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The World Health Organization

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ON 22 JULY 1946, AN HISTORIC DAY for public health and medicine, representatives of 61 nations signed the constitution of the World Health Organization, the first fully empowered international agency in public health.

The International Health Conference, which established the World Health Organization, was the first conference to be called by the United Nations. It is appropriate that this honor went to the field of public health and medicine and emphasized its role in the development of international peace and friendship. The World Health Organization is the first specialized agency of the United Nations to which every member of the United Nations has subscribed. More than that, nations not members of the United Nations were invited to the deliberations and were asked to join the Organization, and 10 such nations also signed the charter.

The nature and the purposes of the World Health Organization are well implied in its name. Deliberately discarded were more restrictive names, such as the International Health Organization or the Health Organization of the United Nations. For the first time emphasis was laid not upon quarantine and checking epidemics and other defensive measures, but upon positive, aggressive action toward health in its broadest sense. The preamble begins upon this note, declaring that "Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity." This standard of health is defined as one of the fundamental rights of every human being.

The history of the World Health Organization begins at the United Nations Conference on International Organization, which met in San Francisco on 25 April 1945. At the instigation of Brazil, the word "health" was introduced in applicable sections of Chapters IX and X of the Charter of the United Nations, dealing with international economic and social cooperation. The Conference also recognized the importance of health problems and their solution by approving unanimously a joint declaration proposed by

Brazil and China for the purpose of establishing an international health organization.

Plans for bringing into being such an organization were started shortly thereafter in several nations. In the United States, the Surgeon General of the Public Health Service established the Office of International Health Relations, and the Health Branch of the Division of International Labor, Social and Health Affairs of the Department of State was staffed with Public Health Service officers to work on this problem. In October 1945 the plans developed by these groups were examined by an advisory health group of 30 leaders in public health and civic activities, called together by the Department of State under the chairmanship of Dr. Thomas Parran. The interest of the United States in this field was impressively emphasized by the Senate, which in December 1945 passed a joint resolution requesting the President to take immediate steps toward the early convening of a health conference and the formation of an international health organization.

Attempts were made to call the International Health Conference through the sponsorship of several nations, but it was decided that this action should come through the United Nations. As a result, on 15 February 1946, the Economic and Social Council of the United Nations adopted a resolution calling for a Technical Preparatory Committee on Health, to meet in Paris and an International Health Conference, to be convened in New York in June 1946.

The Technical Preparatory Committee on Health met in Paris on 18 March 1946. The Committee was composed of 16 experts¹ named by the Economic and Social Council, accompanied by alternates and advisers. The Committee elected Dr. René Sand, of Belgium, as its chairman. During a three-week session, annotated agenda and proposals for an International Health Conference were prepared. Four basic docu-

¹ Bermann (Argentina), Sand (Belgium), de Paula Souza (Brazil), Chisholm (Canada), King and Sze (China), Cancik (Czechoslovakia), Shousha (Egypt), Cavailon and Leclainche (France), Mani and Katial (India), Martinez-Baez (Mexico), Evang (Norway), Kacprzak (Poland), Jameson and Mackenzie (United Kingdom), Parran and Doull (United States), and Stampar (Yugoslavia). The Union of Soviet Socialist Republics was invited but did not accept.

ments, submitted by France, the United Kingdom, the United States, and Yugoslavia, were considered as a basis for the development of a constitution for a single new international health organization. The documents submitted by France and Yugoslavia served in the development of the preamble, and the United States document was used as the basis for the remainder of the proposed constitution.

The proposals as agreed upon by the Technical Preparatory Committee were circulated among all members of the United Nations. A conviction was expressed that membership in the proposed World Health Organization should be open to all nations, and a resolution recommending participation as observers of nations not members of the United Nations at the International Health Conference was adopted. Dr. Parran, in his official report, concludes that the meeting was marked by a desire for the speedy development of a World Health Organization of broad scope and high purpose as a specialized agency to be brought into relationship with the United Nations.

The International Health Conference called by the Economic and Social Council of the United Nations met in New York City from 19 June to 22 July 1946. Delegations from all of the 51 United Nations took part in the deliberations; representatives from 13 non-member nations,² 3 allied control authorities,³ and 10 international organizations⁴ attended the meetings as observers. Dr. Parran, Surgeon General of the U. S. Public Health Service and chief delegate of the United States, was elected unanimously as president of the Conference. Vice-presidents were Sir Wilson Jameson, United Kingdom; Dr. Fedor G. Krotkov, Union of Soviet Socialist Republics; Dr. James Kofoi Shen, China; Dr. Geraldo H. de Paula Souza, Brazil; and Dr. André Cavaillon, France.

The preparatory work done before the Conference greatly facilitated the progress of the meeting. There were, in effect, only two major unresolved problems upon which no previous agreement had been reached. One of these was whether the Soviet Union would participate in the discussions and join the organization. This subject was resolved by the arrival of delegates from the Soviet Union, ably led by the Deputy Minister of Health, Dr. Krotkov. The second problem concerned regionalization and the role of existing in-

ternational organizations dealing in the field of public health. It had been decided in Paris that the Office International d'Hygiene Publique should be absorbed by the World Health Organization, and the same action was agreed upon regarding the fate of the Health Section of the League of Nations and of the epidemiologic intelligence of the health section of the United Nations Relief and Rehabilitation Administration. The Conference decided that the Pan-American Sanitary Bureau should be integrated with the Organization through "common action based on mutual consent."

It is worthy of note that although prolonged debate took place on several issues, particularly on regionalization and the admittance to membership of nations not members of the United Nations, and although close votes were recorded on some points of detail, the decisions reached on all matters were approved unanimously by the Conference. As a result, representatives of all of the United Nations signed the charter at the end of the meeting, China and the United Kingdom without reservation and the remainder of the nations *ad referendum*. Ten nations not members of the United Nations also affixed their signatures to the constitution. Nations which did not attend the Conference will be admitted as members when their application has been approved by a simple majority vote of the Health Assembly.

The World Health Organization will come into being when 26 members of the United Nations ratify the signatures of their delegates. For the period between the Conference and the first meeting of the Organization, the Conference set up an Interim Commission to conduct the essential business of the Organization and to work out details of agreements between the Organization and other international agencies. This Commission consists of 18 nations.⁵ Its temporary chairman was Dr. Krotkov; its present chairman, Dr. Andrija Stampar, of Yugoslavia; and its executive secretary, Dr. G. B. Chisholm, of Canada. Officers of the permanent organization will be selected at the first meeting of the World Health Organization, which will probably convene within the forthcoming year.

What can the world expect this organization to achieve? Examination of the constitution will show that the International Health Conference created a document that is idealistic, yet practical, and broad in scope, yet sufficiently specific. It has formed an organizational pattern that will enable the world to go far toward the fulfillment of the purpose, "the attainment by all peoples of the highest level of health."

⁵ Australia, Brazil, Canada, China, Egypt, France, India, Liberia, Mexico, Netherlands, Norway, Peru, Ukraine, United Kingdom, United States, Union of Soviet Socialist Republics, Venezuela, and Yugoslavia.

² Albania, Austria, Bulgaria, Eire, Finland, Hungary, Iceland, Italy, Portugal, Siam, Sweden, Switzerland, and Trans-Jordan. Afghanistan, Rumania, and Yemen were also invited to send observers but were not represented.

³ Germany, Japan, and Korea.

⁴ Food and Agriculture Organization, International Labor Organization, League of Red Cross Societies, Office International d'Hygiene Publique, Pan-American Sanitary Bureau, Provisional International Civil Aviation Organization, Rockefeller Foundation, United Nations Educational, Scientific and Cultural Organization, United Nations Relief and Rehabilitation Administration, and World Federation of Trade Unions.

The functions of the Organization are defined in Article 2 of its constitution:

In order to achieve its objective the functions of the Organization shall be: (a) to act as the directing and coordinating authority on international health work; (b) to establish and maintain effective collaboration with the United Nations, specialized agencies, governmental health administrations, professional groups, and such other organizations as may be deemed appropriate; (c) to assist governments, upon request, in strengthening health services; (d) to furnish appropriate technical assistance and, in emergencies, necessary aid upon the request or acceptance of governments; (e) to provide or assist in providing, upon the request of the United Nations, health services and facilities to special groups, such as the peoples of trust territories; (f) to establish and maintain such administrative and technical services as may be required, including epidemiological and statistical services; (g) to stimulate and advance work to eradicate epidemic, endemic, and other diseases; (h) to promote, in cooperation with other specialized agencies where necessary, the prevention of accidental injuries; (i) to promote, in cooperation with other specialized agencies where necessary, the improvement of nutrition, housing, sanitation, recreation, economic, or working conditions and other aspects of environmental hygiene; (j) to promote cooperation among scientific and professional groups which contribute to the advancement of health; (k) to propose conventions, agreements, and regulations, and make recommendations with respect to international health matters and to perform such duties as may be assigned thereby to the Organization and are consistent with its objectives; (l) to promote maternal and child health and welfare and to foster the ability to live harmoniously in a changing total environment; (m) to foster activities in the field of mental health, especially those affecting the harmony of human relations; (n) to promote and conduct research in the field of health; (o) to promote improved standards of teaching and training in health, medical, and related professions; (p) to study and report on, in cooperation with other specialized agencies where necessary, administrative and social techniques affecting public health and medical care from preventive and curative points of view, including hospital services and social security; (q) to provide information, counsel, and assistance in the field of health; (r) to assist in developing an informed public opinion among all peoples on matters of health; (s) to establish and revise as necessary international nomenclature of diseases, of causes of death, and of public health practices; (t) to standardize diagnostic procedures as necessary; (u) to develop, establish, and promote international standards with respect to food, biological, pharmaceutical, and similar products; (v) generally to take all necessary action to attain the objective of the Organization.

The work of the Organization shall be carried out by the World Health Assembly, composed of delegates representing the member nations and chosen from among persons most qualified by their technical com-

petence in the field of health. This Assembly shall meet annually, and each nation shall have one vote. Territories not responsible for the conduct of their international relations may be admitted as associate members, representatives being chosen from technically qualified members of the native population.

An Executive Board, consisting of 18 persons designated by as many member nations and holding office for three years, shall act as the executive organ of the Health Assembly and give effect to the latter's decisions and policies. The Secretariat shall comprise the Director-General and such technical and administrative staff as the Organization may require. This includes the establishment of committees in various technical and other fields, as determined by the Board. The Director-General shall have direct access to national health organizations, governmental or nongovernmental.

The Health Assembly shall define the geographical areas in which it is desirable to establish regional organizations to meet special needs, each an integral part of the Organization. The Organization shall be brought into relation with the United Nations as one of the specialized agencies referred to in Article 57 of the Charter of the United Nations.

The first tasks of the World Health Organization undoubtedly will concern themselves with the age-old scourges of man, accentuated by the devastation of the war. The need is urgent for caring for the sick and wounded, for feeding the hungry, controlling epidemic diseases, and providing basic environmental sanitation. By pooling the resources, knowledge, and skills of all nations, elimination of such diseases as malaria, tuberculosis, and syphilis can be achieved.

Beyond the immediate needs, the World Health Organization looks forward toward leading the struggle in each country, with the help and encouragement of all other countries, of long-term programs of health services to protect the people from ravages of disease and to insure to every individual a standard of health compatible with the technical achievements of the medical sciences. And, using the broad definition of health, the goal of application of technical achievements to all men is not limited to physical well-being. Mental hygiene, in helping man to adjust to his environment, must be used in combination with education to prevent the insanity of another total war and to destroy the basic causes of war.

As Dr. Parran said in closing the International Health Conference on 22 July 1946: "The World Health Organization is a collective instrument which will promote physical and mental vigor, prevent and control disease, expand scientific health knowledge, and contribute to the harmony of human relations. In short, it is a powerful instrument forged for peace."