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DE LA SANTÉ

REGIONAL OFFICE FOR THE
EASTERN MEDITERRANEAN

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EASTERN MEDITERRANEAN

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Sub-Committee A

MINUTES OF THE SECOND MEETING

Unesco House, Beirut
Tuesday, 27 September 1955, at 4.00 p.m.

CHAIRMAN: Dr. Jamil ANOUTI (Lebanon)

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1. Report of the Regional Director (continued)

Secretary of the Regional Committee: Dr. A.T. Shousha
Regional Director

Second MeetingTuesday, 27 September 1955, at 4.00 p.m.Present:

EGYPT	Dr. M.M. Sidky Dr. M.O. Shoib
ETHIOPIA	Dr. F. Hylander, <u>Vice-Chairman</u> Ato Hapte Meriam Wolde-Kidan
FRANCE	Dr. M. Prévot
IRAQ	Dr. M. Ibrehim
IRAN	Dr. J. Amouzegar Dr. A.T. Diba
ITALY	Mr. L. Vestri
JORDAN	Dr. Subhi Amin, <u>Vice-Chairman</u> Miss E. Hilborn
LEBANON	Dr. Jemil Anouti, <u>Chairman</u> Dr. S. Heyek Dr. E. Wakil Mr. A. Salem Mr. F. Shehada
LIBYA	Dr. W. Foellmer Mr. O.A. Kadi
PAKISTAN	Dr. A.N. Khan
SAUDI ARABIA	Dr. Hassan Neseef
SYRIA	Dr. R. Tarazi Dr. J. Aractingi Dr. D. EL-Chatti
UNITED KINGDOM	Sir Eric Fridie Dr. W.A. Glynn
SUDAN (Associate Member)	Dr. Ahmed Zaki

Representatives of United Nations and Specialized Agencies

United Nations	Mr. M. Sandberg
UNICEF	"
UNRWA	Dr. L.F. Findlay Miss F. Prager Mr. W. Darity
FAO	Miss Mona Doss

Representatives of Inter-Governmental Organizations

International Committee of Military
Medicine and Pharmacy

Médecin-Capitaine Haress Loued

Representatives of Non-Governmental Organizations

International Committee of Catholic
Nurses and Medico-Social Workers

Miss E. Ejeil

Secretariat:

Representative of the Director-General:

Dr. P. Dorolle
Deputy Director-General

1. REPORT OF THE REGIONAL DIRECTOR (continued): Item 8 of the Agenda (document RC5/EM/2)

The CHAIRMAN welcomed the representatives of Ethiopia. He informed Dr. Hylander that he had been elected Vice-Chairman and invited him to take his seat in that capacity.

He then proposed that the Sub-Committee should continue its discussion of the report of the Regional Director.

Dr. AMOUZEGAR (Iran) expressed sincere congratulations to the representative of Sudan on that country's admission as an Associate Member of WHO and assignment to the Eastern Mediterranean Region of the World Health Organization.

He congratulated the Regional Director and his staff on the comprehensive and informative report they had prepared. Any comments the Iran delegation made should not be regarded as criticism but as an enquiry regarding the relative desirability of certain aspects of the programme and the basis for priorities.

In spite of the strong resolution adopted by last year's Sub-Committee A calling for a programme of environmental sanitation, only 6% of the total available budget had been allocated for activities in that field. While the initiative lay with the governments, WHO should provide guidance and stimulus. So long as a large percentage of children in the region died because of inadequate environmental sanitation, he seriously questioned the advisability of projects in other fields to the prejudice of sanitation projects.

Similarly, the number of projects and fellowships in the field of health education of the public had been insignificant, although in the words of the Regional Director it was a prerequisite to any sustained effort towards improving the health and living conditions of the people.

On page 1 of the report it was noted that while the number of projects had continued to rise throughout the years, the number of field staff had decreased. He hoped that trend had not had a prejudicial effect on the work accomplished.

The statement of page 2 that responsibility for operating the various projects rested on the national staff was very satisfactory and should be clearly emphasized.

A statement appeared on page 4 concerning assistance from the United Nations Children's Fund in the long-term programme of malaria control in Iran. That promise had not been realized and yet the Government of Iran had allocated \$500,000 as its contribution to UNICEF in 1955, 1956 and 1957.

In connection with the statement on page 12 concerning arrangements by the Government of Egypt for a special course for auxiliary sanitarians, he was happy to report that three years ago the Iranian Ministry of Health had initiated a special annual course and a request from Afghanistan (belonging to a different region) to send six students to the school in 1955 had been accepted.

Referring to page 82, he asked who was responsible for the technical accuracy of the public information material put out in the region. He had noticed certain loose statements in the WHO Newsletter regarding World Health Day for which the subject that year had been safe water.

On page 68, it was stated that Bahrein and other territories had been assigned to the Eastern Mediterranean Region. While he fully realized that the scope of the Regional Committee's discussions was in the main technical, he wished to register a reservation on behalf of his delegation concerning the question of Bahrein.

Finally, he would like to know what were the advantages of the system of health cards issued to incoming passengers at Beirut airport, which were stamped and withdrawn without any questions being asked.

Dr. IBRAHIM (Iraq) expressed the thanks of his Government to the Lebanese Government for the cordial welcome given to the Regional Committee. He wished to associate the Iraqi delegation with that of Iran in welcoming Sudan as an Associate Member.

The Regional Director's report showed that the years of close collaboration between WHO and the countries of the region, their basic long-term policy of fact-finding followed by sound planning of well designed objectives were beginning to bear fruit. Public health had made great progress throughout the region. He paid a warm tribute to the Regional Director and his staff who made that progress possible.

He would only refer at that stage to two points in the report.

The new procedure decided upon the previous year for the allocation of the Expanded Programme of Technical Assistance funds had given rise to complications and he suggested the Sub-Committee should consider the possibility of reverting to the former system.

Secondly, his delegation would prefer long-term projects to be financed under the Regular Budget which allowed of longer duration and stability, the allocations being made for the whole project, while short-term projects were financed under the Expanded Programme of Technical Assistance.

Dr. HAYEK (Lebanon) regretted that the report, a very important document, because of its implications and the clear outline it gave of the situation, had not been received somewhat earlier so as to allow careful consideration by the various national departments concerned.

A number of new substantial facts made the annual report of the Regional Director an important basic document in the present and future existence of the regional organization. The special points in the present report were the organization by the Regional Director of travelling seminars; unilateral collaboration between WHO and UNICEF, FAO, the Technical Assistance Board and especially with missions such as the United States missions; the large number of projects being implemented indicating an increased activity on the part of the staff and experts of the regional office.

He wished to draw attention to certain points in the report. The statement on page 15 that there was sometimes reluctance to receive experts from neighbouring countries might be given a derogatory interpretation which did not correspond to the reality. Many national experts were capable of

carrying out such work in as efficient a manner as experts from other countries or regions.

With regard to agreements mentioned on page 16, the arrangements to suppress the local costs payment by governments to project personnel had been received with great satisfaction by the governments. On the other hand the continued payment of local costs out of Technical Assistance funds was undesirable and should be discussed at a special meeting.

Although good progress had been made with regard to environmental sanitation (page 36), it would be impossible for the Regional Committee to fulfil its task without setting up demonstration villages with complete sanitary equipment in all aspects, to serve as a model for other communities.

He pointed out an omission with regard to health education of the public (page 38). Representatives of WHO, visiting health centres, often spoke only with the director and his immediate collaborators. Interviews with the health educators such as the nurses and auxiliary personnel might obviate many complications that arose in implementing projects.

He hoped the Regional Director would consider the advisability of holding the courses at the Regional Nursing College, Alexandria (page 42) in English, French and Arabic instead of only English as at present, because primary education was often given in the two latter languages.

The national authorities had not been able to pay sufficient attention to school health (page 45) owing to lack of funds and trained staff. A special school service should be set up. The Regional Director was to be congratulated on encouraging training programmes in that field. Lebanon had 2,000 schools and had asked WHO to send an expert to advise on the setting up of a complete school health project.

With regard to rehabilitation of handicapped children (page 46) the Lebanon was grateful to WHO, the two medical faculties in Beirut, UNICEF and the Lebanese Association for the Protection of Children for their great assistance in the establishment of a readaptation centre.

Referring to the second paragraph regarding the new Jeddah Quarantine Section (page 74), he asked whether the station would function before the end of 1955.

He asked whether the Regional Director saw any possibility of arranging for simultaneous interpretation at the Regional Committee's sessions which would facilitate the work.

He welcomed the Sudan as an Associate Member.

Finally he congratulated the Regional Director and his staff on the preparation of the report and the work accomplished.

Dr. NASEEF (Saudi Arabia) associated himself with the expression of thanks to the Government of the Lebanon for its hospitality and welcome.

He thanked the Regional Director for the continuous and fruitful help received by his own Government in its efforts to improve the health of the people. The main problems in Saudi Arabia were malaria, tuberculosis and health care of pilgrims.

An anti-malaria training centre had been established in Jeddah under the direction of WHO. A complete national team had now been appointed and was working very satisfactorily. In the new budget, provision was made for teams all over the country; they would soon begin work under the guidance of the Jeddah centre.

In 1954 two tuberculosis sanatoria with 500 beds had been established: as a result of the recommendations of the WHO expert, who had visited the country in August 1955, a first tuberculosis dispensary would be established in Riad. The Government hoped to sign shortly an agreement with WHO to begin a BCG programme. Furthermore, new sanatoria with an additional 500 beds were to be opened in 1956.

The Saudi Arabia Government was aware of its responsibility with regard to the health of the pilgrims. A quarantine station would be officially opened in Jeddah on 28 November 1955. The Director-General of WHO had been asked to send representatives and on behalf of his Government he invited the

Regional Director to attend. For a long time no quarantinable diseases had been reported in Saudi Arabia during the pilgrimage season and none were endemic in the country. Strict quarantine measures were taken. In 1955 out of 700,000 pilgrims there were fewer than 300 deaths. Those deaths were due to sunstroke and natural causes. It would be helpful to all concerned if Governments would carry out selection of medically fit pilgrims.

The Government felt that the time had come to dispense with Annex A of the International Quarantine Regulations in accordance with resolution WHA4.75 of the Fourth World Health Assembly, which stated that that Annex A would be temporary and subject to omission when health conditions improved in Saudi Arabia. The Quarantine Station in Jeddah would function as a reception centre and would isolate groups of pilgrims among which epidemic diseases appeared. The WHO representative who attended the last pilgrimage season would report on the Government's efforts and its future programme for the health care of pilgrims. An official communication had been addressed to the Director-General and a copy sent to the Regional Director.

On page 73 of the Regional Director's report it was stated that the total number of pilgrims in 1954 was 164,072. To that figure should be added 500,000 coming from Saudi Arabia itself.

In conclusion he wished to associate himself with the welcome to Sudan.

Dr. KHAN (Pakistan) on behalf of his Government joined in the expression of thanks to the Lebanese Government.

He congratulated the Regional Director and his staff on the very complete and useful report. The report mentioned the difficulties relating to financing and staffing of programmes in the region. Pakistan had taken steps to solve most of these difficulties and he could assure the Committee that his Government would do everything possible to implement the programmes.

He also wished to extend a warm welcome to the Sudan as an Associate Member.

The meeting was suspended at 5.15 p.m. and resumed at 5.35 p.m.

Sir ERIC PRIDIE (United Kingdom), on behalf of his delegation, congratulated the Regional Director and his staff on the excellent report. He suggested that the principles laid down on page 3, particularly steady planned progress within the absorptive capacity of countries, were essential factors in the progress made.

Regarding the reference to Behrein made by the representative of Iran, he wished also for record formally to reserve the rights of Her Majesty's Government on this question.

His delegation extended a sincere welcome to Sudan as an Associate Member.

Dr. EL-CHATTI (Syria) associated his delegation with the welcome to Sudan and the thanks to the Government of the Lebanon.

With regard to joint projects of WHO and other organizations, he referred to the satisfactory work of WHO in Syria in the last years, which reflected the able and enlightened direction of the office in Alexandria by the Regional Director.

He suggested that the regional office might give increased attention in the future to material assistance for laboratory establishment and techniques, to material and methods for mass health education and to training opportunities in the medical use of atomic energy and in methods of protection from radiation.

He agreed with the views of the Egyptian representative concerning WHO area representatives and felt that direct contact with the regional office might be more effective.

Dr. IBRAHIM (Iraq) stated that his Government also wished to make a reservation regarding the question of Behrein.

Dr. HYLANDER (Ethiopia) thanked the Sub-Committee for electing him as Vice-Chairman.

Speaking as delegate of Ethiopia, he expressed his Government's and his personal appreciation for the invitation of the Government of the Lebanon. He was glad of the opportunity to see the Ethiopian medical students working in Beirut and the work being done on health matters in the country.

Ethiopia had been faced with the problem of children's diseases but had overcome them with the help of WHO. At first it thought it would receive financial aid but now understood that the help would be consultative. Although the first experts had not always been quite suitable, WHO had soon come to understand Ethiopia's problems better and to provide better help. The good relations and progress were due to the Regional Director and his staff.

The report was excellent and he would only stress one point at that stage. The report recalled that governments were expected to take over the responsibility for continuing programmes initiated by WHO. That had not at first been understood. The Government of Ethiopia was now ready to take over the research and equipment of the leprosy programme in the country.

He associated his delegation with the welcome to Sudan.

Dr. SIDKY (Egypt) said the cordial welcome that he wished to express to Sudan had unintentionally been omitted from his statement at the previous meeting.

Dr. ZAKI (Sudan) thanked the Committee for its unanimous support which had enabled Sudan to become an Associate Member of WHO and the representatives present for their kind welcome. Sudan was grateful for the assistance that had been given by WHO for many years.

He congratulated the Regional Director on his comprehensive and informative report.

There was only a brief reference in the report, on page 27, to disease-bearing flies. The matter was important and worthy of more attention because many diseases were spread by insects and the latter were acquiring immunity to insecticides. Environmental sanitation had an important bearing in the matter.

Dr. HAYEK (Lebanon) thanked the representatives on behalf of his Government and country for their kind words and wished them a pleasant stay and successful work in the atmosphere of frankness and cordiality that had been created.

Dr. SHOUSHA, Regional Director, thanked the members of the Sub-Committee on behalf of his staff and himself for their words of appreciation and for their helpful comments which would be taken into consideration in the implementation of the next year's programme.

He then replied to points raised during the discussion.

With regard to the question of area representatives raised by the representative of Egypt, he felt that the justification put forward on page 21 of the report still held good. The regional office did in fact adopt the policy of having the work done by a senior member of the WHO team in suitable cases but there was evidence that when the work was done by regional office representatives, the planning of technical assistance programmes had been the most successful.

The Egyptian representative had spoken of the importance of developing independent environmental sanitation programmes. The small proportion of such projects in the total programme was not a definite policy but reflected the difficulties governments had met in developing independent programmes on account of their relatively large supply requirements. The Sub-Committee would have further opportunity to discuss the matter.

He would ask Dr. Dorolle, the Deputy Director-General, to reply to the Egyptian representative's question regarding UNICEF's budgetary cycle.

Replying to the comments of the representative of Iran, while the provision for the environmental sanitation programme proper amounted to only 6% of the total programme, it would be seen from document RC5/EM/9 that other programmes were in many cases supplemented by an environmental sanitation programme. The demonstration station at Qalyub was a purely environmental sanitation project though its cost was not included in the 6%.

He was glad to hear that Iran had started auxiliary training in national research. The project to which the report referred was an expediency measure for countries where foreign languages were not spoken and where persons who had the advantage of higher education could not be recruited.

The question raised regarding public information was a matter for Headquarters and no doubt the Deputy Director-General would reply to it.

The question of Bahrein was not within the competence of the Regional Committee. Bahrein was within the Eastern Mediterranean Region and it was the duty of the Regional Director to give assistance on technical grounds, irrespective of to which country it belonged.

He assumed that the health authorities at Beirut airport, knowing that the passengers in question were delegates and staff members of the World Health Organization, had considered it unnecessary to enquire whether the quarantine regulations had been carried out.

With regard to the question concerning the Technical Assistance Programme, a special document (RC5/EM/17) had been prepared and the Deputy Director-General would perhaps give additional information when that item of the agenda came up for discussion.

Referring to the questions raised by the representative of Lebanon, the Regional Director regretted the somewhat late arrival of the report. It had in fact been despatched on 17 August.

In the desire to be perfectly frank, he had mentioned in his report all the difficulties regarding personnel.

With regard to the Technical Assistance Programme, a solution to the question raised by the Lebanon might be found during the discussion of document RC5/EM/17 on the subject.

With regard to nursing colleges, it would be difficult to hold courses in three languages at once - French, English and Arabic. The colleges were intended to produce nursing instructors who would return to their countries to start nursing education.

He would consider the possibility of simultaneous interpretation and hoped it would be possible to meet the wishes of the representatives in the matter.

He agreed with the remarks of the representative of Syria concerning laboratory projects. Several projects were, however, included in the 1957 programme. The matter was important and without technical health laboratories, the public health administration could not function as it should.

He also agreed about the importance of health education. The regional office would be prepared to receive requests for assistance in that field.

The Deputy Director-General might be prepared to make a statement regarding WHO's plans in the field of atomic energy.

He agreed with the representative of Sudan that fly control was an important subject. The regional office had begun to study it in connection with trachoma and he would consider extending the research.

The CHAIRMAN said the debate on the Regional Director's report would remain open for discussion at the following meeting.

The meeting rose at 6.25 p.m.