



REGIONAL OFFICE FOR THE WESTERN PACIFIC
BUREAU RÉGIONAL DU PACIFIQUE OCCIDENTAL

REGIONAL COMMITTEE

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21 July 1975

Twenty-sixth session
Manila
1-6 September 1975

ORIGINAL: ENGLISH

Supplementary agenda item 1

PARTICIPATION IN THE REGIONAL COMMITTEE
OF MEMBERS NOT HAVING THEIR SEAT OF GOVERNMENT
IN THE REGION

The Regional Director has the honour to bring to the attention of the Regional Committee, for its consideration, resolution WHA28.37 adopted by the Twenty-eighth World Health Assembly (Annex 1), together with document A28/21 (Annex 2) and the summary record of the discussions of Committee B of the Health Assembly which led to the adoption of resolution WHA28.37 (Annex 3).

The Regional Director also draws the attention of the Committee to Article 47 of the WHO Constitution, dealing with the representation of Members, Associate Members and territories in Regional Committees, as well as to resolution WHA2.103, the text of which is to be found in Basic Documents, twenty-fifth edition, at pages 20, 21 and 22.

RESOLUTION OF THE WORLD HEALTH ASSEMBLY

TWENTY-EIGHTH WORLD HEALTH ASSEMBLY

WHA28.37

28 May 1975

PARTICIPATION IN THE REGIONAL COMMITTEE FOR AFRICA OF
MEMBERS NOT HAVING THEIR SEAT OF GOVERNMENT WITHIN THE REGION

The Twenty-eighth World Health Assembly,

Having considered resolution AFR/RC24/R8 on the participation in the Regional Committee for Africa of Members not having their seat of government within the Region,

1. DECIDES to give effect to operative paragraph 4 of resolution AFR/RC24/R8 and to request the Director-General and the Regional Director to act accordingly;
2. REQUESTS the Director-General and the Regional Directors to bring these resolutions to the attention of other Regional Committees.

Twelfth plenary meeting, 28 May 1975
A28/VR/12

ANNEX 2

A28/21

27 March 1975

TWENTY-EIGHTH WORLD HEALTH ASSEMBLY

Provisional agenda item 3.12

PARTICIPATION IN THE REGIONAL COMMITTEE FOR AFRICA
OF MEMBERS NOT HAVING THEIR SEAT OF GOVERNMENT
WITHIN THE REGION

At its twenty-fourth session, held in Brazzaville in September 1974, the Regional Committee for Africa adopted resolution AFR/RC24/R8 on the participation of colonial powers in Regional Committee meetings (Annex A to this document).

In its fourth operative paragraph, the Regional Committee requested the Regional Director to forward this resolution to the Director-General with the request that he transmit it to the Twenty-eighth World Health Assembly for it to take such action that will put an immediate end to the participation of any colonial power in the meetings of the Regional Committee for Africa.

The Director-General is accordingly transmitting this resolution to the World Health Assembly, together with the summary records of the discussion on this subject in the Regional Committee (Annex B to this document) at its third and fifth meetings.

The Director-General draws the attention of the World Health Assembly to Article 47 of the Constitution, dealing with the representation of Members, Associate Members and territories in Regional Committees, as well as to resolution WHA2.103, the text of which is to be found in Basic Documents, twenty-fourth edition, at pages 20, 21 and 22.

PARTICIPATION OF COLONIAL POWERS IN
REGIONAL COMMITTEE MEETINGS

The Regional Committee,

Recalling United Nations General Assembly resolution 3118 (XXVIII) requesting specialized agencies to take necessary steps to ensure the representation of the national liberation movements in meetings of specialized agencies;

Recalling further World Health Assembly resolution WHA27.37 calling on the Director-General to take the necessary steps to invite representatives of the national liberation movements recognized by the Organization of African Unity to attend the meetings of WHO in an observer capacity;

Noting that under World Health Assembly resolution WHA2.103 colonial powers purporting to represent the interests of countries and certain territories in the African Region may participate as Members of the Regional Committees;

Mindful that the resulting situation of a country or territory being represented at the Regional Committee by both a liberation movement and a colonial power is highly anomalous at this juncture of African history,

1. REITERATES its unreserved support for resolution WHA27.37;
2. COMMENDS the Director-General and the Regional Director for their speed in implementing resolution WHA27.37;
3. DISAPPROVES of the participation of any colonial power as a Member of the Regional Committee for Africa; and
4. REQUESTS the Regional Director to forward this resolution to the Director-General with the request that he transmit it to the Twenty-eighth World Health Assembly for it to take such action that will put an immediate end to the participation of any colonial power in the meetings of the Regional Committee for Africa.

MINUTES OF THE THIRD MEETING

2. DECISIONS OF REGIONAL INTEREST TAKEN BY THE WORLD HEALTH ASSEMBLY AND THE EXECUTIVE BOARD:
Item 7 of the Agenda

Resolutions of regional interest adopted by the Twenty-seventh World Health Assembly and the Executive Board at its fifty-third and fifty-fourth sessions: Item 7.1 of the Agenda
(document AFR/RC24/4)

The REGIONAL DIRECTOR invited the Committee to make comments and recommendations on a number of resolutions adopted by the Twenty-seventh World Health Assembly and by the Executive Board at its fifty-third and fifty-fourth sessions.

. . .

Mr NYANG'ANYI (United Republic of Tanzania) noted with satisfaction the efforts made by the Regional Director in trying to get liberation movements to attend the Regional Committee. Press Release AFR/RCM/74.004 gave the erroneous impression that delegations from 11 African liberation movements were attending the present session, but all were agreed that their presence would have been a historical event in the struggle of the African peoples for their dignity and rightful place in their motherland. He urged the Secretariat and the Regional Office to look into the possibilities of facilitating the presence of delegations from the liberation movements at the next Regional Committee in Cameroon.

At that point in their struggle, the liberation movements needed aid more than ever before, but that aid should be handled with greater caution. He deplored the lack of coordination between international agencies helping the liberation movements. Certain United Nations agencies were ready to procure drugs and equipment for them and WHO had to give technical clearance with regard to the appropriateness of the drugs and equipment. Sometimes the liberation movements were not satisfied because vital items were cancelled or mishandled.

Finally, he drew attention to the incompatibility of inviting the delegate of France as the representative of the Comoro Islands as well as a delegate from the liberation movement of that territory.

Dr MAHLER, Director-General, confirmed that, in accordance with the provision of the Constitution of WHO and the relevant Rules of Procedure, France was invited to attend Regional Committee meetings. Barring any changes to the existing provisions, the Secretariat had to adhere to that procedure. Furthermore, according to the resolutions taken, and because the liberation movement of the Comoro Islands was recognized by the Organization of African Unity, an invitation was to be sent to it. Whatever interpretation was laid on the situation, the Secretariat had to act according to the provisions of the Constitution and pertinent Rules of Procedure. Hence, invitations would be extended to both the Government of France and the liberation movement.

Mr NYANG'ANYI (United Republic of Tanzania) said that he appreciated the difficulties arising out of that situation. He asked whether a decision taken at the Regional Committee superseded one taken at WHO Headquarters on such matters. It was not clear to him whether the Regional Committee made recommendations to the World Health Assembly or the Executive Board on any issue presenting difficulties.

Dr MAHLER, Director-General, quoted the relevant passage of Basic Documents, page 21, reading as follows:

"2. Those States Members not having their seat of government within the region, which (a) either by reason of their Constitution consider certain territories in the region as part of their national territory, or (b) are responsible for the conduct of the

Annex B

international relations of territories or groups of territories within the region, shall participate as Members of the regional committee, in which case they shall have all the rights, privileges and obligations of Member States in the region, but with only one vote for all the territories or groups of territories in the region, as defined in (a) and (b) above;"

Invitations were not issued by Headquarters but by the regional organization, and the latter had obviously been guided by the relevant resolutions of the World Health Assembly and by the constitutional provisions. It was, of course, possible for the Regional Committee to pass a resolution that would be passed in turn to the World Health Assembly. In the light of that resolution, the Assembly might adjust its attitude towards the problem under consideration.

Mr NYANG'ANYI (United Republic of Tanzania) formally notified the Secretariat of his delegation's intention to submit such a resolution to the Committee.

. . .

Draft resolution AFR/RC24/WP/8: Participation of colonial powers as Members of the Regional Committee for Africa

Dr KEITA (Mali), French-language Rapporteur, read out the draft resolution.

Dr ONYANGO (Kenya) proposed that the words "adopted by the Twenty-seventh World Health Assembly", in the first operative paragraph, be deleted.

The REGIONAL DIRECTOR explained that the words "adopted by the Twenty-seventh World Health Assembly" had been added simply for the benefit of readers who did not understand what was meant by "WHA27". However, if the Committee preferred, that clause would be deleted.

Dr PAPA GAYE (Senegal) commented that the explanation was already given in the second paragraph of the preamble, and there was no need to repeat it.

The CHAIRMAN said he felt the Committee would prefer to delete the words "adopted by the Twenty-seventh World Health Assembly" at the end of the first operative paragraph.

It was so decided.

Decision: The draft resolution, as amended, was adopted.

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TWENTY-EIGHTH WORLD HEALTH ASSEMBLY
COMMITTEE B

A28/B/SR/7

EXTRACT FROM THE PROVISIONAL SUMMARY RECORD OF THE SEVENTH MEETING
FRIDAY, 23 MAY 1975

3. PARTICIPATION IN THE REGIONAL COMMITTEE FOR AFRICA OF MEMBERS NOT HAVING THEIR SEAT OF GOVERNMENT WITHIN THE REGION: Item 3.12 of the Agenda (Document A28/21)

Mr GUTTERIDGE (Director, Legal Division), introducing the item, said that at its twenty-fourth session the Regional Committee for Africa had adopted resolution AFR/RC24/R8, dealing with the participation of colonial powers in Regional Committee meetings, and *inter alia*, requesting that the resolution be transmitted to the Twenty-eighth World Health Assembly for it to take action that would put an end to the participation of any colonial power in the meetings of the Regional Committee for Africa. That resolution was annexed to document A28/21, which also bore an introductory note by the Director-General; he called attention to the fourth paragraph of that note, which referred to the constitutional and other provisions affecting the matter.

Miss BOA (Ivory Coast) explained that the purpose of resolution AFR/RC24/R8 was to resolve a contradiction between two past resolutions of the Health Assembly. Resolution WHA2.103 authorized colonial powers representing the interests of countries and territories in the African Region to participate in Regional Committee meetings as Member States. On the other hand, resolution WHA27.37 requested the Director-General to take the necessary steps to invite the representatives of national liberation movements recognized by the Organization of African Unity to attend the meetings of WHO in an observer capacity. The second resolution cancelled the first, since it was unthinkable that one country should be represented by two delegations. She appealed to all delegations anxious for the rapid liberation of countries and territories under colonial administration to act in conformity with resolution 3118 (XXVIII) of the United Nations General Assembly (which requested all specialized agencies to take measures to ensure the representation of national liberation movements at their meetings) and to support unanimously the resolution adopted by the Regional Committee for Africa.

Mr FINDLAY (Sierra Leone) said that resolution WHA27.37 had had the unreserved support of the Regional Committee for Africa, at its twenty-fourth session, when representatives had also expressed their disapproval of the participation in the Regional Committee of any colonial power. In 1949, when resolution WHA2.103 had been adopted, nearly all countries in the African Region had been under colonial domination. Today, however, the vast majority were sovereign States. It was a matter of regret that resolution WHA2.103 had not been expunged or amended with the passage of time. However, as it still formed part to the decisions of the Assembly, both the Director-General and the Regional Director continued to be bound by it. His delegation therefore moved the amendment of resolution WHA2.103 by the deletion of paragraphs 2 and 3(4) and the consequent renumbering of the remaining paragraphs. He also appealed to the Committee to approve the resolution that had been adopted by the Regional Committee.

Mr CHU Hsing-kuo (China) said that the prolonged, merciless plunder of Africa by the colonial powers had aroused the vehement resistance of the African people, who had finally won their independence. The resolution of the Regional Committee for Africa had been fully justified and had the support of his delegation.

Dr HASSAN (Somalia) also agreed with the resolution, but thought that its scope should be widened. Some parts of Africa were in other WHO Regions, and colonial powers still represented certain territories in Regional Committees. He proposed that operative paragraph 3 of resolution AFR/RC24/R8 should be amended to read "a Regional Committee" rather than "the Regional Committee for Africa" and operative paragraph 4 to read "in the meetings of Regional Committees" rather than "in the meetings of the Regional Committee for Africa".

Dr TOURE (Senegal) hoped that the voice of France - as the power principally concerned by the Regional Committee resolution, in respect of the Comoro Archipelago and Réunion - would be heard in the debate, which would benefit by France's deep understanding of colonial problems.

Professor LISICYN (Union of Soviet Socialist Republics) expressed his support for resolution AFR/RC24/R8 and for the amendments proposed by the delegate of Somalia.

Dr TARIMO (United Republic of Tanzania) said that the aim of the Regional Committee's resolution had been to rationalize an anomalous situation brought about by the changes since 1949, when resolution WHA2.103 had been adopted. He supported the amendments proposed by the delegate of Somalia, because it would make applicable to the whole world a resolution originally intended to apply only to the African Region.

Dr WRIGHT (Niger) thought that the time had come when the colonial powers should realize that they were out of place in meetings of Regional Committees. Countries that had attained independence were mature enough to take care of their own interests. He supported the resolution as it stood but the amendments proposed by the Somali delegate placed him in a quandary as they extended a regional resolution to an interregional scale. He agreed with the spirit of the amendments and could support them if other persons or other committees felt that the scope of the original resolution should be widened.

Mr PARROTT (United Kingdom of Great Britain and Northern Ireland) expressed concern regarding the procedural aspects of the discussion. The agenda item under consideration clearly referred to participation in the Regional Committee for Africa. The Constitution of WHO dealt not with colonial powers but rather with countries responsible for the conduct of the international relations of territories or groups of territories, and some territories in that situation would resent the term "colony" being applied to them. In accordance with the Constitution and decisions of the Health Assembly, a country that had responsibility for a territory was allowed to participate in Regional Committees, and that was recognized in the third preambular paragraph of the resolution under discussion. The agenda item under discussion would take on a different complexion if amendments were to be made to a resolution already adopted by the Regional Committee for Africa. He felt that some guidance was needed from the secretariat on whether the proposed amendments and expansion of an agenda item were in order.

Mr GUTTERIDGE (Director, Legal Division) said that the conditions for the participation in Regional Committees of territories that were not responsible for the conduct of their international relations and were not Associate Members were laid down in resolution WHA2.103, adopted on 30 June 1949. In accordance with Article 47 of the Constitution, the nature and extent of the rights and obligations of those territories should be determined by the Health Assembly in consultation with the authority responsible for the international relations of those territories and with the Member States in the region.

Operative paragraph 1 of the resolution, interpreting Article 47, defined the States Members in a region; operative paragraph 2 prescribed the arrangements for participation of States Members not having their seat of government within the region. Those provisions had, of course, been adopted in the light of the conditions prevailing at the time, and the Assembly could, if it so desired, modify them by a further resolution.

The Committee had before it two proposals. The first was that resolution WHA2.103 should be amended by the deletion of operative paragraphs 1 and 2 and operative subparagraphs 3(1), 3(3) and 3(4), so that the resolution would relate to Associate Members only. At the present juncture and having regard to the comments made by the representative of the United Kingdom, since the participation of the territories in question in Regional Committees was governed by a Health Assembly resolution, the modification of the arrangements for their participation could hardly be considered in respect of one Regional Committee in isolation from the other Regional Committees. It could therefore be considered to be within the competence of Committee B to examine that question in a wider framework if it chose to do so.

The second proposal, put forward by the delegate of Somalia, was that resolution AFR/RC24/R8 should be modified, but it was doubtful whether the Committee could modify a Regional Committee resolution except by recommending to the World Health Assembly a new draft resolution to that effect. If the Regional Committee resolution were rather recast as a new resolution, the difficulty would then be that as long as resolution WHA2.103 remained in force the two resolutions would be in apparent conflict, although the latter resolution could be presumed to overrule the earlier. Members might, however, deem it preferable to find a way of avoiding such a conflict. If the intention was to abrogate the provisions of operative paragraph 2 of resolution WHA2.103, then it might be advisable to consider the possibility of undertaking a re-examination of WHA2.103.

Mr SCHUMANN (German Democratic Republic) said that he supported the resolution AFR/RC24/R8 and the amendment proposed by Somalia. In the event of a conflict of interpretation between that resolution and resolution WHA2.103, there could be no doubt in his view that the principle lex posterior derogat priori applied.

Dr CAMARA (Guinea) said that he supported resolution AFR/RC24/R8, which had been adopted unanimously at Brazzaville, and the amendments proposed by the delegate of Somalia, which were intended to give it universal application.

Dr HASSAN (Somalia) thought it could be assumed that a later resolution overrode ipso facto the provisions of any earlier resolution apparently in conflict with it. On that basis he urged the acceptance of his amendments to resolution AFR/RC24/R8 so as to avoid the duplication of work that would be necessary if other Regional Committees had to submit similar draft resolutions in respect of their own regions, as would certainly be the case in the Eastern Mediterranean Region.

Dr SACKS (Secretary) explained that the amendment proposed by Sierra Leone referred, not to any constitutional text, but to resolution WHA2.103 which had been adopted by the Second World Health Assembly. Resolution AFR/RC24/R8 was a resolution of the Regional Committee for Africa transmitted as such for submission to the current Health Assembly; any decision with regard to it would have to be taken by a Health Assembly resolution based on the discussions in the Committee.

Mr FINDLAY (Sierra Leone) said that the adoption of the amendment he had proposed to resolution WHA2.103 would remove the legal problems that had been raised. In addition, the resolution AFR/RC24/R8 should also be approved.

Dr OULD BA (Mauritania) supported the resolution which had been adopted unanimously by the Regional Committee for Africa and the amendment proposed by the delegate of Somalia because it would simplify the task of the Assembly and avoid the possibility of the Committee's having to consider other similar resolutions in future years. Territories not responsible for their international relations could no longer be represented by countries outside their region, but only by their own leaders or liberation movements. He proposed that the secretariat be asked to draft a text that would express the consensus of the Committee. Operative paragraph 2 of resolution WHA2.103 should in any case be amended in order to avoid possible misunderstanding in the future. The Assembly could also treat resolution AFR/RC24/R8 as a draft resolution proposed by the Regional Committee for Africa and adopt it separately. Alternatively, both matters could be dealt with in a single draft resolution.

Dr ADESUYI (Nigeria) said that the question could be dealt with step by step. The Committee should first approve the resolution of the Regional Committee; it should then forward the resolution to the Director-General for transmission to the Health Assembly as requested in operative paragraph 4 of the resolution, and afterwards deal with the question of the amendment of resolution WHA2.103.

Mr PARROTT (United Kingdom of Great Britain and Northern Ireland) said he supported the proposal made by the representative of Mauritania that the secretariat be invited to prepare a draft resolution that would amend resolution WHA2.103, if that was the general desire. Action was, however, called for in order to avoid prejudicing the rights of certain territories that were not yet responsible for their international relations, some of which did not wish to assume that responsibility at that stage. Furthermore, since the resolution before the Committee related to the African Region only, it might be more courteous to allow other Regional Committees to consider the question before making the resolution applicable to all parts of the world.

Mr NOZIGLIA (United States of America) reminded the Committee that the agenda item under consideration related to Africa alone. What the Committee should find was a simple means of satisfying the wishes expressed by the Regional Committee for Africa. There was no item on the agenda under which the Committee could consider the position of the other regions nor did it have information regarding their views on the question. While it would be easy to meet the wishes of the African Region, the amendment of resolution WHA2.103, which would affect all the other regions, would be premature.

Dr DOLGOR (Mongolia) said that he supported the resolution of the Regional Committee. The problem was not, however, exclusive to the African Region. He therefore also supported the amendment proposed by the delegate of Somalia and suggested that a small working group be set up to draft a suitable resolution.

Dr KEITA (Mali) said that the countries of Africa south of the Sahara had taken a firm decision in resolution AFR/RC24/R8 and asked the Regional Director to forward their case to the Health Assembly. While the amendments that had been proposed were laudable, to try to extend the scope of the original resolution might be to hazard what had already been gained for Africa, particularly if an attempt was made to reword it so that it would, in effect, embrace liberation movements the world over, some of which were not even recognized in their own regions. Resolution AFR/RC24/R8 referred only to liberation movements recognized by the Organization of African Unity, and he considered that it should be voted upon without change.

Miss BOA (Ivory Coast) expressed her agreement with the delegates of Nigeria and Mali. It was on the Brazzaville resolution, which, recalling resolution WHA27.37, applied only to liberation movements recognized by the OAU, that the Committee and the Health Assembly should take their decision.

The DIRECTOR-GENERAL said that the Regional Committee resolution asked the Health Assembly to give effect to the wishes of the African Region by a resolution that would permit their implementation by the Regional Director and the Director-General. Two proposals had been put forward during the debate in the Committee. One group of speakers wanted the terms of the resolution to be made applicable to all the other regions. That wish could be met by modifying the Regional Committee resolution along the following lines. The resolution could begin with the words, "The Twenty-eighth World Health Assembly" replacing the words "The Regional Committee". In the second preambular paragraph, the words "and the League of Arab States" would be inserted immediately after the words "Organization of African Unity" in order to make the resolution consistent with other resolutions; in the third preambular paragraph, the words "in the African Region" would be deleted; and in the fourth preambular paragraph the words "at this juncture of African history" would also be deleted. Operative paragraph 1 would remain unchanged; operative paragraph 2 would be deleted; operative paragraphs 3 and 4 would be merged in a new operative paragraph 2 to read: "DISAPPROVES of the participation of any colonial power as a Member of all Regional Committees and DECIDES to put an immediate end to the participation of any colonial power in Regional Committees"; and a new operative paragraph 3 would read "DECIDES FURTHER that resolution WHA2.103 shall stand amended accordingly".

The proposal made by a second group, including the United Kingdom and other delegations, would be that the resolution should remain applicable to the African Region only; that proposal could be expressed in a resolution stating that the Assembly took note of the resolution adopted by the Regional Committee for Africa and decided to give immediate effect to the content of that resolution.

Mr NOZIGLIA (United States of America) suggested that there was a third possible course of action for the Committee, which could be expressed in a resolution stating that the Health Assembly noted with approval the resolution of the Regional Committee for Africa, requested that the Assembly give effect to that resolution and that the Director-General should bring that resolution to the attention of other Regional Committees, inviting them to take such action as they deemed to be in consonance with it.

Mr PARROTT (United Kingdom of Great Britain and Northern Ireland) supported the United States suggestion. He drew attention to the fact that if the first alternative resolution suggested by the Director-General were approved there might be a risk of putting an immediate end to the presence of any "colonial power" - a term that was not clearly defined - at the meetings of any Regional Committee. That, however, was a question of drafting, and he would welcome the opportunity to see a written draft.

Dr OULD BA (Mauritania) said that since other regions had not yet studied the question raised in the resolution of the Regional Committee for Africa, he hoped that the Committee would approve the resolution as it stood.

The meeting was suspended at 4.20 p.m. and resumed at 4.50 p.m.

At the CHAIRMAN's request, Dr VALLADARES (Venezuela) (Rapporteur) read out the following draft resolution, which had been prepared to take into account the various views expressed:

The Twenty-eighth World Health Assembly,

Having considered resolution AFR/RC24/R8 on the participation in the Regional Committee for Africa of Members not having their seat of government within the Region,

1. DECIDES to give effect to operative paragraph 4 of resolution AFR/RC24/R8 and requests the Director-General and the Regional Director to act accordingly; and
2. REQUESTS the Director-General and the Regional Directors to bring these resolutions to the attention of other Regional Committees.

Decision: The draft resolution was approved.