

Speech by Dr. Aly Tewfik Shousha Pasha
Chairman of the Executive Board of the
World Health Organization.

Your Excellency, Ladies and Gentlemen,

As many of you may know I have been so fortunate as to have had good deal of recent and practical experience in international health matters and I now have honour of serving as Chairman of the Executive Board of the World Health Organization. I was present at the Preparatory Commission in Paris in the spring of 1946, when the constitution of the WHO was drafted, at the International Health Conference in New York in the summer of that same year when over 60 nations signed the constitution, and I was a member of the Interim Commission of WHO. This Interim Commission lasted two years, a great deal longer than any one expected, but we all gained valuable experience in the techniques of international cooperation and agreement. In July 1948 I attended the First World Health Assembly. I now address you as Chairman of the Executive Board and not as a member of the Egyptian delegation. I shall, no doubt, have the opportunity of speaking in this latter capacity, later on.

The Executive Board has had the task of implementing the decisions taken by the First Health Assembly - the 1949 program of WHO which is now starting. You will be hearing more about this program from Dr. Goodman acting Assistant Director-General for operations, who will tell you something about how the program will affect this region.

You will note that this is already the second practical application of regionalisation to the operations of WHO. The first took place on 1 January 1949 when the Regional Office for South East Asia started its work. A third is not far off, the Pan-American Sanitary Organization should soon be integrated into WHO as the Regional Organization for the American Region and a fourth is in the wind; the Board at its forthcoming session will consider a proposal to establish an African Regional Organization. The same principles have been applied to the European Region. Why has this young WHO just setting out on its first years programme - WHO was formally established only on 1 Sept. 1948 - started to set up regional organizations? Surely because this is a logical application of certain straightforward principles.

Health is not something which can be done to people, it must be done for themselves by themselves. The WHO exists to help all peoples to achieve real health and it can and will as soon as possible assist the National Health Administrations, strongly backed up by the peoples they serve, to achieve this end. The WHO cannot do this by itself and without the active cooperation of the Health Administrations any more than the Health Administrations can do it for their peoples unless the people take an active part. If Health Administrations need assistance in organization then the WHO will help them. The Regional Organizations, such as this one, present a splendid opportunity for developing full scale cooperation within the region, to implement the world programs of WHO and to solve problems of local regional importance.

This brings me to consider certain problems which are greatly exercising the minds of the Health Officers of this region. Agricultural development and increases in productivity are retarded because the farming population is by no means as healthy as it could be and should be. The farmer who suffers from schistosomiasis, Trachoma or other chronic and debilitating conditions can never be the backbone of real agricultural development, and food shortage is constantly encouraging debility and reducing enterprise. Also, we cannot look forward to successful industrialisation until we have a reasonably healthy farming population, because industrialisation will attract away from the land into the factories, the younger and healthier people. Our last position would then be worse than the first. I may say that full and complete understanding and coordination on these matters exists between the WHO and the Food and Agriculture Organization of the United Nations. This point of view and the general importance of good health in all economic planning are of major significance to the work of the Economic Commission for the Middle East, in which we all place such great hopes for the future welfare and prosperity of our countries. In this region, anyway, health must come in the forefront of all our planning.

The needs are, of course, much greater than the budget available. This position will not be unusual to you all, in your own work and it is certainly true on the world scale.

The Health Assembly approved a budget of about \$ 5,000,000 for programme conservatively estimated to cost over \$ 7,000,000 . So don't be disappointed at the amounts which will be available for work in the region in 1949. In any case a \$ 7,000,000 budget would have been inadequate to the needs and we must hope that a much more liberal figure will be available for the 1950 program, if the WHO is to make a really significant contribution to the solution of the problems of health facing our world today. As I have said there will also be ample opportunities within the region for mutual assistance.

In conclusion, I would like to say that I am sure you will show the same magnificent spirit of mutual understanding and achieve cooperation for better health which has always been a feature of WHO , whether in the Interim Commission, the Health Assembly or the Executive Board. After all everyone here is seeking the same goal, so there is no need to differ and I am sure we will make a thoroughly worthwhile contribution to the health of the peoples of our Region.

I now conclude my remarks as Chairman of the Executive Board and will speak from now on as a member of the Egyptian Delegation.

Your Excellency, Ladies and Gentlemen, thank you.
