



TWENTY-SEVENTH WORLD HEALTH ASSEMBLY

COMMITTEE B

COMMITTEE B

PROVISIONAL SUMMARY RECORD OF THE THIRD MEETING

Palais des Nations, Geneva
Tuesday, 14 May 1974, at 9.40 a.m.

CHAIRMAN: Dr M. A. CHOWDHRY (Pakistan)



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1. DRAFT FIRST REPORT OF COMMITTEE B (Document A27/B/2)

At the Chairman's request, Dr BADDOO (Ghana), Rapporteur, read the draft first report of the Committee (document A27/B/2).

Decision: The first report of Committee B was adopted.

2. EIGHTEENTH REPORT OF THE COMMITTEE ON INTERNATIONAL SURVEILLANCE OF COMMUNICABLE DISEASES: Item 3.14 of the Agenda (Documents A27/23 and A27/WP/1)

The CHAIRMAN proposed that, in order to expedite the Committee's examination of a complex subject, an informal working group be established to consider the eighteenth report of the Committee on International Surveillance of Communicable Diseases. All interested delegations could be members of the group, which should elect its own officers and report to the Committee.

Decision: It was so agreed.

Dr HENRY, representative of the Executive Board, recalled that the Executive Board, in paragraph 2 of its resolution on the quality of food of international flights (resolution EB53.R27), had noted that the Committee on International Surveillance of Communicable Diseases would make recommendations on that subject to the Twenty-seventh World Health Assembly. He trusted that the working group would cover that point in its report.

3. SCALE OF ASSESSMENT: Item 3.4 of the Agenda (continued):

Scale of assessment for 1975: Item 3.4.4 of the Agenda (Official Records, No. 216, Chapter II, paragraphs 14-22; Documents A27/20 and A27/20 Add.1) (continued)

Mr de GEER (Netherlands) said that his delegation still had some hesitation in accepting the Director-General's proposed scale of assessment for 1975. Despite the provision in subparagraph (3) of operative paragraph 2 of resolution WHA26.21 that the percentage contributions of Member States should in no case be increased as a consequence of the decision to reduce the maximum contribution of the largest contributor to 25%, he feared that in practice the implementation of that decision could hardly fail to result in increases in the contributions of other Members. The proposal that the minimal assessment in the WHO scale should be reduced to bring it into line with that of the United Nations scale made such increases even more likely. Furthermore, the application of the per capita principle would probably be reflected in increases in the percentage contributions of other Members in order to bring the contribution of the largest contributor down to the 25% maximum as quickly as possible. In the opinion of his delegation, application of the Director-General's proposals along those lines would be contrary to the terms of the resolution.

The question was one of interpretation. He would appreciate clarification from the Director-General regarding the possible effects of the application of the new scale of assessment if the Netherlands' interpretation of the proposals were followed.

Mr FURTH, Assistant Director-General, agreed that there might be two interpretations of how resolution WHA26.21 should be applied; he therefore wished to explain the Director-General's interpretation.

The reduction in the assessment of the largest contributor from 29.18% in the 1974 WHO scale to 25.67% in the proposed 1975 WHO scale had been obtained solely by use of the percentage points that had become available as a result of the accession of new States to membership of WHO and as a result of the normal triennial increases in the percentage contributions of certain Members of the United Nations. Subparagraph (3) of paragraph 2 had been respected since, notwithstanding the reduction in the contribution of the largest contributor, no other Member's contribution had been increased. In the Director-General's view, once the contribution of the largest contributor had thus been determined, it became a fixed parameter; it was a maximum that could be neither increased nor decreased by any adjustments that might be made to other Members' contributions in the scale of assessments.

As he understood the position of the Netherlands delegate, it was that he agreed on the one hand with the application of the resolution regarding the reduction of the contribution of the largest contributor on the basis just outlined, but considered on the other hand that, the assessment of the largest contributor having thus been reduced to 25.67% - and therefore brought much closer to the goal of 25% - the next step should be to increase the assessment of the same largest contributor so that the latter would bear its proportionate share of the increase in assessments necessitated by the reduction of the minimum assessments, the reduction of the assessment of Associate Members, the adjustment of the assessment of Pakistan, and other adjustments.

The Director-General's view differed from that for a number of reasons.

First, both the maximum and the minimum assessments were considered to be ceilings which should not be increased, whatever adjustments were made in the contributions of other Members. Had it already been the case that the largest contributor was assessed at the rate of 25%, and had the minimum assessments then been reduced and other adjustments made in the assessments of certain Members, surely no one would have contended that the largest contributor's assessment should be increased above the 25% maximum. If the largest assessment could not be increased above 25% because that figure was considered to be a ceiling, by what logic could it be increased when it was already above 25%?

Secondly, the resolution stated that the objective of 25% should be reached as soon as practicable and laid down a specific method for reaching that target. It seemed illogical to take a step away from that objective by increasing the assessment of the largest contributor above 25%. In fact, even if the resolution in question had never been adopted and for any reason the Assembly had decided to reduce the assessment of the minimum contributors, that of the largest contributor would not have been increased. It had always been considered that as long as the largest contributor was assessed at a rate higher than the theoretical maximum, its assessment should not be increased. Both maximum and minimum assessments had always been considered to be fixed parameters.

Finally, the resolution stated that the WHO scale should follow as closely as possible the United Nations scale. In the United Nations scale the largest contributor was already assessed at 25%. In the scale as proposed by the Director-General the largest contributor would be assessed at 25.67% - higher than in the United Nations. No other contributor would be assessed at a rate higher than at its United Nations rate, and 23 Members would still be assessed at rates lower than in the United Nations. The application of the proposal of the Netherlands delegate would produce a scale which would be more different from the United Nations scale than the scale proposed by the Director-General.

Dr EHRLICH (United States of America) reminded the Committee that the Executive Board had carefully considered the Director-General's proposals. The Director-General's assessment scale was in full conformity with the resolution adopted by the Twenty-sixth World Health Assembly, and he proposed that the Committee should approve it.

The CHAIRMAN then drew the Committee's attention to the draft resolution contained in document A27/20 as amended by document A27/20 Add.1.

Decision: The draft resolution was approved.

4. STUDY OF THE POSSIBILITY OF FINANCING WHO ACTIVITIES IN CURRENCIES OTHER THAN US DOLLARS AND SWISS FRANCS: Item 3.6 of the Agenda (Resolution WHA26.40; Official Records No. 215, Resolution EB53.R42 and Annex 6)

Dr HENRY, representative of the Executive Board, said that after considering the report of the Director-General contained in Annex 6 of Official Records No. 215, the Board had adopted resolution EB53.R42, in which it recommended a draft resolution for adoption by the World Health Assembly.

Mr FURTH, Assistant Director-General, said that since the fifty-third session of the Executive Board, in January 1974, a Working Group of Thirteen established by the United Nations General Assembly had held several meetings in New York. WHO and other organizations of the United Nations system had supplied the group with additional information on the effects of currency instability and inflation, updating the material contained in the Administrative Committee on Coordination (ACC) study referred to in Part II of Annex 6 of Official Records No. 215. The United Nations Working Group had not yet completed its task, and no information was available regarding possible alternative solutions which it might propose to the General Assembly.

The suggestion had been made to the Advisory Committee on Administrative and Budgetary Questions that the ACC should explore the possibility of assessing contributions to international organizations in a mixture of currencies. The ACC had considered it advisable to await the publication of at least the initial findings of the United Nations Working Group before proceeding further with the study of that possibility.

Mr CHOWDHURY (Bangladesh) said that the problem called for careful study. He approved the recommendation of the Executive Board that further action be deferred pending a decision by the United Nations and supported the resolution recommended by the Executive Board in its resolution EB53.R42.

Mr TOPA (Poland) said that the possibility of paying contributions in other currencies than the United States dollar and the Swiss franc had been debated inconclusively for a long time past. He considered that the Director-General should be authorized to decide how much of Members' contributions should be paid in their national currency, as was current practice in UNESCO and UNDP. The system should be tried out by the Organization on an experimental basis and the results reviewed after a period of three or five years.

Dr LEBENTRAU (German Democratic Republic) said that he hoped that the current Health Assembly would reach a decision on whether national currencies could be used by Members for the payment of their contributions. One way would be to allow the financing of WHO activities in Member countries in national currencies. The Organization should seek its own ways of solving the problem regardless of the findings of the United Nations Working Group, because there was a pressing need for an early solution. During the general discussion on the Director-General's Annual Report, a number of delegates from developing countries had stated that the currency crisis was affecting WHO programmes in their countries. In conclusion, he wished to reiterate the statement made by his delegation in the plenary meeting that there was no reason why the work of the Organization should be financed exclusively in United States dollars or Swiss francs.

Dr GALAHOV (Union of Soviet Socialist Republics) said that the United Nations General Assembly had approved the solution of the currency problem by each of the various specialized agencies and other bodies in the manner best calculated to suit their particular needs. General Assembly resolution 3062 (XXVIII) paragraph (c) read:

"Notwithstanding the terms of regulation 5.5 of the Financial Regulations of the United Nations, the Secretary-General shall be empowered to accept, at his discretion and after consultation with the Chairman of the Committee on Contributions, a portion of the contributions of Member States for the financial years 1974, 1975 and 1976 in currencies other than United States dollars;"

Without making any formal proposal, he suggested that the Director-General should be authorized to accept, on the advice of his financial staff, part of Member countries' contributions for the period 1974-76 in currencies other than the United States dollar

or the Swiss franc. After the United Nations Working Group had completed its review of the question, the results of its work could be further considered and utilized as appropriate by the Organization.

Decision: The draft resolution proposed by the Executive Board in resolution EB53.R43 was approved.

5. HEADQUARTERS ACCOMMODATION: FUTURE REQUIREMENTS: Item 3.7 of the Agenda (Official Records No. 209, Resolution WHA26.46 and Annex 11; Resolution EB52.R18; Official Records No. 215, Resolution EB53.R43 and Annex 7)

Dr HENRY, representative of the Executive Board, said that in accordance with resolution WHA26.46 the Director-General had supplied the Board at its fifty-third session with a detailed report on developments since the Twenty-sixth World Health Assembly in which he had analysed the issues facing the Organization with regard to the estimated future requirements for headquarters accommodation. The Director-General had had no reason to alter the staffing estimates for headquarters submitted to the Twenty-fifth World Health Assembly. The Board had also been informed that there had been no improvement in the financial possibilities and that the Swiss authorities, owing to Federal anti-inflation limitations on certain types of building, were unable to provide a low-interest loan for the permanent extension of the WHO building. The Director-General had outlined the possibility of obtaining additional office space by rental and by the erection of temporary buildings. It was thought that it would be possible to rent accommodation in the new ILO building sufficient for some five years. Some members of the Board had expressed the hope that the growth of headquarters staff would be less rapid than was foreseen. The Board had recommended, in resolution EB53.R43 that any decision on the continuation of the study and the erection of the permanent extension to the headquarters building be deferred for another year.

Mr CHOWDHURY (Bangladesh) supported the Board's recommendation.

At the request of the Chairman, Dr BADDOO (Ghana), Rapporteur, read out the following draft resolution:

The Twenty-seventh World Health Assembly,
Having considered resolution EB53.R43 and the Director-General's report on future requirements for headquarters accommodation,

1. NOTES the Director-General's report; and
2. DECIDES that any decision on the continuation of the study and the erection of the permanent extension to the headquarters building be deferred for another year.

Decision: The draft resolution was approved.

6. REAL ESTATE FUND: Item 3.8 of the Agenda (Resolution EB53.R41; Document A27/21)

Dr HENRY, representative of the Executive Board, said that the Director-General had reported to the fifty-third session of the Board on the status of projects being financed from the Real Estate Fund and on the prospective needs for financing from the Fund during the ensuing 12-month period, 1 June 1974 to 31 May 1975. The report, although provisional, had indicated that current projects were proceeding within the estimates and that the immediate requirements for the forthcoming period could be covered by the interest earnings of the Fund. The Board had requested the Director-General to report further to the Twenty-seventh World Health Assembly.

Mr FURTH, Assistant Director-General, introducing the Director-General's Report to the Health Assembly, confirmed that all current projects were proceeding within the estimates.

He called attention to the additional amounts of \$ 15 000, \$ 16 500 and \$ 32 000 obligated for the purposes described in section 5 of the Report. Those appropriations had been reported to the Board at its fifty-third session in accordance with resolution WHA23.14, operative paragraph 3(ii).

The Committee would note, in paragraph 6 of document A27/21, a proposed expenditure of \$ 80 000 for fire detection and control equipment at the Regional Office for the Western Pacific and, in paragraph 7, the suggestion that a sum, estimated at \$ 35 000, be set aside for the repair and reconditioning of additional accommodation for the Regional Office for Europe if the property that the Government of Denmark was considering buying for rental to the Organization became available.

If those expenditures were approved, the immediate requirements of the Fund could be covered from accrued and anticipated interest earnings of the Real Estate Fund.

He informed the Committee of the situation at the Regional Office for Africa, as described in paragraph 8 of the Director-General's Report. Although it was not proposed to undertake the extension of the Regional Office premises during the period, 1 June 1974 to 31 May 1975, it would be essential to do so during the ensuing period.

As recommended in resolution EB53.R41, the Health Assembly should consider whether the balance of casual income in the Assembly Suspense Account (\$ 549 504) should be transferred to the Real Estate Fund.

Mr KOCH (Denmark) explained that the owner of the property next to the Regional Office for Europe had offered to sell it to the Danish Government, which, however, had not yet taken a final decision on its purchase. That decision called for a careful study of many factors including the needs of the Regional Office, the price and other conditions of sale, and local zoning laws and building codes. The study was in progress and might be completed in the near future; meanwhile his Government could make no firm commitment.

However, speaking as a delegate to the Health Assembly, he could only support the proposed appropriation, which would be only prudent in view of a possibly favourable outcome of the current study.

Dr KILGOUR (United Kingdom of Great Britain and Northern Ireland) said that the Organization's real estate operations being dependent on the building up of casual surpluses in the Real Estate Fund had led to a slightly unsatisfactory situation. Under resolution WHA23.14 available balances of casual income were being transferred to the Real Estate Fund as an automatic process. He was concerned that such transfers should be closely related to approved purposes. In view of the present situation he wondered whether balances of available casual income should not remain in the Assembly Suspense Account. Without wishing to make a formal proposal, he felt that the automatic transfer of casual income to the Real Estate Fund should be viewed critically. He would support any suggestion that the Director-General be requested to study the financing of the Organization's real estate operations and report to the Board at its fifty-fifth session.

In reply to a question by Dr GALAHOV (Union of Soviet Socialist Republics), Mr FURTH, Assistant Director-General, explained that the amount of the balance in the Real Estate Fund had not been mentioned in the Director-General's Report because it varied with time. On 30 April 1974 the balance was estimated at \$ 1 191 867, of which \$ 879 835 had been set aside by the Twenty-fifth World Health Assembly to finance preliminary studies for the permanent extension of the WHO building. The net balance was therefore \$ 312 032, which would suffice to cover the Director-General's proposals.

Dr GALAHOV (Union of Soviet Socialist Republics) expressed his general support of the view voiced by the United Kingdom delegate. The Soviet delegation did not consider that the proposed transfer of available casual income to the Real Estate Fund was necessary. It felt that the balance of available casual income could be more usefully devoted to financing activities under the regular budget.

Dr EHRLICH (United States of America) noted that the Director-General's proposals could be financed from the Real Estate Fund without the transfer to the Fund of the 1973 balance of available casual income. The automatic transfer of casual income balances to the Fund deprived the World Health Assembly of funds it could usefully apply to the

Organization's programme activities and might have the subconscious effect of reducing the intensity of the critical review to which all real estate operations should be subject before approval. He therefore shared the views of the United Kingdom and Soviet delegates that the transfer should not be made.

Dr SCHUMM (Federal Republic of Germany) agreed with previous speakers. Balances of available casual income should not automatically be appropriated to the Real Estate Fund, especially at a time when the whole question of the permanent extension of the WHO building was still open. He therefore proposed that the \$ 549 504 remain in the Assembly Suspense Account, where it might be very useful in times of financial instability and inflation.

Mr WATANABE (Japan), Mr KHATIB (Libyan Arab Republic), Dr CAYLA (France) and Mr KAMER (Switzerland) supported that proposal.

Dr BADD00 (Ghana), Rapporteur, read out the following draft resolution relating to additional accommodation for the Regional Office for Europe:

The Twenty-seventh World Health Assembly,
Having considered the report by the Director-General on the estimated requirements of the Fund for the period 1 June 1974 - 31 May 1975;
Noting that additional premises may become available to the Regional Office for Europe for rent on a long-term basis, in which case these premises would have to be repaired and reconditioned at an estimated cost of \$ 35 000,

AUTHORIZES the Director-General to have any necessary repairs carried out, and to finance them from the Real Estate Fund.

Decision: The draft resolution was approved.

Dr BADD00 (Ghana), Rapporteur, then read out the following draft resolution concerning equipment in the building of the Regional Office for the Western Pacific:

The Twenty-seventh World Health Assembly,
Noting the report by the Director-General on the estimated requirements of the Fund for the period 1 June 1974 - 31 May 1975,

AUTHORIZES the Director-General to finance from the Real Estate Fund the installation of fire detection and control equipment in the building of the Regional Office for the Western Pacific, at an estimated cost of \$ 80 000.

Decision: The draft resolution was approved.

Dr SACKS, Secretary, said that, since there was a consensus in favour of the proposal by the delegate of the Federal Republic of Germany, there was no need to submit a draft resolution to the Committee on that point: the balance of available casual income would then remain where it was.

Decision: It was so agreed.

7. AMENDMENTS TO THE RULES OF PROCEDURE OF THE WORLD HEALTH ASSEMBLY: Item 3.10 of the Agenda (Official Records No. 215, Resolution EB53.R28; Document A27/B/Conf.Doc. No. 2)

Dr HENRY, representative of the Executive Board, introduced the item at the Chairman's invitation and explained why the Executive Board, in its resolution EB53.R28, was recommending a resolution for adoption by the Health Assembly amending a number of the Assembly's Rules of Procedure. The proposed amendments to Rules 23 and 24 confirmed the existing practice of the Health Assembly whereby meetings of the Committee on Credentials and the Committee on Nominations were held in private, although any delegate or representative of a Member, Associate Member or the United Nations had the right to

attend the meetings of these Committees. The amendments to Rule 51 were aimed at bringing it into line with the practice of the General Assembly of the United Nations. The amendments to Rules 84, 87 and 89 incorporated the arrangements in the World Health Assembly for the use of the Chinese, Russian and Spanish languages. The Executive Board had adopted corresponding amendments to its own Rules of Procedure.

Mr KHATIB (Libyan Arab Republic) referred to the increasing use of Arabic both at the United Nations General Assembly and at the World Health Assembly. On behalf of his own delegation and the co-sponsoring delegations of Algeria, Bahrain, Democratic Yemen, Egypt, Iraq, Jordan, Kuwait, Mauritania, Morocco, Oman, Qatar, United Arab Emirates and Yemen, he proposed the following subamendments to those proposed by the Executive Board:

Rule 85

"Speeches made in the languages referred to in Rule 84 shall be interpreted into the working languages and into Arabic and Chinese".

Rule 86

"Any delegate or any representative of an Associate Member or any representative of the Board may speak in a language other than the official languages. In this case, he shall himself provide for interpretation into one of the working languages. Interpretation into the other working languages and into Arabic and Chinese by interpreters of the Secretariat may be based on the interpretation given in the first working language".

Mr YEH CHENG-PA (China) said that the General Assembly of the United Nations had already passed a resolution adopting Chinese as a working language. Chinese should also enjoy equal status with other working languages in WHO. Because of the difficulties faced by WHO, however, his delegation would accept, as a temporary measure, the present proposed amendment to the Rules of Procedure of the Health Assembly. He hoped steps would be taken as soon as possible to adopt Chinese as a working language of WHO. His delegation reserved the right to return to this question in the future.

Mr FURTH, Assistant Director-General, said that, as far as Arabic was concerned, the present provision in the budget for interpretation from Arabic amounted to \$ 19 200 in 1975. Interpretation from other languages into Arabic would cost only a further \$ 3 200. With regard to Chinese, the Secretariat was prepared to study the question of adopting Chinese as a working language of the Health Assembly and to report on the financial and technical implications of the proposal to the Executive Board and the Health Assembly.

Mr GUTTERIDGE, Director, Legal Division, suggested that, if the essence of the Libyan proposals was found generally acceptable, the wording of the subamendment could be simplified, as in the revised Rules of Procedure of the Economic and Social Council. Rule 85 could then read "Speeches made in an official language shall be interpreted into the other official languages", and Rule 86 could be amended accordingly.

Dr NABILSI (Jordan) said that his delegation would like to see Rules 85 and 86 amended so that provision was made for interpretation both from and into Arabic.

Dr AL-RIFAI (Kuwait) stressed the fact that Arabic was the language of 20 Member States of WHO, and said that his delegation supported the proposed subamendment.

Dr KILGOUR (United Kingdom of Great Britain and Northern Ireland) explained that, while not wishing to intervene on the merits of the subamendments, he would like some guidance as to the procedural aspects. The proposed amendments to the Rules of Procedure of the Health Assembly submitted by the Executive Board had been fully discussed by the Board in conjunction with the amendments to the Rules of Procedure of the Board itself. The work of the Executive Board would be circumvented if the Health Assembly adopted the subamendments. The right way to approach the question might be to ask the Executive Board to have a further look at the more extended use of Arabic.

Dr TARCICI (Yemen) said that he was fully aware of the possible financial or administrative objections to the proposed subamendment. His delegation was not calling for its immediate implementation, but was prepared to leave it to the Director-General to decide when it would be financially and technically possible. He thought that there were no difficulties as to the approval of the basic principle that Arabic should be given the same status as Chinese.

Mr LAWRENCE (United States of America) expressed his delegation's support for the amendment proposed by the Board. With regard to the subamendments, he agreed with the United Kingdom delegate that it would be wise to adhere to established procedures and refer the matter to the Executive Board.

Professor SULIANTI (Indonesia) commented that there had been a rather lengthy discussion on this question in the Executive Board, and especially on the difference between working and official languages. She thought that an even greater simplification could be achieved by deleting Rule 85 altogether. The official languages were already listed in Rule 84, and included Chinese and Arabic. In the last sentence of Rule 86, the words "into the other working languages" could then be replaced by "into the official languages", and no reference to Chinese or Arabic would be necessary. In the same sentence, it would also be necessary to replace "given in the first working language" by "given in one of the working languages".

Dr TARCICI (Yemen) thought that the suggestion made by the delegates of the United Kingdom and United States of America would tend to create difficulties in what was really a very simple subject and to prolong the discussion.

Dr SON KYON HO (Democratic People's Republic of Korea) expressed the support of his delegation for the views of the delegate of China.

Dr ANOUTI (Lebanon) supported the proposed subamendments. The objective of providing interpretation from and into Arabic was to achieve a better understanding of the problems faced by WHO.

Mr CHOWDHURY (Bangladesh) considered the subamendments to be very reasonable; his delegation would support them.

The CHAIRMAN suggested that the Rapporteur should draft a resolution based on the discussion that had taken place, the draft resolution of the Executive Board, and the proposed subamendments.

Dr TARCICI (Yemen) thought that there was a fairly clear consensus in favour of the subamendments, though some delegates had expressed certain reservations. Could not the Committee adopt a resolution straight away?

The CHAIRMAN agreed that there appeared to be a consensus, but thought it best that a draft resolution should be prepared in which the wording was simplified.

Dr DE CONINCK (Belgium) said that he understood the reservations of the delegates of the United Kingdom and the United States of America. Out of deference to the Executive Board, the question should be left to the Board. This in no way meant that he was contesting the claims of the Arabic-speaking countries. He wondered whether the suggestion made by Mr Gutteridge would be taken into consideration.

Mr GUTTERIDGE, Director, Legal Division, explained that his proposal did not modify the intent of the subamendments, but merely their wording. He would suggest the use of the same wording as in the amended Rule of Procedure of the Economic and Social Council. If the subamendment was accepted, the revised wording should be adopted.

Dr TARCICI (Yemen) said that he would be glad to assist in reaching an appropriate legal formula whereby provision could be made for interpretation both from and into Arabic. Although some delegates had expressed reservations, the principle had been accepted.

Mr CHOWDHURY (Bangladesh) thought that the suggestion made by Mr Gutteridge would serve the purpose of the subamendments.

The CHAIRMAN asked those who wished to do so to get in touch with the Rapporteur and the Director of the Legal Division with a view to preparing a revised draft resolution.

The meeting rose at 12.30 p.m.