including the Western Pacific Region. In many countries, such use has resulted in public health and social problems of significant magnitude. Many persons working in the fields of health, education, law, law enforcement, welfare and politics as well as members of the public are seeking, and sometimes "demanding", solutions to this multi-faceted problem. Because of this widely-felt concern and the consequent desire to "do something", there is a tendency for a variety of organizations to initiate a number of different programmes in the same geographic area. This may lead to one or more of the following results: (1) the use of conflicting educational and other approaches, (2) the provision of some needed services while other urgently needed activities are wanting, (3) a lack of co-ordination, and (4) unnecessary competition for financial and other support. It would be helpful if key health personnel in a given geographic region could come to a common understanding about the problems in this field and the possible ways of meeting them.

Among the subtopics that might usefully be examined during a technical discussion on the subject are: (1) the means of controlling the availability of dependence-producing drugs that are feasible taking account of the differences in social acceptability of the non-medical use of such drugs, (2) the development of means of collecting and exchanging data on the extent and changing patterns of non-medical use of drugs and on the personal and socio-cultural factors associated with such use in different localities, (3) the principles to be observed in providing preventive, treatment and rehabilitation services, and (4) the means of co-ordinating services provided by various official and voluntary agencies.

The value of a technical discussion by health personnel on the subject of drug dependence would be greatly enhanced by the participation of appropriate consultants from the fields of education, welfare and enforcement.

3. USE AND TRAINING OF AUXILIARY PERSONNEL IN MEDICAL AND ALLIED PROFESSIONS

Auxiliary training for health personnel has not been the subject of technical discussions at any past sessions of the Regional Committee.

Given the importance of auxiliary personnel in the running of the health services, particularly in rural areas, the question of their training and proper utilization deserves careful consideration.

/Apart from ...

Apart from their function of helping to maintain health services while fully professional personnel are being trained, auxiliary workers will have an important place in the manning of health services in the future. Their contribution is particularly relevant in view of the tendency of full professional health workers to migrate to countries in a more advanced stage of economic development.

The problems of designing an appropriate curriculum for the training of each type of health worker, ensuring adequate promotional opportunities for auxiliary workers and providing acceptable living and working conditions for those in the rural areas could profitably be discussed. Other matters of concern are the difficulty of recruiting and training teachers of auxiliary workers, and ways of ensuring that both auxiliaries and full professional health personnel work together as a team.

It is not only in developing countries that auxiliary workers are being utilized. A number of countries not generally considered to have a shortage of full professional personnel have recently shown interest in using auxiliaries, particularly in nursing, dentistry and clinical medicine.

4. INTEGRATION OF TUBERCULOSIS CONTROL INTO THE GENERAL HEALTH SERVICES

Because tuberculosis is a chronic and widespread disease in many developing countries, its control calls for long-term planning and long-range implementation. Where tuberculosis is prevalent, resources are often scanty both in material and in manpower. While a decentralized service is essential, it is virtually impossible, even in privileged countries, to maintain a specialized staff for tuberculosis alone under a vertical system of administration. Tuberculosis control activities must therefore be integrated into the general health services. On the basis of these principles, technical discussions on ways and means to organize an integrated national tuberculosis programme under various local conditions could profitably be held during the Regional Committee session.

5. DEVELOPMENTS AND TRENDS IN CANCER CONTROL

Certain views that have long been held on cancer may bear re-examination in the light of recent advances in knowledge. One is that cancer is a health problem of concern only to the developed countries; another is that, being at once expensive and productive of only limited results, cancer control is beyond the reach of developing countries within their scarce resources.

/Even a cursory ...

Even a cursory review of the statistics will show, however, that cancer already ranks among the leading causes of death in many developing countries. Over the past years new insights have been gained on the causation of many types of cancer that are observed in the Region. Some examples are the infectious origin of some types of nasopharyngeal cancer and the cancerogenic nature of certain food ingredients and foodstuffs used in some countries of the Region. Additional evidence of the widely-recognized relationship between smoking and lung cancer has been produced. Some of the procedures that have been developed to help in early diagnosis are so simple in design and in execution that they may easily be introduced into the general health services. Information concerning promising methods in the management and therapy of cancer has been accumulated and could be put to wider use.

The choice of cancer control as a subject for technical discussions would provide an opportunity to disseminate up-to-date knowledge on the etiology, diagnosis, management and therapy of cancer and particularly of the types occurring in the Region. The information that could be given on recent developments and trends in cancer control would provide health departments with health education materials and serve as a basis for the formulation and administration of control programmes whether in the context of the general health services or as a special service.

TECHNICAL DISCUSSIONS TOPICS
1952-1972

<u>Year and session</u>	<u>Subject</u>
COMMUNICABLE DISEASES	
1957 (eighth session)	Leprosy control
1963 (fourteenth session)	The role of the local health services in leprosy control
1969 (twentieth session)	The planning and organization of a national epidemiological service
DENTAL HEALTH	
1961 (twelfth session)	Dental health
ENVIRONMENTAL HEALTH	
1962 (thirteenth session)	The role of the health services in the improvement of community water supplies
1966 (seventeenth session)	The role of the health department in environmental health services
1972 (twenty-third session)	Environmental pollution problems and approach to their control in the Western Pacific Region
EDUCATION AND TRAINING	
1952 (third session)	The education and training of medical and public health personnel

/HEALTH EDUCATION ...

Year and session

Subject

FAMILY HEALTH

- 1955 (sixth session) Domiciliary midwifery as an approach to the people in the development of rural health services
- 1956 (seventh session) Approach to and management of the pre-school child (from one to six)
- 1967 (eighteenth session) The integration of maternal and child health and family planning activities in the general health services

HEALTH EDUCATION

- 1965 (sixteenth session) The use of health education services in national health programmes

MALARIA

- 1958 (ninth session) Malaria control and eradication

PUBLIC HEALTH SERVICES

- 1953 (fourth session) Health planning
- 1954 (fifth session) Public health administration with particular reference to the organization of health departments
- 1960 (eleventh session) The organization and administration of rural health services
- 1968 (nineteenth session) Health planning as an administrative tool
- 1971 (twenty-second session) Health manpower in developing countries: Problems and needs (deferred from twenty-first session)

/TUBERCULOSIS ...

Year and session

Subject

TUBERCULOSIS

1959 (tenth session)

The control of tuberculosis

VITAL AND HEALTH STATISTICS

1964 (fifteenth session)

The use of statistics in public
health administration