

COMMITTEE ON PROGRAMME AND BUDGET

PROVISIONAL MINUTES OF THE TENTH MEETING

Palais des Nations, Geneva  
Saturday, 23 May 1959, at 9.30 a.m.

CHAIRMAN: Dr H. B. TURBOTT (New Zealand)

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1. REPORT OF THE SUB-COMMITTEE ON INTERNATIONAL QUARANTINE: Item 6.14 of the Agenda (Document A/12/P&B/21)

At the request of the CHAIRMAN, Dr CLARK (Union of South Africa), Chairman of the Sub-Committee on International Quarantine, read the Sub-Committee's report (A12/P&B/21).

Decision: It was agreed to recommend to the Health Assembly the adoption of the four draft resolutions contained in the Sub-Committee's report.

2. WHO PARTICIPATION IN THE EXPANDED PROGRAMME OF TECHNICAL ASSISTANCE - PROGRAMME ASPECTS: Item 6.9 of the Agenda (Document A12/P&B/13)

Dr KAUL, Assistant Director-General, Secretary, summarized the report submitted by the Director-General on the programme aspects of WHO's participation in the Expanded Programme on Technical Assistance (document A12/P&B/13).

There being no comment, the CHAIRMAN said that a draft resolution on the subject would be presented to the Committee later.

3. INTERNATIONAL AGREEMENT OF BRUSSELS, 1924, RESPECTING FACILITIES TO BE GIVEN TO MERCHANT SEAMEN FOR THE TREATMENT OF VENEREAL DISEASES: Item 6.13 of the Agenda (Document A12/P&B/11)

Dr KAUL, Assistant Director-General, Secretary, summarized the progress report presented by the Director-General as document A12/P&B/11, observing that it had been submitted in pursuance of resolution WHA11.49 of the Eleventh World Health Assembly.

Dr EVANG (Norway) said that he believed there was a total of between 750 000 and 1 000 000 merchant seamen in the world. Merchant seamen, because they were constantly on the move, were more exposed to various health hazards than other people. Merchant seamen, however, presented certain health hazards to hundreds of millions of people.

He was concerned about the rate of progress of work on the problem to which the progress report related. It was stated in the last paragraph of the progress report that a final report by WHO on the problem would probably not be ready before 1962. It was 14 years since WHO had started to take an active interest in the problem. He had been present at both the sessions of the Joint ILO/WHO Committee on the Hygiene of Seafarers mentioned in paragraph 7 of the progress report and at the 1959 European Conference on Health and Welfare of Seafarers mentioned in paragraph 5. At the two sessions of the Joint Committee, held in 1949 and 1954, very little had been accomplished, mainly, he thought, because WHO had appointed four medical experts to serve on the Joint Committee and ILO had appointed two representatives of shipowners and two representatives of trade unions to do so, and the people on the two sides of the table had spoken in completely different terms. At the second session of the Joint Committee a draft agenda had been drawn up for a third session and the Director-General had been asked to prepare certain reports. There had not been any third session of the Joint Committee and he believed he was correct in stating that the Director-General had not issued any reports of the kind requested at the second session.

What should be done? He did not think there would be any use in convening a third session of the Joint Committee to discuss the report of the European Conference on Health and Welfare of Seafarers. On the other hand the Joint ILO/WHO Committee on Occupational Health, which had done much useful work and was concerned with a subject closely related to that under discussion, might well consider that report. He thought the statement in section 4 of the progress report, to the effect that the information it was expected to obtain by means of the questionnaire mentioned in that and the previous section would make it possible to define with some degree of accuracy the health problems of seafarers and the resources available for dealing with those problems, was very optimistic. The Director-General should reconsider the position and arrange for field studies of about six months' duration be made in various ports.

Professor CANAPERIA (Italy) said it was most important that there should be better health services for seamen of all nationalities. He shared the concern which had just been expressed by the Norwegian delegate.

Dr SARKISOV (Union of Soviet Socialist Republics) said it was necessary to evaluate the work done by WHO on the problem of health services for merchant seamen and to pass a resolution on it. Both international and national action were required to solve the problem. An extensive plan such as that laid down at the European Conference on Health and Welfare of Seafarers should be put into operation. There was a great need for health education of merchant seamen. The Norwegian delegate was right in saying that there had been too much delay in dealing with the problem. He hoped that a report covering at least a large part of the problem would be presented for consideration at the next Health Assembly.

Dr KAUL, Assistant Director-General, Secretary, said that the Brussels Agreement was concerned with the treatment of merchant seamen for venereal diseases only. It was true that it had been decided a long time ago that a study should be made of whether that Agreement should be incorporated in a new instrument covering much more than the subject of the Brussels Agreement; but it was not until 1958 that the Director-General had been requested by the Health Assembly to study all the health problems of merchant seamen. Those problems were very complex and it had been, and still was, difficult for the Director-General to arrange for them to be studied, since there were only scant funds available for that and the available data were not sufficient. As explained in the progress report, the Director-General had taken steps towards obtaining the necessary data. In order to obtain the data he would probably have to get in touch with several national health administrations and port health authorities. He was considering getting in touch with them through the regional officers and a consultant specially appointed for the purpose. He would certainly bear in mind the comments just made by the Norwegian delegate.

There was no intention of referring the report on the European Conference on Health and Welfare of Seafarers to the Joint ILO/WHO Committee on the Hygiene of Seafarers. It was planned to incorporate much of the substance in the report in a future report on the whole problem. When that had been done the Joint Committee might be consulted.

Dr EVANG (Norway) said that, as could be seen from the Second Report of the Joint ILO/WHO Committee on the Hygiene of Seafarers (Technical Report Series No. 92, page 11), that committee had at its second session asked WHO to prepare

a report on medical services for foreign seafarers and particularly on the medical and economic aspects of hospitalization and on medical clinics in ports, and also a report on medical records and reporting. Had WHO prepared such reports? The Assistant Director-General's last statement seemed not to be entirely in accordance with the fact that he had just mentioned. The European Conference on Health and Welfare of Seafarers had not been a "preliminary fact-finding meeting" as was stated in paragraph 5 of the progress report under consideration, but a meeting at which opinions regarding existing services for merchant seamen had been exchanged

Dr SINGH (India) said he thought three to five years would be required to produce an adequate report on the subject under discussion for consideration by the Health Assembly. It would be unreasonable to expect more than a progress report on the subject before the Fifteenth World Health Assembly.

The CHAIRMAN submitted for the Committee's consideration the following draft resolution:

"The Twelfth World Health Assembly

1. NOTES the progress report by the Director-General on the study of the nature and extent of the health problems of seafarers and of the health services available to them; and
2. REQUESTS the Director-General to continue this study and, when it is finalized, to report to the Executive Board and the World Health Assembly on its results."

Decision: The draft resolution was approved for transmission to the Health Assembly.

4. ACTION IN RESPECT OF INTERNATIONAL CONVENTIONS ON NARCOTIC DRUGS:  
Item 6.15 of the Agenda

Dr GRASCHENKOV, Assistant Director-General, Secretary, said that the Economic and Social Council of the United Nations, at its twenty-sixth session, had requested WHO to send to the Secretary General its comments on the third draft of the Single Convention which was intended to replace the nine international treaty instruments relating to narcotic drugs at present in force and which it was expected would be discussed at a plenipotentiary conference in 1960. The draft was the result of discussions at ten sessions of the United Nations Commission on Narcotic Drugs, at all of which a representative of WHO had been present. Part of the comments of WHO would relate to technical matters such as the arrangement of lists of drugs, specifications regarding drugs and the treatment of drug addicts. In Official Records No. 91, containing resolutions of the twenty-third session of the Executive Board, Annex 19 reproduced, in an appendix, comments relating to changes in the functions of WHO under the Single Convention on Narcotic Drugs (third draft). When those comments were being drafted the views expressed in section 10 of the ninth report of the Expert Committee on Addiction-Producing Drugs had been taken into account. The Committee was not being requested to consider what WHO's technical comments should be, but it was being suggested that it should express an opinion on the comments in the annex to which he had just referred, because the Seventh World Health Assembly had decided that decisions regarding changes in the functions performed by WHO by virtue of international treaties on narcotics control should be taken by the Health Assembly (resolution WHA7.6).

The CHAIRMAN submitted the following draft resolution for the Committee's consideration:

"The World Health Assembly,

Considering that the Economic and Social Council, in resolution 689 J (XXVI), invited the World Health Organization to transmit to the Secretary-General of the United Nations its comments on the third draft of the Single Convention on Narcotic Drugs;

Considering the decision taken by the Seventh World Health Assembly in its resolution WHA7.6; and

Having noted resolution EB23.R22 of the Executive Board concerning the comments suggested by the Director-General concerning those articles of the draft Single Convention affecting the functions of the World Health Organization in respect of the international control of narcotic drugs,

REQUESTS the Director-General to transmit these comments to the Secretary-General of the United Nations."

Decision: The draft resolution was approved for transmission to the Health Assembly.

5. METHOD OF FINANCING CONTROL PROJECTS OF AN EXPERIMENTAL SCIENTIFIC RESEARCH NATURE: Item 6.16 of the Agenda (Document A12/P&B/8)

Dr KAUL, Assistant Director-General, Secretary, summarized the report by the Director-General entitled "Method of Financing Tuberculosis Control Projects of an Experimental Scientific Research Nature" (document A12/P&B/8).

Dr FARAH (Tunisia) said his Government had proposed to WHO that international organizations bear all the costs of projects of an experimental scientific nature in the field of tuberculosis control. It had made that recommendation shortly

before embarking on a nation-wide campaign against tuberculosis, which it had wished to see fully financed notwithstanding certain insufficiencies at the preparatory stage, for example, the lack of precise epidemiological information. That campaign, which had been started some time previously, was supported by work on a project of antituberculosis chemotherapy and chemoprophylaxis for his country consisting of experimental research work for which WHO and UNICEF were giving assistance and by WHO pilot projects concerned with health services and epidemiological research. Because of that and also the fact that WHO was doing more and more in regard to basic medical research as well as to such research in the field, his Government was withdrawing its proposal. It would gladly help carry out any research programme in accordance with its policy.

Dr METCALFE (Australia) said that since so many tuberculosis surveys had been made, much was known about the problem of how to control tuberculosis; it was not necessary for WHO to start tuberculosis projects of the kind under discussion; it would be sufficient if WHO awarded fellowships.

Dr EVANG (Norway) said he thought WHO should give assistance with pilot projects of the kind under discussion; for there had been a revolution where tuberculosis control was concerned. There were two categories of diseases where work against disease in under-developed countries was concerned; the first category was that of diseases which could be fought by means of the

authorities only taking measures, such as malaria; the second category was that of diseases which it was impossible to combat successfully unless the inhabitants changed their way of life, such as filariasis and leprosy. Tuberculosis was in the process of moving from the latter to the former category.

Dr SINGH (India) said that he also did not agree with what the Australian delegate had said. WHO should help to carry out pilot projects of the kind under discussion in countries where there had as yet been no work on such projects. If it did not do so, all the necessary measures against tuberculosis would never be taken.

Dr NUGENT (Ghana) said he agreed with what the Norwegian delegate had said.

Dr CAMERON (Canada) said that he thought some pilot projects of the kind under discussion were needed. The question facing the Committee was that of whether WHO should bear the whole cost of such projects. WHO should bear the whole cost of some pilot projects, but not of those under discussion.

The CHAIRMAN submitted for the Committee's consideration the following draft resolution:

"The Twelfth World Health Assembly,

Having considered the resolution of the Executive Board and the report of the Director-General on the method of financing pilot projects of an experimental scientific research nature,

Considering that resolution WHA2.19 gives the guiding principles which should be applied in the organization of research under the auspices of the Organization and which states among other things - 'research should be supported in existing institutions and should form part of the duties of field teams supported by the World Health Organization',

Considering that new knowledge in medical and public health fields often needs to be tried, tested and suitably applied to local conditions in pilot projects;

Considering that pilot projects are of considerable importance and of great potential benefit both from the national and international points of view,

BELIEVES that no change is called for in the method of financing pilot projects of an experimental scientific research nature."

Decision: The draft resolution was approved for transmission to the Health Assembly.

6. DEVELOPMENTS IN ACTIVITIES ASSISTED JOINTLY WITH UNICEF: Item 6.18 of the Agenda (Resolution EB23.R12; Document A12/P&B/14)

Dr KAUL summarized the main points of the Director-General's report (A12/P&B/14).

Sir Herbert BROADLEY (United Nations Children's Fund) said that he had little to add to the points made in the message from the Executive Director of UNICEF which he had already conveyed to the Health Assembly itself.

Any suggestions made during the discussion for new activities or the expansion of existing ones would, of course, be transmitted to UNICEF's headquarters and its regional offices.

It might be thought that UNICEF's help to children was very comprehensive, and though its different maternal and child health schemes covered some 55 million mothers and children, there were some 550 million children alone in those countries needing help. At the moment, UNICEF was participating in 368 projects covering 105 countries and territories. Out of those projects, WHO was directly or indirectly concerned in 266.

Careful consideration had been given to malaria eradication, and, though the final decision would probably not be taken until the Board's session in September, he did not think there was any likelihood of UNICEF's contribution being lower than before. The review of its activities for the years 1959-1964, which had taken place in March, had been based on the assumption that at the end of four years its contribution towards the malaria eradication programme would not have to be so great. Now that there was reason to think that the programme might take longer than first anticipated, UNICEF's future programme might have to be reconsidered, but he assured the Committee of the Fund's continued support for malaria eradication programmes.

Some new activities on a small scale in the domain of primary education and social services, particularly for children deprived of home care, were being contemplated but the Executive Board had laid down the general principle that first claim on resources must be the completion of country projects already under way.

The CHAIRMAN thanked the representative of UNICEF for his assurances and the Fund's continued help.

Mr SEBSIBE (Ethiopia), paying tribute to UNICEF, said he was confident that it would increase its assistance to the malaria eradication programme.

Mr OLIVERO (Guatemala) thanking UNICEF for its great help, which he hoped would be augmented, emphasized that certain health projects would need ever-increasing international support.

Dr SAO MYA MAY (Burma) thanked WHO and UNICEF for the help they had given in various fields of public health.

Mr KATSAKOS (Greece) expressed his Government's gratitude for UNICEF's help in the field of maternal and child welfare.

Dr RIFFAT ALI (Iraq) hoped that UNICEF would continue to give its valuable assistance.

Dr MARTINEZ (Honduras) thanked UNICEF for help, which had been particularly valuable in maternal and child health projects.

Dr TAN HOR KEE (Federation of Malaya) thanked UNICEF for its help and emphasized particularly the assistance it had given in providing equipment for training immediately after the war, when there had been a critical shortage of personnel.

Dr PETROVIC (Yugoslavia) thanked UNICEF for its valuable assistance.

Mr SAMONTE (Philippines), commending UNICEF on its admirable work, said his Government hoped to receive further substantial help as in the past. It welcomed the news that UNICEF might have to reconsider its programme in the light of the needs for malaria eradication.

Dr SANCHEZ MORENO (Peru) thanked UNICEF for its help with the maternal and child health programme, which Peru had been first of the Latin American countries to initiate.

Dr de MENDONCA e SILVA (Brazil) thanked UNICEF for its considerable help.

The CHAIRMAN submitted for the Committee's consideration a draft resolution for transmission to the Health Assembly:

"The Twelfth World Health Assembly,

Having considered the report of the Director-General on the development in activities assisted jointly with UNICEF; and

Having noted the actions taken by the UNICEF Executive Board at its March 1959 session concerning questions which are of direct interest to WHO,

1. NOTES the report of the Director-General;
2. NOTES with satisfaction the importance that UNICEF continues to attach to the personnel training, control of disease and nutrition components of MCH programmes;
3. EXPRESSES to UNICEF:
  - (a) its appreciation of the substantial support given by UNICEF to the global malaria eradication programme, and
  - (b) the hope that its Executive Board in its forthcoming review will find it possible to maintain, until global malaria eradication is achieved, the level of financial support for this programme at or above that reached during 1958."
7. GENERAL PROGRAMME OF WORK GOVERNING A SPECIFIC PERIOD: Item 6.4 of the Agenda (Resolutions EB4.R11 and EB23.R76)

Dr MOORE, representative of the Executive Board, introducing the item, said that as the second general programme of work covering a specific period adopted by the Eighth Health Assembly was coming to an end, a paper on the question had been

Mr SEBSIBE (Ethiopia), paying tribute to UNICEF, said he was confident that it would increase its assistance to the malaria eradication programme.

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The CHAIRMAN submitted for the Committee's consideration a draft resolution for transmission to the Health Assembly:

"The Twelfth World Health Assembly,

Having considered the report of the Director-General on the development in activities assisted jointly with UNICEF; and

Having noted the actions taken by the UNICEF Executive Board at its March 1959 session concerning questions which are of direct interest to WHO,

1. NOTES the report of the Director-General;
2. NOTES with satisfaction the importance that UNICEF continues to attach to the personnel training, control of disease and nutrition components of MCH programmes;
3. EXPRESSES to UNICEF:
  - (a) its appreciation of the substantial support given by UNICEF to the global malaria eradication programme, and
  - (b) the hope that its Executive Board in its forthcoming review will find it possible to maintain, until global malaria eradication is achieved, the level of financial support for this programme at or above that reached during 1958."
7. GENERAL PROGRAMME OF WORK GOVERNING A SPECIFIC PERIOD: Item 6.4 of the Agenda (Resolutions EB4.R11 and EB23.R76)

Dr MOORE, representative of the Executive Board, introducing the item, said that as the second general programme of work covering a specific period adopted by the Eighth Health Assembly was coming to an end, a paper on the question had been

examined by the Executive Board at its twenty-third session. On learning of the difficulties of drafting such a programme before the Twelfth Health Assembly had taken its decisions on the role of WHO in medical research and on the International Health and Medical Research Year, the Board had, as would be seen from its resolution EB23.R76, decided to recommend that the second general programme should be extended for another year until 1961, and that the item be taken up again at the twenty-fifth session, when a third general programme of work would be prepared for submission to the Thirteenth World Health Assembly.

He accordingly commended the draft resolution contained in EB23.R76 to the Committee for consideration and transmission to the Health Assembly.

Decision: The draft resolution was approved.

8. INTERNATIONAL HEALTH AND MEDICAL RESEARCH YEAR: Item 6.8 of the Agenda (Resolution EB23.R72; Documents A12/P&B/7 and Add.1; and A12/P&B/22) (resumed)

The CHAIRMAN drew the attention of members to the Soviet Union draft resolution which had now been circulated and read as follows:

"The Twelfth World Health Assembly,

Taking into consideration the fact that active international co-operation and the exchange of knowledge and experience in matters of health and medical research are important factors in improving the health and well-being of mankind,

Wishing to encourage further practical steps in the control of widespread diseases such as malaria, tuberculosis, smallpox, cholera, cancer, cardiovascular diseases, leprosy, and poliomyelitis, which all still constitute a serious threat to public health,

Having studied resolution 1283 (XIII) of the General Assembly of the United Nations on an International Health and Medical Research Year whereby the General Assembly 'invites the World Health Organization to consider, in accordance with Article IV of the Agreement between the United Nations and the World Health Organization, the recommendation to organize, primarily on a national basis, an International Health and Medical Research Year, preferably in 1961, and to adopt methods for intensifying international co-operation in this field .....

Expressing its approval of and satisfaction with the interest displayed by the General Assembly of the United Nations in international health matters, including medical research;

Taking into consideration resolution EB23.R72 of the twenty-third session of the Executive Board of the World Health Organization, expressing the Board's favourable attitude to the proposal to hold an International Health and Medical Research Year;

Having studied the Director-General's report (document A12/P&B/7) containing draft plans for the conduct of an International Health and Medical Research Year;

Believing that the participation of all countries in observing an International Health and Medical Research Year would result in an intensification of efforts in health and medical research work, and would therefore further the objectives of the World Health Organization as established by its Constitution;

Taking further into consideration the fact that the level reached in modern medicine is already sufficient to enable the eradication of certain diseases now,

1. DECIDES:

A. To organize an International Health and Medical Research Year, primarily on a national basis, beginning in May 1961 at the opening of the Fourteenth World Health Assembly, and

B. To take measures to intensify international co-operation in this field, and for this purpose;

(a) to include in the work programme of the International Health and Medical Research Year the eradication of such diseases as smallpox, cholera and poliomyelitis and at the same time to intensify the campaign against diseases such as malaria, cancer, tuberculosis, leprosy, and diseases of the cardiovascular system, to improve the provision of drinking water, and to study questions of training and research, and taking into account in this connexion

the new information on the curative importance of atomic energy and the recommendation made in paragraph C of the operative part of the resolution of the General Assembly of the United Nations (A/RES/1283(XIII)) to intensify research and the exchange of experience on the uses of atomic energy in medicine;

(b) considerably to expand and to co-ordinate and organize joint scientific research on the prevention and treatment of the diseases mentioned above and the restoration of the sick to health;

(c) to carry out wide measures of health education of the public;

(d) to furnish assistance to the economically under-developed countries, including apparatus, medicaments, specialist literature and specialist staff.

2. REQUESTS:

International organizations, including the International Red Cross and international medical associations to take part in carrying out the programme of the International Health and Medical Research Year.

3. INVITES:

States Members and Associate Members of the World Health Organization

(a) to begin immediately the planning and preparation of expanded activities in the fields listed above, at the same time considering the desirability of setting up special national bodies for this purpose; and

(b) to inform the Director-General of their preliminary plans in order to enable him to prepare a report for consideration by the Thirteenth World Health Assembly.

4. REQUESTS:

Regional Committees of the World Health Organization to consider the International Health and Medical Research Year at their 1959 sessions with a view to further developing regional activities.

5. INSTRUCTS:

The Executive Board of the World Health Organization

(a) to establish at its twenty-fourth session a consultative committee to advise the Director-General on the programme and management of the International Year and to co-ordinate international and national activities; and

(b) to keep the progress of the work under review.

6. INSTRUCTS:

the Director-General to proceed with the work connected with the holding of the International Health and Medical Research Year on the basis of the plan set forth in document Al2/P&B/7; to prepare a detailed programme on the basis of national programmes received by him and to present it for consideration and approval by the Thirteenth World Health Assembly.

7. INSTRUCTS:

the Director-General to inform the Economic and Social Council of the United Nations at its twenty-eighth session and the General Assembly of the United Nations at its fourteenth session of the measures taken in connexion with the International Health and Medical Research Year."

Mr AFRIDI (Pakistan) submitted a draft resolution which, he said, sought to reflect the view of numerous delegations which considered that an international health and medical research year would be inopportune at the present time.

The proposal had been prepared in haste and he would be ready to accept drafting changes that did not alter the substance. His text read as follows:

"The Twelfth World Health Assembly,

Considering resolution 1283 (XIII) of the General Assembly of the United Nations on an International Health and Medical Research Year whereby the General Assembly 'invites the World Health Organization to consider, in accordance with Article IV of the Agreement between the United Nations and the World Health Organization, the recommendation to organize, primarily on a national basis, an International Health and Medical Research Year, preferably in 1961, and to adopt methods for intensifying international co-operation in this field .....';

Considering Resolution EB23.R72 containing the Executive Board's views on the proposal to organize an International Health and Medical Research Year;

Considering that the World Health Organization has only recently embarked on an extensive and intensive programme embodying practical steps to combat widely prevalent diseases such as malaria, tuberculosis, smallpox and leprosy which will involve active international co-operation and exchange of knowledge and experience in these diseases as well as cholera, cancer, cardiovascular ailments and poliomyelitis;

1. EXPRESSES its appreciation and satisfaction at learning of the interest displayed by the General Assembly of the United Nations in international health matters including medical research;
2. APPRECIATES the value and importance of an International Health and Medical Research Year;
3. EXPRESSES the view that, owing to the existing heavy commitment of national and international effort in the field of health and medical research, the organization of an International Health and Medical Research Year be postponed for the present;
4. REQUESTS the Director-General to transmit the view expressed in paragraph 3 to the Economic and Social Council at its twenty-eighth session and to the General Assembly of the United Nations at its fourteenth session."

Dr DIBA (Iran) supported the Pakistani draft resolution and particularly operative paragraph 3.

Dr SHOIB (United Arab Republic) strongly supported the Pakistani draft resolution for the reasons he had given at the previous meeting: it was vital to avoid great expense to the Organization and Member States which would be out of all proportion to the results obtained.

Dr SARKISOV (Union of Soviet Socialist Republics), observing that his delegation very much favoured an international health year, said that some elements in his draft resolution were similar to those in the United States draft resolution, while others differed. But he would be prepared to discuss the matter informally with the United States delegation in the hope that they might reach agreement on a consolidated text.

The DIRECTOR-GENERAL, replying to a question raised at a previous meeting about the cost of the United States proposal, said that, if he understood correctly, both that proposal and the Soviet Union draft resolution envisaged the same kind of activities as those contemplated in the estimates he had submitted (document A12/P&B/7 Add.1).

However, if the intention of the United States delegation was to propose a world congress on health in 1963, he must call attention to the fact that it might overlap with a world congress that FAO was planning to hold in the same year.

Professor PESONEN (Finland), supporting the Pakistani draft resolution, suggested the insertion of an additional paragraph in the preamble reading, "Considering that the World Federation for Mental Health is organizing an International Mental Health Year in 1960".

Dr EVANG (Norway) supported the Pakistani draft resolution, because, though his Government favoured in principle an international health year, it did not feel that the time was ripe at present.

The CHAIRMAN suggested that a drafting group could immediately be set up to consider any suggestions in order to reach a decision forthwith.

The DIRECTOR-GENERAL drew attention to the difficulties of modifying the text once it had been approved and suggested that, since the Soviet Union delegation was prepared to try and reconcile its proposal with that of the United States delegation, perhaps time should be allowed for such informal discussions and for consideration of drafting changes to the Pakistani draft resolution, and the vote be postponed until the following meeting.

Dr LUKAS (Czechoslovakia) formally proposed the establishment of a working group to prepare a consolidated text based on the Soviet Union and the United States proposals.

Dr AUJALEU (France), pointing out that the Pakistan draft resolution was diametrically opposed to the other two, suggested that the most expeditious procedure would be to take a vote on the former immediately.

Dr BELEA (Romania) favoured the procedure suggested by the Director-General.

Dr SHOIB (United Arab Republic) observed that the Czechoslovak delegate in making his proposal had not taken into account the Pakistani draft resolution.

Dr METCALFE (Australia) and Dr ALAN (Turkey) associated themselves with Dr Aujaleu's view.

Dr JUCHNIEWICZ (Poland) supported the Director-General's suggestion and the Czechoslovak proposal.

Mr SAMONTE (Philippines) and Dr RIFFAT ALI (Iraq) favoured the Director-General's suggestion.

Dr LARSON (United States of America) thought there had been enough discussion to enable the Committee to reach a decision on the Pakistani draft resolution.

Dr SARKISOV (Union of Socialist Soviet Republics) was glad that the United States favoured an international health year and would oppose the Pakistani proposal. He thought the procedure suggested by the Director-General was the best.

The CHAIRMAN put to the vote the Pakistani draft resolution.

Decision: The draft resolution was adopted by 36 votes to 14,  
with 6 abstentions.

The meeting rose at 12.5 p.m.