



UNITED NATIONS DEVELOPMENT DECADE

Report by the Director-General

The Director-General has the honour to transmit to the Sixteenth World Health Assembly the report on the United Nations Development Decade which he submitted to the Executive Board at its thirty-first session.

After considering this report, the Executive Board adopted resolution EB31.R50 as follows:

"The Executive Board,

Having studied the report of the Director-General on the United Nations Development Decade,

Recalling the decisions of the Fifteenth World Health Assembly in resolution WHA15.57 on the United Nations Development Decade, and its own decisions in resolution EB29.R44,

Agreeing with the statement made by the Director-General to the Economic and Social Council at its thirty-fourth session on this subject,

Noting the resolution 916 (XXXIV) adopted by the Economic and Social Council at its thirty-fourth session, with regard to the United Nations Development Decade,

Taking into account the views expressed by the Administrative Committee on Co-ordination at its twenty-seventh session; and

Considering that all the practical activities of the World Health Organization under its annual programme constitutes a contribution by WHO to the United Nations Development Decade,

1. REITERATES the fact that the improvement of health is fundamental to social and economic development;
2. STRESSES the need for governments to devote increased resources to the control of disease and the improvement of health;
3. CALLS ATTENTION of governments, and particularly the national health authorities, to the decisions taken by the Economic and Social Council in resolution 916 (XXXIV), regarding the programme and financial resources for the Development Decade;

4. REQUESTS the Director-General to co-operate fully and actively with the Special Committee on Co-ordination, established by the Economic and Social Council in its resolution 920 (XXXIV), on the basis of the understanding reached by the Administrative Committee on Co-ordination, as contained in its twenty-seventh report to the Council; and
5. EXPRESSES the hope that the existing arrangements for co-ordination at the disposal of the United Nations system will be fully utilized for assisting developing countries in fulfilling the objectives of the Decade."

The Special Committee on Co-ordination, referred to in paragraph 4 of the Executive Board's resolution, held its first meeting in New York from 25 to 28 February 1963. It decided to consider at its next meetings beginning on 13 May 1963, its preliminary findings as regards priority areas relating to the objectives of the United Nations Development Decade and to prepare, in consultation with the agencies concerned, recommendations thereon, which would be submitted to the Economic and Social Council.

WORLD HEALTH
ORGANIZATION

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UNITED NATIONS DEVELOPMENT DECADE

Report by the Director-General

1. The Director-General reported to the Executive Board, at its twenty-ninth session, on General Assembly resolution 1710 (XVI) which designated the current decade as the United Nations Development Decade. In May 1962, he reported to the Fifteenth World Health Assembly¹ on the action taken by the Executive Board, at its twenty-ninth session in its resolution EB29.R44.² The Fifteenth World Health Assembly, in its resolution WHA15.57,³ endorsed the Executive Board's recommendations that governments undertake a ten-year public health programme, with the assistance of WHO, if they so wish, with certain specific objectives and targets designed to raise the standards of the health of the peoples, such as the preparation of national plans for the development of public health programmes; concentration on the education and training of professional and auxiliary staff for strengthening their health services; the establishment as base-lines of certain indices of their current health situation; and the devotion of increased national resources to the control of disease and the improvement of health. This resolution was brought to the attention of the United Nations General Assembly, the Economic and Social Council, the Technical Assistance Committee and the Governing Council of the Special Fund.

2. The Secretary-General of the United Nations consulted the specialized agencies regarding his proposals for action during the Decade, which he had been requested in resolution 1710 (XVI) to submit to the Economic and Social Council at its thirty-fourth session in July 1962. The programme which was approved by the Executive Board, at its

¹ Off. Rec. Wld Hlth Org. 118, Annex 3, pp. 15-83

² Off. Rec. Wld Hlth Org. 115, 28

³ Off. Rec. Wld Hlth Org. 118, 28

twenty-ninth session, and by the Fifteenth World Health Assembly, was summarized in the document containing the Secretary-General's proposals and set out in full in an addendum to that document.¹ In presenting his report to the Council, the Secretary-General specifically referred to the fight against malnutrition and disease and suggested that expenditure on health services might be doubled. The Director-General of WHO also took part in the debate of the Economic and Social Council on the Development Decade, and informed it of the action taken by WHO. A copy of his statement to the Council is attached as Annex 1.

3. The Economic and Social Council adopted resolution 916 (XXXIV), attached as Annex 2, further defining the objectives of the Decade, most of which relate to trade. However, one area of work to which the Council called particular attention was "the development of human resources through adequate programmes for education and vocational training, nutrition, health, sound public administration, housing, urban and rural development and effective land reform, with particular emphasis on their contribution to over-all development objectives and with the co-operation, where appropriate, of trade unions and other non-governmental organizations in consultative status". This resolution requested the Secretary-General, in co-operation with the specialized agencies and others, to submit in July 1963 "a programme consisting of detailed phased proposals for action".

4. In compliance with this request, the Administrative Committee on Co-ordination, in October 1962, made arrangements for the preparation of detailed proposals. The contribution of WHO to the United Nations paper on a programme consisting of detailed phased proposals for action with respect to the basic facts of economic growth, for presentation to the next session of the Economic and Social Council, is attached as Annex 3.

5. Following the review of programme development and co-ordination, the Economic and Social Council decided, in its resolution 920 (XXXIV), attached as Annex 4, to set up a Special Committee on Co-ordination, with particular emphasis on the United Nations Development Decade, consisting of representatives of eleven States members of the Council

¹ United Nations document E/3613, and Add.1

or the Technical Assistance Committee. The Special Committee is to keep under review the activities of the United Nations and its agencies in the economic, social, human rights and related fields; to consider, wherever appropriate, in consultation with the agencies concerned, priority areas or projects relating to the objectives of the Decade, and to submit recommendations on these matters to the Council. It will also assume certain functions of the ad hoc Working Group on Co-ordination, established by Economic and Social Council resolution 798 (XXX), and will submit to the Council, for consideration, a concise statement of the issues and problems in the field of co-ordination, which call for special attention. The first meeting of the Special Committee is to be held in February 1963.

6. The Director-General of WHO took part in the debate on this proposal in the Economic and Social Council and all specialized agencies agreed that no new machinery for co-ordination was required. The Economic and Social Council underlined the fact that the new Committee was a subordinate body of the Council and should not be regarded as a new piece of machinery since it continued the work of the Council's ad hoc Committee on Co-ordination. The Council invited ACC to express its views, and the ACC, at its thirty-fifth session, agreed to a statement, attached as Annex 5, drawing attention to the importance of the participation by the representatives of the specialized agencies in the deliberations of the Council and its committees. It hoped that the existing instruments at the disposal of the agencies for assisting developing countries in making the Decade a success would be fully utilized. On the basis of the statement and reservations made by ACC, the executive heads of agencies expressed their willingness to recommend co-operation with the Special Committee on Co-ordination, to their governing bodies. The ACC also suggested that the budgets of EPTA, the Special Fund and the World Food Programme, as well as the regular budgets of the specialized agencies, should be adjusted to the targets of the Development Decade.

7. In further resolutions on trade and the Development Decade, the Economic and Social Council approved the convening of a United Nations Conference on Trade and Development¹ and called attention to the importance of economic development, particularly of the less developed countries, for the stability of the world economy and the maintenance of international peace and security.

¹ E/RES/917

8. The General Assembly of the United Nations is considering the report of the Economic and Social Council on the Development Decade, at its seventeenth session. Such decisions as it may make will be reported to the Executive Board.

Address by Dr M. G. Candau
Director-General of the World Health Organization

to the

Thirty-fourth Session of the Economic and Social Council
on the United Nations Development Decade

Geneva, 10 July 1962

The spirit in which the General Assembly initiated the United Nations Development Decade and the goals it formulated led the World Health Assembly to adopt its resolution WHA15.57, which is before this Council in document E/3611, Addendum 1. The Health Assembly "Cognizant of the profound effect health standards of families, communities and nations have on their social advancement and economic progress, particularly in the developing areas of the world" and "aware of the benefits accruing to health from the accelerated national programmes for general socio-economic development", recommended that "insofar as the health aspects of accelerated economic and social development are concerned, governments participate in these programmes, with the assistance of the World Health Organization, if they so wish, by undertaking a ten-year public health programme with the objectives to raise the standards of the health of the peoples" by a few closely related actions.

The Development Decade gives the World Health Organization an opportunity and a responsibility to expand health programmes and to review their focus as part of the common effort to speed the pace of development during these ten years. I appreciate this opportunity to bring to this Council some of the details of the contribution which my Organization hopes to make in this co-operative effort. In this effort, health is important not only for its own sake, but because it is essential for economic development. For the newly-independent countries, independence may mean a breakdown of the barest minimum of health services. The absence of health is one of the most important contributing factors to instability of the individual, the family and of the entire community. The health problems of newly-independent and emerging countries must be faced. Indeed, economic values are not fully applicable to the saving of human life and the alleviation of suffering of people, for these cannot wait and are not determined by economic factors alone.

The Acting Secretary-General, in his statement yesterday, emphasized clearly the over-riding importance of the human factor in the entire development process. In the introduction to his report, which is before this Council, containing his proposals for action in the United Nations Development Decade, he also stated, "The widening of man's horizons through education and training and the lifting of his vitality through better health, are not only essential pre-conditions for development, they are also among its major objectives". We must bear constantly in mind that economic and social development is required for man, that human beings are the means of achieving that development and that they are to be its beneficiaries.

Health means more than individual care for the sick, more than the nation-wide or even international attacks on the causes of disease, in which most countries are now engaged. It means, in every country, heightening the vitality of the people so that they have fewer casualties to care for, their work becomes more productive and - what is just as important - they have the energy to learn the new skills and to adjust to the new patterns of living that constitute economic and social progress. Thus, improvement of the people's health contributes to progress in practically every other sector of the development programme, just as advances in these other sectors can bring important benefits to health.

It is clear, too, that economic and social development is not something which can be given to people - it is, instead, something which they can only achieve for themselves. And the strength of people to produce, their receptiveness to training, their will to work for their own betterment, require a healthy mind in a healthy body.

When the Fifteenth World Health Assembly considered the General Assembly's resolution, one of its main conclusions was that "In developing countries, the creation of a network of minimum basic health services must be regarded as an essential pre-investment operation, without which agricultural and industrial development would be hazardous, slow and uneconomic". It is axiomatic that if a country is to achieve self-sustaining development, it must have an adequate infra-structure. It is also obvious that the infra-structure, to be complete, must include a sufficient health component to provide the minimum health

services for the country. These health services must be competent to identify problems, to provide the minimum preventive and curative services, to plan the further development of health services in the context of economic and social development and to avoid the health hazards which too often are the concomitant of economic development. Thus, training for the provision of the minimum health services is an essential pre-investment activity.

The Health Assembly made specific recommendations to governments in connexion with the Development Decade.

Of basic importance is the establishment of a national health plan for each country, co-ordinated with its plans for work in other sectors. A realistic and technically sound health plan would take epidemiological and other technical data into consideration, and would relate them directly to basic economic facts, such as resources and costs, and also to the degree of benefit that can be expected.

Preparation of a sound plan will promote the establishment and development of a basic health organization as the sine qua non for providing minimum health services to the people.

These plans must include provision for concentration on education and training, so that countries can staff their health services with their own professional and auxiliary workers, and can build up as early as possible their own training institutions for health staff. To this end, measurable targets must be set for expanding each category of staff according to the pre-determined needs.

It may help the Council in its deliberations to be aware of the order of magnitude of the problem. The minimum requirements for basic health services are considered to be:

- 1 physician per 10 000 population
- 1 nurse per 5 000 population
- 1 sanitarian per 15 000 population
- 1 sanitary engineer per 250 000 population

The difficulties in achieving such a goal in the developing countries will vary, for example, according to the proportion of physicians graduating in different areas of the world. Thus, according to estimates based on 1955-1956 figures, while in Europe an average six or seven physicians graduate every year per 100 000 population, in the Americas and Oceania, the proportion varies between 3.5 and 5 per 100 000 population, and that in Asia and in Africa 0.8 and 0.5 per 100 000 respectively.

We speak today of a Development Decade, but the man on which health work basically depends - the physician - requires six to seven years in which to be trained; in some countries without their own doctors, or with a very few, the Decade will be two-thirds completed before even a small part of the basic national staff can be graduated from medical schools. This underlines the urgency to provide every possible assistance to the developing countries not only in training individuals as rapidly as possible, but also in the early establishment of training institutions.

The Health Assembly also recommended that governments establish as baselines certain indices of their current health situation, so that they can gauge progress towards their own targets for the decade. Those targets, of course, would be defined in the national health plans.

In many of the under-developed countries of the world today, a high prevalence of communicable diseases represents a hazard which results in continued lower standards of living. The experience of the Organization has demonstrated that the circle of disease, low productivity and poverty, to which so many delegations have referred, can successfully be broken by a concentrated attack on its biological components through sustained and mass campaigns against the most prevalent communicable diseases. As targets for the Decade, therefore, the World Health Assembly has proposed that certain of the most prevalent communicable diseases be attacked in a more concentrated fashion with a view to achieving their eradication, or reduction to the point where they cease to be of serious public health or economic importance. In the Decade increased effort must be made to prevent premature death and to increase life expectancy, thereby achieving a more favourable age composition. The infant mortality rate, the most sensitive of social indicators, must be lowered during the Decade.

Malnutrition, as has been pointed out by my colleague, Mr Sen, represents an immediate challenge during the Decade. In co-operation with the FAO and other organizations, WHO will intensify the programme in the health aspects of malnutrition. Finally, a direct attack on the environment through, in the first instance, a dynamic and intensified community water supply programme, will be undertaken.

The Health Assembly further recommended that countries devote increased resources to the control of disease and the improvement of health. U Thant, in his speech yesterday, stated that in the less developed areas, "expenditure for public health services must double over the period", and we in WHO hope earnestly for the achievement of this modest goal.

During the past decade many new nations have obtained their political freedom. They seek now their technical independence so that they will, themselves, be equipped to work effectively for the emancipation of their peoples from the scourges of ill-health, poverty and ignorance. To these ends the Development Decade can, as the words which created it are translated into action, make a crucial contribution.

Experience during the fourteen years of the existence of the World Health Organization, in providing assistance to governments, at their request, to strengthen their health services, will be invaluable in carrying our share of the responsibility of the Development Decade. The Health Assembly has agreed upon a programme of action which would enable the Organization to become an active partner in this enterprise. We have the structure, the machinery, the techniques. We need the additional resources - human as well as financial - to carry out fully the objectives of the Decade for the improvement of the well-being of people everywhere.

UNITED NATIONS
ECONOMIC
AND
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Annex 2



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RESOLUTION ADOPTED BY THE ECONOMIC AND SOCIAL COUNCIL

916 (XXXIV) United Nations Development Decade

Economic and Social Council,

Recalling General Assembly resolution 1710 (XVI) designating the current decade as the "United Nations Development Decade", in which Member States and their peoples will intensify their efforts to mobilize and to sustain support for the measures required on the part of both developed and developing countries in order to accelerate progress towards self-sustaining growth of the economies of individual nations and their social advancement so as to attain in each under-developed country a substantial increase in the rate of growth, with each country setting its own target, taking as the objective a minimum annual rate of growth of aggregate national income of 5% at the end of the Decade,

Considering that the economic and social development of the economically less-developed countries is not only of primary importance to those countries but is also basic to the attainment of international peace and security and to a faster and mutually beneficial increase in world prosperity.

Recognizing that, in spite of a variety of efforts, policies, and measures designed to assist the developing countries in their efforts to achieve economic growth through which much has been accomplished, the rate of economic and social progress in these countries is still far from adequate,

Noting the essentiality of strengthening the economic independence of the less developed countries,

Bearing in mind that new problems affecting particularly the developing countries and hampering and delaying their economic and social development, have arisen in international economic relations in the course of the past years,

Having before it the report prepared by the Secretary-General (E/3613) presenting proposals for intensified national and international action programmes during the present decade,

Noting (a) the views submitted by Governments in documents E/3613/Addenda 2 and 3, concerning proposals for action in the Development Decade and in document E/3664 concerning the role of the regional economic commissions in the Decade, (b) the proposals for action made by the related agencies and (c) the views expressed during the Council's discussion of this subject,

1. Expresses appreciation to the Secretary-General for his work in producing the report and to the agencies and other institutions which helped in its preparation;

2. Endorses the emphasis placed in the report on the development process as a many faceted one, based principally on industrial development and a highly productive agriculture and requiring for success determined self-help and careful planning on the part of developing countries;

3. Calls upon the Governments of Member States, as well as United Nations bodies and specialized agencies, to give particular consideration, in the first years of the implementation of the Development Decade, in addition to their endeavours in other fields, to the following areas:

- (a) industrial development as a most important factor in economic diversification and general economic development,
- (b) improved access to the world markets in order to promote export trade of the developing countries, taking into account their foreign exchange needs for development and the effects of deterioration in their terms of trade, including steps for early reduction or elimination of barriers to exports,
- (c) appropriate measures such as international commodity arrangements to stabilize at remunerative levels the prices of primary commodities on international markets, and also sound compensatory arrangements designed to mitigate excessive fluctuations in the export receipts of primary producing countries and to compensate for the harmful effects thereof,
- (d) the pursuance by regional and sub-regional economic groupings of economic policies which avoid the introduction and facilitate the elimination of obstacles and restrictions which might hamper the necessary expansion of the trade of the developing and under-developed countries or might discourage the indispensable growth of their economies,

- (e) a substantially increasing in-flow of long term development capital, public and private for financing their economic development programmes on terms which take into account the special requirements and conditions of the developing countries so as to benefit them; and for this purpose the continuing need for measures in both developing and developed countries designed to facilitate and encourage its flow to the less developed countries,
- (f) the development of human resources through adequate programmes for education and vocational training, nutrition, health, sound public administration, housing, urban and rural development, including community development and effective land reform, with particular emphasis on their contribution to over-all development objectives and with the co-operation where appropriate of trade unions and other non-governmental organizations in consultative status,
- (g) exploration and exploitation of natural resources with a view to establishing a raw material and energy basis for economic development;

4. Recognizes the special significance of international economic relations and looks forward to the report of the working group set up under resolution 875 (XXXIII) on the question of a declaration on international economic co-operation;

5. Emphasizes that pre-investment activities should be designed to facilitate national efforts towards development;

6. Urges the prompt attainment of the present goal of \$150 million for the Special Fund and the Expanded Programme of Technical Assistance in the interest of accelerating the development of human resources, natural resources and national and regional institutions, and requests the General Assembly to consider at an appropriate time the establishment of new targets, bearing in mind the observations of the Secretary-General in his report;

7. Urges further that participating Governments give full support to the Freedom from Hunger Campaign of the Food and Agriculture Organization of the United Nations and invites the Governments of States Members of the United Nations and members of the specialized agencies to take early steps to prepare for the Pledging Conference for the experimental World Food Programme and, in determining their pledges, to bear in mind the necessity of attaining the goal of \$100 million in commodities, services and money;

8. Emphasizes the need for increased domestic savings and investment in the developing countries, through appropriate policies in the public and private sectors of the economy.

9. Stresses the increasingly important role envisaged in the Secretary-General's report for the United Nations, and expresses the hope that resources commensurate with the task will be made available;

10. Requests the Secretary-General to submit to the thirty-sixth session of the Council a report on the measures taken to secure the full participation of the regional economic commissions in the work called for in the United Nations Development Decade;

11. Requests the Secretary-General in co-operation with the specialized agencies and the regional economic commissions, where appropriate, to provide on request assistance in the field of planning to developing countries; looks forward to the establishment and effective functioning of regional development institutes and the economic projections and programming centre, as provided in resolution 1708 (XVI); and requests the Secretary-General to report to the Council at its thirty-sixth session on progress made toward the goals envisaged therein;

12. Looks forward to the results of the United Nations Conference on the Application of Science and Technology for the Benefit of the Less Developed Areas and requests the Secretary-General to make appropriate recommendations for action resulting from the findings of the Conference;

13. Requests the Secretary-General to prepare, in co-operation with the regional economic commissions and other bodies and agencies of the United Nations family, and with such expert assistance from outside as he may deem necessary, a programme consisting of detailed phased proposals for action with respect to the basic factors of economic growth in the light of the objectives outlined above and a progress report setting forth achievements in the period ending March 31, 1963;

14. Further requests the Secretary-General to acquaint all United Nations bodies and the specialized agencies with the present resolution and to transmit the afore-mentioned studies and reports to the thirty-sixth session of the Economic and Social Council for consideration, when it will review the detailed programmes of action in order to adjust them to the changing situation.

1236th plenary meeting,

3 August 1962.

WHO CONTRIBUTION TO THE UNITED NATIONS PAPER ON
"A PROGRAMME CONSISTING OF DETAILED PHASED PROPOSALS FOR ACTION
WITH RESPECT TO THE BASIC FACTS OF ECONOMIC GROWTH"
FOR PRESENTATION TO THE NEXT SESSION OF THE ECONOMIC AND SOCIAL COUNCIL

Introduction

The aims and the nature of the United Nations Development Decade initiated by the General Assembly in their resolution 1710 (XVI) led the World Health Assembly at its last session to adopt a resolution (WHA15.57) in which it stressed "the profound effect health standards of families, communities and nations have on their social advancement and economic progress, particularly in the developing areas of the world", and recommended that "in so far as the health aspects of accelerated economic and social development are concerned, Governments participate in these programmes with the assistance of WHO, if they so wish, by undertaking a ten-year public health programme with the objectives to raise the standards of the health of the peoples". Thus, the Assembly not only approved WHO's participation in the Decade but also recognized that this gives the Organization an opportunity and a responsibility to expand health programmes and to review their focus as part of the common effort to speed up the pace of development during the forthcoming years.

In the development effort of newly-independent countries health is important not only per se, but as an essential factor for economic development. For many such countries, independence may mean a suspension of even basic minimum health services. Poor health and illness are among the most important contributing factors to the instability of the individual and of the family; they affect the entire community and lead to its economic inefficiency. The health problems of newly-independent and emerging countries must, therefore, be faced; a concentration of efforts is required to overcome the basic health deficiencies which still exist in many areas.

Economic values are only in part applicable to the saving of human life, but it is not only for economic reasons that the alleviation of suffering is important. It is indeed now universally recognized that the human factor is essential to economic development and that human beings are not only the most important and essential means for achieving that development, but that they are also to be its beneficiaries. Better individual health, eradication of epidemic and endemic diseases, a sound environment, better health consciousness and education, all contribute to heightening the vitality of the people. This, in turn, means better productivity, fewer casualties to care for and new energies to learn the new skills and adjust to the new patterns of living implicit in economic and social progress. Thus, improvement of the people's health contributes to the progress in practically every sector of the development programme, just as advances in these other sectors can bring important benefits to health.

During its discussion on the Decade, the World Health Assembly recognized the need for maintaining a balance in the activities of the Organization, but it indicated certain areas of action which might be developed by governments in connexion with the Development Decade.

Examples are given below of aspects of the programme which could be undertaken during the Decade by WHO, in conjunction with other sources of international assistance such as EPTA, UNICEF and the Special Fund, on the basis of the activities already planned for 1963-1964. The long-term figures are only indicative of the order of magnitude of an international effort if some of the goals of the Decade, as indicated, are to be achieved. The figures do not include the cost to governments but an attempt has been made to keep the proposals within the probable limits of national absorptive capacity and within the boundaries of feasibility.

Planning

In its resolution on the Decade the World Health Assembly made specific recommendations to governments for the establishment of a ten-year health programme to be based on detailed planning. The establishment of a national health plan for each country was recognized as being of primary importance. WHO is developing a

programme of assistance in national health planning to countries. Such assistance would aim at giving national health administrations technical support on a long-term basis for the various steps which are needed in establishing an over-all health plan for a country as an essential part of general national social and economic planning. Such a programme would involve preliminary fact-finding in order to establish guidelines on which the further development of services and activities would be based. Detailed and co-ordinated plans would then follow to determine priorities for health action, reorganize existing services, plan future trends and establish machinery within the health services for application of the plan, training of personnel, both for general purposes and for the implementation of the plan, and for co-ordination with other government services. Such a plan would involve investigation of health needs in terms of personnel, building and supplies, and recurrent costs for salaries, maintenance, etc. with a view to determining the most efficient ways of implementing the plan. Moreover, it would help international and other outside agencies to concentrate their assistance on nationally-established and agreed priorities.

Planning is not considered as a static process, a one-phase operation. As recommended by the World Health Assembly, certain indices of health would be established as base-lines whence to gauge the degrees of realization of the goals pre-determined as targets for the Decade. Progress would be evaluated by continuing operational research which would also give guidance for the periodic revision and adaptation of the plan to changes occurring in time and in scope for action.

The methods for implementing such national health plans will clearly have to be adapted to the needs and conditions of each country. It is envisaged that the formulation of a national health plan will require about one year, to be devoted to detailed survey to determine the needs, the type of health services that best suit local conditions and their pattern of development, as well as to the preparation of the plan itself.

For the period 1963-1964, if funds become available for this purpose, it is WHO's hope to be in a position to make available to ten countries interested in receiving assistance in this field, mainly in Africa, planning services of the type suggested. WHO would provide a senior public health adviser and necessary

staff specialized in planning for each of the requesting countries. Such planning activities would be combined with a certain amount of local training for national personnel and financial provision would be made for supplementing salaries and giving stipends for organizing courses in the countries. A certain amount of equipment and supplies would also be provided. Such assistance would be in addition to the advisory services already provided at the ministerial level in a number of developing countries. It is estimated that national health planning for a medium-sized country would require international assistance costing around \$ 50 000 and an additional \$ 40 000 for training, bringing the total cost of assistance to national health planning to about \$ 90 000 per year. The initial cost for WHO for 1963-1964 would therefore be about \$ 900 000, and it is expected that, if the scheme is to be extended to some 30 countries during the Decade, the total cost involved would be approximately \$ 2.7 million.

Education and training

Education and training has long been recognized as one of the basic means for promoting the development of national health services. The guiding principles and methods of WHO in this field have repeatedly been outlined in documents submitted to the United Nations governing bodies. In developing countries the greatest need is for professional and auxiliary health staff to man the existing services, and further efforts are being made to focus assistance on building up national or inter-country institutions for the training of such staff.

WHO's budget shows that some \$ 2 900 000 would be devoted in 1963 and 1964 to training activities under the regular budget alone. In all, slightly more than \$ 6 million is expected to be provided for fellowships from all sources of financing (including the Pan-American Health Organization) for the same period.

The immense need for health workers of professional and auxiliary categories makes it essential for developing countries to establish new schools for health workers, and to extend existing ones. Some figures are given below of the possible development of international assistance in this field during the Decade. The total needs for training programmes are far greater than the figures suggested and in

medical education alone it is estimated that 30 to 40 new medical schools are needed for African and Asian countries, but the proposals made here are considered as more realistic. The figures given are in addition to the activities already undertaken by the Organization in the various fields of education and training as indicated above.

- (i) Establishment of new medical schools is an urgent necessity in Africa and in some Asian countries. Some of these schools should be organized as inter-country institutions for the training of students with common cultural and socio-economic backgrounds, and those using a common language as a medium of instruction. If four medical schools in Africa and four in Asia are to be started in the next two years, a total amount of \$ 120 million will be needed for this purpose during the Decade, of which about 20 per cent. would be needed in 1963-1964.
- (ii) The establishment of post-basic and post-graduate training institutions to prepare teaching personnel for basic nursing and midwifery schools. Two schools in Africa and two in Asia could be set up within the Decade for an estimated cost of \$ 20 million, of which about one third would be needed in 1963-1964.
- (iii) Training of auxiliary health workers who are an essential component of the health services of developing countries. Taking into consideration the urgent needs for about 250 000 health workers in this category to work in communicable disease control and eradication programmes during the Decade, and on the other hand the relatively short period of formal training needed and the possibility of using already existing training institutions, an amount of about \$ 10 million is needed of which about 60 per cent. could be used in 1963-1964.

Communicable disease control and eradication

The prevalence of epidemic diseases is still high in a number of countries notwithstanding the possibilities that now exist for eradicating certain of them or for controlling them so that they no longer form an important public health

problem. It has been amply demonstrated that community-wide efforts can lead to the practical eradication of malaria, smallpox, poliomyelitis and to the control of a number of viral, bacterial and parasitic diseases such as trachoma, tuberculosis, leprosy, the venereal infections, a number of diseases common to man and animal, bilharziasis, cholera and plague. The problem has now become more one of administrative and financial possibilities than of scientific knowledge or medical technology. The experience of the Organization has demonstrated that the circle of disease, low productivity and poverty can indeed be successfully broken by a concentrated attack on its biological components, through organized and sustained mass campaigns, and that the elimination of such scourges in areas where prevalence is still high has direct, positive repercussions in the fields of economic development, and particularly of agricultural and industrial productivity.

As targets for the Decade, the World Health Assembly has proposed that certain of the most prevalent communicable diseases be attacked in a more concentrated fashion with a view to achieving their eradication or control. Some examples, considered as being fully within the realm of feasibility, are given below.

Malaria

Of the communicable diseases, malaria has the gravest effect on the majority of countries in the tropical and sub-tropical areas of the world. Approximately half the population of the world lived in malarious areas in the first half of this century and the annual global number of deaths from malaria was considered to be over three million. The number who suffered from malaria each year was thought to be in the region of 250 million. The global economic loss from this disease, not only from human sickness and death but from aspects of land utilization, food production and industrial development, has never been assessed accurately, but already in 1935 in India it was estimated at \$ 400 million a year,¹ an estimate which was later revised to over \$ 500 million a year.

¹ Sinton (1935) What malaria costs India, Health pamphlet Malaria Bureau No. 13, New Delhi, India

From its inception the World Health Organization has given the highest priority to the control of malaria and since 1955 the eradication of the disease from the world has been one of the primary aims of the Organization. By the end of 1962, on the basis of information received from countries reporting to WHO, the disease had been eradicated in areas with a population of 322 million and malaria eradication programmes covered a further 748 million people, but 377 million still lived in areas where eradication was not yet being undertaken.

This approach has been outstandingly successful in the continent of Europe and in many countries in the Americas and in Asia where the organization of the general health services of the countries has been sufficient to provide, or has been capable of being rapidly built up to provide, an adequate medical coverage of the population.

However, in countries where such general health services are as yet imperfect, eradication programmes have met with operational difficulties; the Organization has therefore adopted a programme designated as a "pre-eradication programme" for these areas. In such a programme the initial emphasis is placed on building up the infra-structure of health services to a level where the country can provide simple but adequate health coverage and, at the same time, developing the malaria service of the country through intensive training of national staff. Both aspects of the programme are aimed at preparations for a full malaria eradication programme in due time.

By 1970, and in the majority of cases far earlier, the countries now undertaking malaria eradication programmes subject to factors at present unpredictable should have eradicated the disease and be in a final maintenance period, provided that the present level of assistance from the agencies of the United Nations, from bilateral agencies and from other sources are maintained. These countries cover the whole of the continents of Europe and the Americas and the greater part of the continent of Asia - except the Arabian Peninsular and the region east of the 90° longitude E.

But in virtually the whole continent of Africa and in several countries in the Arabian Peninsular, East Asia and Oceania, pre-eradication programmes will have to be adopted as a preparatory measure. It is anticipated that 60 such programmes will be required (42 in Africa and 18 in Asia and Oceania) phased over the next three years, 10 commencing in 1962, 26 in 1963 and 24 in 1964. These pre-eradication programmes and their development in due time into full eradication programmes may be costed as requiring on an average \$ 100 000 each per year as support from WHO. Thus in all, up to 1970 it is estimated that approximately \$ 50 million will be required for advisory services and such supplies and contributions to local costs that are normally provided by the Organization, of which about one third for the period 1963-1964.

For the total eradication programmes in the above-mentioned areas, most governments have been required to seek the assistance of other United Nations agencies, bilateral and other sources for the provision of types of assistance that the World Health Organization is not able to provide. The figure for such a programme based on a population of 250 million over the eight years to 1970 at \$ 0.50 per head per year would approach \$ 1000 million.

Yaws

This endemic infection by Treponema pertenue is prevalent in rural areas throughout the tropical belt. It is transmitted by direct contact with infectious skin lesions among children and sometimes adults. Yaws is a relapsing disease, destructive in its later stages: 10 per cent. of untreated infected children and adolescents end up as adult invalids with hands and feet affected to such an extent that their working capacity is seriously or totally impaired.

Effective drugs and public health control methods are available against yaws. WHO-assisted mass campaigns in high-prevalence endemic areas in countries in the Western Pacific, South-East Asian, African and American regions have shown that the transmission of the disease can be interrupted, that the reservoir of infection can

be effectively reduced and that bringing disease under control will prevent incapacitation and invalidism. In a WHO/UNICEF-assisted programme against yaws in Haiti, approximately 100 000 incapacitated persons were returned to work, with a consequent increase in the national production potential estimated at \$ 5 million a year.¹

The Second International Conference on Yaws Control in 1955 estimated that, among the 400 million people living in the rural areas of the tropical belt, approximately one half are, during their lifetime, exposed to the risk of infection with endemic treponematoses, particularly yaws. Between 1950 and 1960, approximately 125 million people had been examined and, when necessary, treated in WHO-assisted programmes in all regions. It is now estimated that some 75 million people remain in endemic areas not yet covered by surveys.

The WHO budget for 1963-1964 shows that the cost of technical aid in this field, planned to be financed from funds administered by WHO, amount to about \$ 400 000 per year, and that the estimated expenditure from other extra-budgetary funds (including UNICEF) is approximately the same - a total of \$ 800 000 per annum. A renewed impetus is required over the remaining years of the Decade to complete the objective of eliminating yaws in tropical countries as a serious public health problem, a goal which could be achieved at an estimated total cost of \$ 2 million per year for six years, beginning in 1965.

Bilharziasis

The transmission of bilharziasis is related to man's association with water and to the snail which is the intermediate host. Infection with the schistosoma often leads to serious forms of anaemia with consequent impairment of the physical and mental productive capacity of people so affected.

¹ United States Department of State (1950) Point four: co-operative program for aid in the development of economically under-developed areas, Publication 3719, Economic Co-operation Series 24, Washington D.C.

In 16 countries recently surveyed by WHO in Africa and the Middle East it was found that essentially all infections are acquired in natural habitats of the snail and in water conservation ponds, while in four of them infection took place primarily in irrigation systems. These countries have undertaken or have plans for water and soil resource development which call for supplying an additional 19.71 million acres of land with perennial irrigation and the construction of thousands of ponds within the next 10 years. Similar developments are also expected to take place in the endemic areas of South America, South-East Asia and the Western Pacific. Realization of these plans will cause the spread and enhance the intensity of bilharziasis infection in agriculture development areas unless proper control measures are instituted, and it is already apparent that, notwithstanding some palliative measures undertaken locally, the number of persons infected and the extent of the infected areas are seriously increasing.

Methods for controlling this disease are known. They include water management and agricultural practices, the use of molluscicides, and the treatment of infected persons. In countries in Asia it has been possible, by improved water management and agricultural methods, greatly to increase crop production and reduce the amount of molluscicide required.

Control activities can be developed according to an action schedule which includes a survey of about one year's duration, a pilot control phase requiring about three years and thereafter a country or region-wide application of a prolonged duration. Such action requires close co-operation between the health authorities and those responsible for agricultural development schemes and water management from an early planning stage and throughout its execution.

In areas where general farming and cattle raising are dominant, with proper soil, water and crop management, snail control can be carried out for about \$ 20 to \$ 50 per 1000 acres. In areas where molluscicides alone are used, annual costs range up to \$ 3 per irrigated acre.

WHO activities in this field for 1963-1964 are of the order of about \$ 400 000 each year for advisory services to governments, surveys and research. In Africa alone an additional \$ 5 million would be needed during the Decade and \$ 5 million more for other endemic areas in the world if the progressing trend of this serious parasitic infection is to be arrested and measures for effective control instituted.

Onchocerciasis

Onchocerciasis is transmitted to man by certain flies which develop in many riverine areas of Africa and parts of the Americas. In West Africa large areas bordering streams had to be abandoned when the "river blindness" caused by this parasite affected about 30 per cent. of the population, thus depriving countries of crops from some of the most fertile lands in Africa, and also affecting fishing and the full use of the water resources.

Methods for controlling this disease are well known but topographical and epidemiological data are still lacking for many endemic areas. WHO plans to spend some \$ 150 000 in 1963-1964 on epidemiological studies and on research.

At the completion of this preliminary phase to investigate the distribution of the disease, the practical application of control measures under different conditions and the efficacy of new drugs in infected populations, it should be possible to expand health action considerably towards a pre-eradication stage of the disease. It is estimated that such a goal could be achieved for some eight countries in the Volta River area in Africa within the Decade at a cost of about \$ 1.5 million and similar action developed in the infected areas in Central and South America with an additional \$ 1.5 million.

Trypanosomiasis

This infection, better known as sleeping sickness, is highly endemic in certain parts of Africa. The vector, the so-called tsetse fly, favours savannah-type areas, affecting particularly regions of agricultural economy, with little mineral wealth,

no access to the sea and no bright prospects for industrialization. Trypanosomiasis creates a permanent danger for settlement of the areas where the tsetse fly is present because it infects not only man but also his cattle, thus making the development of mixed-type farming and often of agriculture altogether impossible. Other forms of trypanosomiasis with serious damaging influence on individual health and on the productivity potential of nations also exist in the Americas.

Various control measures have been undertaken in different African areas, some with good and lasting success. More needs to be known, however, on the parasite, the vector, the distribution of the infection and measures of control. WHO has budgeted for 1963-1964 some \$ 50 000 each year for research and investigations; after such preliminary action has been completed, it should be possible to proceed to a broad control action in the infected areas. It is estimated that good progress could be achieved in this direction during the Decade at a cost which is tentatively considered of an order of about \$ 2 million for the period.

Smallpox

The world incidence of smallpox is known: in 1961 there were 24 140 cases in Africa, 1923 in the Americas, 52 342 in Asia, 25 in Europe, none in Oceania. Countries where smallpox is prevalent are planning or applying eradication schemes through vaccination. A good, reliable vaccine exists and the problem is essentially one of manpower, equipment and supplies. In the developing countries the main difficulties in developing a massive attack on the disease are the availability of vaccine, of means for refrigerated distribution, and of sufficient transport.

In 1959 cost estimates based on the world incidence of smallpox during the three preceding years showed that the average cost throughout the world for mass vaccination would be in the order of \$ 0.10 per person vaccinated. For about 1000 million inhabitants living in areas where smallpox is still endemic, approximately \$ 100 million from all sources, including the governments concerned, would be required to achieve total coverage, divided as follows: Africa \$ 13 million, Americas \$ 11 million, Eastern Mediterranean \$ 17 million, South-East Asia \$ 55 million and Western Pacific \$ 4 million.

WHO has budgeted for some \$ 350 000 in 1963 and 1964 to assist countries with advisory services, and by supplying vaccine and laboratory equipment. Plans for world-wide eradication already exist and an all-out attack could be undertaken in the next four years of the Decade if an estimated \$ 10 million could be made available to assist countries with such items as vehicles and vaccine.

Community water-supply

Community water-supplies have a vital role in the economic development, and especially the industrial development of urban areas in developing countries. The emergence of a nation from a less-developed to a more advanced status is a step-by-step process. There are certain stages of economic growth, some of them well defined in economic terms, that must be attained consecutively; at some of these stages the lack of safe and adequate supplies of piped water may retard or even be an actual bar to progress. Water-supply is basic not only to health but to a wide variety of economic activities and investment in producing sufficient supplies of water in urban areas may be a major factor in determining the rate at which industrial and commercial growth will proceed.

Today, about 320 million people live in urban communities in developing countries receiving assistance from WHO. It is estimated that this number will increase to about 415 million at the close of the Development Decade. Of this urban population a recent study indicates that at least 70 per cent. have no access to piped water within reasonable distance of their homes. The need therefore exists to provide this essential service to a substantial proportion of the urban population - estimated at more than 200 million people - who have at present no piped water service, or an inadequate one. By the end of the Decade, the population increment will have raised this number to 300 million.

WHO's programme of technical assistance to Member governments in promoting the creation or improvement of community water-supplies is designed to provide assistance at the rate of \$ 1 million a year, if funds become available. This would require capital expenditure by the countries at the rate of approximately \$ 4 million a year.

It is anticipated, furthermore, that the United Nations Special Fund will continue to support community water-supply activities by projects of a pre-investment nature under which preliminary engineering plans, feasibility reports and master plans for water-supplies for urban centres or urban complexes may be prepared.

An attainable goal within the Development Decade would be approximately to double the proportion of urban population who have easy access to safe and adequate amounts of piped water. It is estimated that a programme of construction would cost approximately \$ 400 million per year in order to attain this goal in 1970. This annual capital investment in community water-supplies would amount, on the average, to about 0.25 per cent. of the Gross National Product of the investing nations. Of these annual expenditures a substantial part - perhaps maybe one fourth of the total, or \$ 100 million per year - should become available from foreign aid sources.

Strengthening of basic health services

It cannot be too strongly emphasized that an essential prerequisite for the implementation of any of the programmes already described is the existence at the country or regional level of an adequate infra-structure both of health installations and health personnel. With such a provision of staff and facilities it should be possible in the majority of areas - subject to difficulties of terrain, transportation and distance - to give a minimum coverage of preventive and curative health services, and wherever feasible to integrate them so that the whole population, even in the rural areas, can benefit.

A notable contribution to the potential achievements of the Development Decade can be made by the extension of the service for maternal and child health. It is remarkable how with better activities in health education and child care, advantage can be taken of the recent developments in the control of the communicable diseases of the early years of life. The saving of life in these age-groups adds to the potential of educable children, who with appropriate training can become the technicians of the future, in whom the real wealth of a country lies. It is important too that maternal and child health services should be integrated with the basic health services, thus attaining the maximum of efficiency and availability.

Malnutrition also represents an immediate challenge to action during the Decade and the medical aspects of the problem cannot be ignored. In close co-operation with the Food and Agriculture Organization, other organizations, and particularly with the activities of the United Nations/FAO World Food Programme, the World Health Organization will intensify its activities in this domain. Plans have already been made for 1963-1964 to assist countries to ascertain, through sample surveys, the current nutrition problems and deficiencies of their populations, setting down standards for the development of nutrition conditions in subsequent years.

The strengthening of national health services has been and will continue to be the goal of WHO's activities in the developing countries for a number of years to come in accordance with the guidance provided by its governing bodies in various resolutions and in the General Programme of Work covering a Specific Period.

Most of the activities planned to be financed from funds administered by WHO in 1963 (at an estimated total cost of almost \$ 50 million), and of those proposed for 1964 (at an estimated total cost of over \$ 52 million) are aimed at the attainment of this goal.

Any accelerated health programme which might become possible during the remaining years of the Decade would have considerable influence on the future programme activities of the Organization and on its financial requirements. It will be possible to evaluate such repercussions after a more precise programme for economic and social development as a whole has been established, when the reactions of the governments concerned have become known, and when the availability of additional financial means has been investigated and, if possible, established.

Summary

Certain health goals which could be fulfilled during the Decade have been indicated. While it is impossible to propose at this time a complete phased programme for health development in the under-privileged areas of the world, broad areas for action have been described where energetic intervention should lead to progressive avenues and rapid improvement in the living conditions of the people, and to a higher degree of productivity and of individual achievement.

The focus of immediate and local action will be in the countries concerned, but WHO's structure, its close relationship to national health agencies, and its existing programmes in the field put it in a condition to meet any additional requirements which may emerge in connexion with the general programme of international assistance for the Development Decade.

UNITED NATIONS
ECONOMIC
AND
SOCIAL COUNCIL



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Annex 4



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Agenda item 4

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RESOLUTION ADOPTED BY THE ECONOMIC AND SOCIAL COUNCIL

920 (XXXIV). SPECIAL COMMITTEE ON CO-ORDINATION WITH PARTICULAR EMPHASIS
ON THE UNITED NATIONS DEVELOPMENT DECADE

The Economic and Social Council,

Recalling General Assembly resolution 1710 (XVI)

Having considered the report of the Secretary-General on proposals for action under the United Nations Development Decade (E/3613, Corr. 1 and 2, Add.1, 2 and 3),

Recognizing that the United Nations Development Decade requires, for the fulfilment of its goals, concerted action within the United Nations family of organizations in the economic, social and human rights and related fields, under the United Nations Development Decade,

Believing that co-ordination of the activities of the United Nations and its related agencies would be facilitated if efforts were further concentrated upon selected areas of strategic importance where the opportunities and needs for United Nations efforts are most apparent,

Believing further that the work of its ad hoc Working Group on Co-ordination established by its resolution 798 (XXX) has greatly facilitated the discussion of co-ordination matters by the Council,

1. Decides to establish a special Committee consisting of representatives of eleven States members of the Council or the Technical Assistance Committee, to be elected annually at its resumed summer session on the basis of equitable geographical distribution, who should be conversant with the programmes and activities of the United Nations in the economic, social, human rights and related fields, and of the related agencies, as well as with the practice and procedures of co-ordination among these organizations;

2. Decides further that this special Committee shall have the following functions:
 - (a) (i) To keep under review the activities of the United Nations and its related agencies in the economic, social, human rights and related fields under the United Nations Development Decade;
 - (ii) To consider, wherever appropriate, in consultation with the agencies concerned, priority areas or projects relating to the objectives of the United Nations Development Decade in accordance with its E/3688, draft resolution A7;
 - (iii) To submit recommendations on these matters to the Council;
 - (b) To assume the functions of the ad hoc Working Group on Co-ordination as follows:
 - (i) To study the reports of the Administrative Committee on Co-ordination, appropriate reports of the United Nations organs, the annual reports of the specialized agencies and the International Atomic Energy Agency and other relevant documents;
 - (ii) To submit its conclusions to the Council, for consideration, in the form of a concise statement of the issues and problems in the field of co-ordination arising from these documents which call for special attention by the Council;
3. Requests the Committee, in fulfilling its task under paragraph 2(a) above, to take into account any special observations which the Administrative Committee on Co-ordination may deem it appropriate to submit;
 4. Further requests the Committee to take into account the activities of the ad hoc Committee of Ten on co-ordination of technical assistance activities;
 5. Decides to convene the Special Committee in the first instance in February 1963.

EXTRACT FROM STATEMENT OF THE ADMINISTRATIVE COMMITTEE
ON CO-ORDINATION AT ITS MEETING IN OCTOBER 1962¹

SPECIAL COMMITTEE ON CO-ORDINATION

The ACC has also considered resolution 920 (XXXIV) relating to the creation of a Special Committee on Co-ordination with particular emphasis on the United Nations Development Decade, and has noted that this resolution requests the Committee to take into account any special observations concerning this resolution which the ACC may deem it appropriate to submit.

The Development Decade represents a new phase in the continuing process of ensuring proper co-ordination of the wide range of activities through which the members of the United Nations family are attempting, by a combination of concerted and mutually complementary action, to achieve the general objectives set forth in the Charter and the relationship agreements. The general view of members of the ACC has been, and continues to be, that no new machinery for inter-agency co-ordination is required to implement the Development Decade. While holding these views, the members of the ACC have nevertheless considered the matter on the basis of the decision taken by the Council at its thirty-fourth session.

The executive heads of the agencies, while willing to recommend to their respective governing bodies full and active co-operation with the Council through the Special Committee which the Council has established, feel it necessary to recall the basis of such co-operation, as stated fully by the Council itself as recently as 1958 when defining the basis on which the five-year appraisals were undertaken, and as recapitulated in paragraph 15 of the Appraisals Report² (Appendix 1). It is the understanding of the ACC that the principles so stated by the Council with reference to the appraisals continue to be applicable, and govern the whole implementation of plans for the Development Decade. It is on this understanding that the executive heads of the agencies will recommend co-operation with the Special Committee to their governing bodies.

¹ Document E/3695 - twenty-seventh report of the Administrative Committee on Co-ordination

² Five-Year Perspective, 1960-1964 (E/3347/Rev.1)

The executive heads of the agencies wish to draw special attention to the importance of such co-operation being arranged in a manner which carries out fully the spirit of the Charter and of the relationship agreements. They have been greatly concerned by certain recent cases in which committees appointed by the Council have, in effect, granted hearings to representatives of the specialized agencies and then proceeded to discuss, in the absence of such representatives and with little or no further consultation with them, the conclusions to be drawn from such hearings. Such an approach is a major departure from the manner in which co-operation within the United Nations family has previously been arranged on the basis of the relevant provisions of the Charter and the relationship agreements. The Charter provides for "participation" by the "representatives" of the specialized agencies in the "deliberations" of the Council and its commissions, and the agreements provide for such "participation" by "representatives" in "deliberations" as a matter of right; the inclusion of such a provision, which is reciprocal in its operation, was one of the basic conditions on which the agreements were concluded. The members of the ACC assume that the co-operation of the agencies concerned with the Special Committee will take the form of the participation in the deliberations of the Committee by their representatives provided for in the Charter and the agreements.

The ACC is keenly aware of the primary importance of wholehearted practical co-operation without undue emphasis on matters of organization and procedure, in making a success of the Development Decade. It ventures to hope that the emphasis of future discussions will be essentially upon the problem of securing a scale and continuity of effort, a wise and prudent use of the resources available, and an emphasis on matching resources to needs, which will give real substance to the hopes so widely entertained. If the Development Decade is to result in an effective intensification of international action, the provision, in both the common programmes and the budgets of the individual agencies, of resources adjusted to the targets which emerge as the Decade develops will be indispensable.

The peoples of the world will get out of the Development Decade what they and their governments put into it and the essential role in the matter of the members of the United Nations family is to serve as an instrument of co-operation through which the determination of the peoples of the world to secure "better standards of life in larger freedom" can be sustained and made effective. In fulfilling this role all members of the United Nations family will endeavour to play their full part.

EXTRACT FROM DOCUMENT E/3347/Rev.1, FIVE-YEAR PERSPECTIVE, 1960-1964

APPRAISALS REPORT

- (a) The appraisals are regarded as a step in the dynamic process of developing progressively the effectiveness of the United Nations and the specialized agencies as instruments for assisting the countries of the world to develop economically and socially at a greatly accelerated rate.
- (b) The appraisals are a further step in the development of co-ordination through which the respective programmes of the United Nations organizations have gained, over the years, in purpose, depth and strength. Such co-ordination has been achieved not by way of centralization, not by directives or orders, but by consultation and persuasion and by free co-operation in the efforts designed to improve the lot of men.
- (c) The appraisals are not to be understood as implying that the programmes and budgets of the United Nations or the specialized agencies should, or could, be determined outside the constitutional framework of each organization. They imply no attempt to interfere with the autonomy of the organizations within the United Nations family.
- (d) The appraisals do not require firm policy formulation looking ahead for the five-year period, or any rigid commitment in regard to specific programmes. The appraisal should in no way interfere with the flexibility which the organizations must have in determining their programmes from year to year.

SIXTEENTH WORLD HEALTH ASSEMBLY

A16/P&B/6 Add.1
20 May 1963

Agenda item 2.10

ORIGINAL: ENGLISH.

UNITED NATIONS DEVELOPMENT DECADE

Report by the Director-General

To complete the information contained in the Director-General's report on the United Nations Development Decade,¹ the following excerpt from the twenty-eighth report of the Administrative Committee on Co-ordination to the Economic and Social Council² is brought to the attention of the World Health Assembly:

Excerpt from document E/3765

II. UNITED NATIONS DEVELOPMENT DECADE

"3. In later sections, reference will be made to some of the major current international activities that are being undertaken - or expanded - within the framework of the United Nations Development Decade. At this point, the ACC wishes to record that the "programme of phased proposals for action with respect to the basic factors of economic growth", which is being submitted to the Council under the title United Nations Development Decade: Activities of the United Nations and related agencies in the immediate future has been drawn up as a co-operative effort by the staffs of all the organizations concerned. It also wishes to express its appreciation for the manner in which the Council's Special Committee on Co-ordination reviewed a draft of the above report at its recent meetings, has sought the fullest participation of all agencies in its work and particularly for providing the ACC the opportunity of commenting on its own preliminary findings in the matter of priority areas relating to the objectives of the Development Decade.

¹ Document A16/P&B/6

² The twenty-eighth report of the Administrative Committee on Co-ordination to the Economic and Social Council, document E/3765, will be distributed by the United Nations to its Member States.

4. As regards the priority areas referred to by the Special Committee, the ACC feels that, while the preparations for the United Nations Conference on Trade and Development call for special attention this year by the agencies directly concerned, this should not imply any lessening of efforts directed towards the development of human and natural resources, including agricultural production, as well as industrial development. Nor should the emphasis placed on development planning be understood as diminishing the importance of the programmes for current assistance in those fields.

5. The ACC has noted the suggestion of the Special Committee that a general framework of functional classifications be devised to include the activities of all members of the United Nations system under the Development Decade. Arrangements have been made for the preparation of a draft framework of this kind, and the ACC hopes to be able to report on the matter later.

6. It also noted that the Special Committee had mentioned in its preliminary findings a number of matters regarding which the ACC has already taken action; further progress on some of them is recorded in its present report: for example, section III (d) refers to co-ordination in the field and the role of Resident Representatives; co-operation in regard to the regional development planning institutes is mentioned in section IX, and some specific contributions that can be made to national development planning are suggested in sections V on education and training and VI on rural development."