

THE
SECOND TEN YEARS
*OF THE WORLD HEALTH
ORGANIZATION*

1958 - 1967



WORLD HEALTH ORGANIZATION

GENEVA

1968

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The designations employed and the presentation of the material in this volume do not imply the expression of any opinion whatsoever on the part of the Director-General concerning the legal status of any country or territory or of its authorities, or concerning the delimitation of its frontiers.

FOREWORD

THE scientific discoveries and practical achievements of the past decade have stirred the imagination and roused our expectations for the future. They have also served to confirm that health is purchasable.

This truth, increasingly accepted by modern societies, is well on its way to realization. To this result various emotions and trends have undoubtedly contributed. Amongst them we can recognize compassion for suffering, the feeling that life should be safeguarded, and the knowledge that disease is costly to the individual, the family and the community. Moreover, people are beginning to ask for health, and to regard it as a right.

One other fact adds strength to all these reasons. Health is part and parcel of economic and social development and man is the prime mover in that development. Without him development has no meaning. And without health, development has no hope of putting down its roots. Evident as these facts are, they are not easy to express in terms of the dividends that are yielded by expenditure on health. But it is equally difficult to express financially the benefit that has accrued to society from its vast investment in education.

The great increase in the work of the World Health Organization during the past ten years is, therefore, not surprising. It reflects both the interests and the needs of Member States, which the Organization assists at their request. WHO's expansion is also related to the increase in the programmes of all the United Nations agencies, with which it co-operates.

One important factor in WHO's increased activities is the steadily growing body of knowledge that has become available in matters of health and disease. In fact, WHO itself has found it necessary to bring about some measure of international co-ordination of research. Recognized overlaps have been reduced, and attention has been concentrated on the gaps and areas of weakness, where more knowledge is needed. This programme for planning and co-ordination

in research under WHO's auspices began only in 1960, although the Organization had earlier been a supporter of a number of investigations.

The development of WHO, and the now general recognition of the importance of health in any efforts for social and economic improvement, are indeed a landmark of achievement. But we cannot be satisfied and rest from our labours. Far from it. Even though multinational efforts are supplemented by large bilateral assistance programmes, the needs of the developing countries are still very great. Many new health problems about which we have much to learn require international action, and may affect the developed countries also. But the hope and expectation that were our main support in earlier years have been replaced by a positive feeling of confidence that combined efforts can achieve results unattainable by individual action over a similar period of time.

The priority needs of Member countries, collectively and separately, will continue to shape the WHO programmes of the future, as can be seen from the published programme and budget estimates for 1968 and 1969.

It is safe to forecast, however, that three areas will be singled out for particular attention. First, there is the education and training of personnel, the objective being not only to increase numbers, but to improve the content of curricula and to adapt them more specifically to ascertained national needs. Secondly, there is the demand for collaboration in the acquisition and communication of knowledge. This is of crucial importance for the expansion and success of many research and kindred activities, whether they concern the control or eradication of communicable diseases, the incidence of cancer and cardiovascular disease, the more efficient and effective organization of health services, or the education of health personnel. And, finally, there is the ever-present demand for direct assistance to countries in the development of health services, either in general — including the development of basic health services — or in more particular fields, ranging from mass campaigns for the eradication of malaria and smallpox to the establishment of laboratories for the control of pharmaceutical products.

Today is the twentieth anniversary of the World Health Organization. It is an appropriate occasion for rejoicing. The Organization is itself a sign of the will of the nations of the world to act together, across national bound-

aries, in order to protect and improve health. Every year that passes proves more clearly their desire to work collectively and in comradeship for the solution of worldwide health problems, and to bring assistance to individual countries in their need.

Today also provides an opportunity to review what has been done already and, looking ahead, to see the next steps on the road before us.

This book, The Second Ten Years of the World Health Organization, is the outcome of our stocktaking and a stimulus to our further endeavours. It is also a vivid and inspiring contribution to our celebrations. I have pleasure in presenting it to you.

Geneva, 7 April 1968

A handwritten signature in black ink, appearing to read 'T. G. Anderson', written in a cursive style. The signature is positioned above the printed title 'Director-General'.

Director-General

MAP 1. WHO REGIONAL OFFICES AND THE AREAS THEY SERVE

