

MINUTES OF THE FIRST MEETING OF THE
SUB-COMMITTEE ON PROGRAMME AND BUDGET

City Hall
Wednesday, 16 September 1959 at 2.30 p.m.

CHAIRMAN: Dr. C.K. Chang

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The Sub-Committee on Programme and Budget composed of representatives from Cambodia, China, Federation of Malaya, Japan; New Zealand, Philippines, United Kingdom and Viet Nam met on Wednesday, 16 September 1959 under the chairmanship of Dr. C.K. Chang, with Mr. A. Saita, WPRO Administration and Finance Officer, as Secretary. Representatives from Australia, Korea, UNICEF and some of the inter-governmental and non-governmental organizations in official relations with WHO were also present.

- 1 REVIEW OF THE REGULAR PROGRAMME AND BUDGET FOR 1960 IN THE LIGHT OF PRESENT BUDGETARY ADJUSTMENTS AND CONSIDERATION OF AMENDMENTS PROPOSED BY MEMBER COUNTRIES: Item 1 of the Agenda (Document WP/RC10/3)

The SECRETARY stated that the 1960 programme and budget had been modified for the following reasons: (1) The Twelfth World Health Assembly had established the 1960 budget at \$16 330 900. Comparison of this figure with that for 1959 would show that there was an increase of \$1 247 714, or 8.27%. Following the decision of the Health Assembly the Regional Director was given a firm allocation which amounted to \$1 456 100. This represented an increase of \$132 564, or approximately 10%, over the 1959 allocation. The revised target figure given to the Regional Director necessitated certain modifications to the programme and budget approved last year. (2) A number of governments had requested revision of their programme requests and (3) it had been necessary to recast the programme. At the time of planning the programme, two years in advance, a technical expert or a fellowship may have been requested. Certain questions then arose, such as where such experts would come from, from the United States of America, United Kingdom, countries in Europe or from countries closer to the Region. It was also difficult to know how soon they would be available, for how long,

and how many dependents they would have. Therefore, at the time of planning the Organization had to develop budgetary financial techniques to deal with these problems and a budget average was therefore used. Such needs recosting. Also there might be increases in costs in the time between which a programme request is made and implemented. The Secretary cited ~~as an~~ example fellowships of increased costs. The Regional Committee at previous sessions had emphasized the importance of intra-regional fellowships. This was indeed a very wise decision on the part of the Committee because a fellowship in the United States of America now cost considerably more than it did when the 1960 budget was set up. A six-month fellowship in the United States of America formerly cost an average of \$3500, however, as the cost of living had risen, this figure had risen to \$4200. A twelve-month fellowship in the United States of America formerly cost \$5500 but now cost \$6200. In the case of Europe a six-month fellowship cost \$2600, almost \$1500 less than one in the United States of America, while a twelve-month fellowship in Europe cost \$4000. If, on the other hand a fellow was sent for study within the Region, the cost for six months would be between \$2000 and \$2500 and for twelve months \$2500 to \$3000. These figures were, of course, only averages as they would depend on the status of the fellow, whether in travel or resident in a college.

The SECRETARY stated that the modifications which had had to be made were contained in the document before the Committee.

Dr. YEN (China) referred to the changes in the posts of the regional advisers and asked whether the two posts of regional adviser in tuberculosis and regional adviser in venereal disease and

treponematoses had been combined for reasons of economy.

The SECRETARY replied that the reasons were not budgetary. The changes made to the staffing pattern of the Regional Office depended on the judgement of the Regional Director who altered the pattern in accordance with developments taking place in the programme as a result of requests for assistance from governments.

Mr. SAITO (Japan) referred to his Government's request for a consultant for the deaf and mute programme. Since the budget was effective from April to March Japan would like to have the consultant during this fiscal year. He understood there was some difficulty in getting the services of any of the three consultants they wanted in 1959 but they could come in 1960. He asked if it would be possible to advance to 1959 some of the fellowships in the 1960 budget so that the consultant could come before the end of the fiscal year in March of 1960.

The SECRETARY suggested that the Japanese representative was referring to the project appearing in the supplementary list of projects, document WP/RC10/4 Add.1, under Japan, where a consultant for the care of the deaf and mute was noted. The Regional Director was aware of this project and of the difficulties of implementing it due to lack of funds but every effort would be made to implement it before March 1960 so that the Japanese Government would not have any difficulty in spending its own counterpart funds on the project.

The SECRETARY then stated that several requests for modifications had been received from governments after the document had been prepared.

He referred in particular to the requests from China and the Philippines. China had requested the Regional Director to add the services of a trachoma consultant for eight months in 1960, twelve months for a mental health nurse and a twelve-month epidemiologist/statistician. In order to finance these new requests the Government had agreed to sacrifice fellowships in tuberculosis, health physics, two consultants for the Institute of Public Health and the services of a venereal disease consultant which were cut from six to three months. With these suggested revisions there would be sufficient money to cover the new requests.

The Philippine Government had requested the continuation of the services of the mental health consultant throughout 1960 and had agreed to sacrifice fellowships in mental health and fellowships and supplies and equipment in environmental sanitation. The Sub-Committee was requested to approve the inclusion of these requests in the modified programme for 1960.

Dr. HAJI MOHAMED (Federation of Malaya) asked whether the staff for the malaria project in the Federation would be available by January 1960.

The SECRETARY stated that it was sometimes difficult to recruit the proper type of person at the proper time of the year. However, the Regional Office was in close contact with Headquarters with regard to recruitment and provision was made for this project in 1960.

The SECRETARY then informed the Committee that additional requests had also been received from New Zealand, the Philippines and the South Pacific Commission, the latter being an inter-country programme in the

South Pacific. The Regional Director had carefully reviewed these requests and fully concurred with the governments in the value of the projects requested. However, at this stage no commitments could be made due to lack of funds and it was suggested that these requests should be included in the supplementary list to be implemented if savings arose.

It was so agreed.

Dr. HAJI MOHAMED referred to the provision for a consultant in pharmacy for the Federation and asked that this be replaced by a consultant in health education. As the Federation had available a counterpart it was hoped that WHO would be willing to approve this request from the savings incurred.

The SECRETARY pointed out that the savings obtained from the cancellation of the consultant in pharmacy had already been used to cover the request of the government for a public health administrator.

The CHAIRMAN suggested that if there were no objections to the adjustments made as a result of the new requests received from governments the Sub-Committee might agree to accept the modified programme.

It was so agreed.

2 PROPOSED PROGRAMME AND BUDGET ESTIMATES FOR 1961 - REGULAR PROGRAMME: Item 2 of the Agenda (Documents WP/RC10/4 Part I and WP/RC10/P&B/2)

The SECRETARY drew the attention of the Committee to the fact

that it had not been possible to include all requests in the proposed programme and budget, the missing projects would, however, be found in the supplementary list which appeared in document WP/RC10/4 Add.1. The total figure proposed for 1961 was \$1 585 000, a slight increase over 1960.

Dr. REDSHAW (Australia) stated that his Government failed to understand the proportion between the amount allocated to the Regional Office and that allocated to field activities. The cost of regional office advisers and area representatives was approximately \$780 000 while the remainder was allocated to country and inter-country programmes. This seemed rather excessive and he felt the Committee should consider the feasibility of reducing the overhead costs of the Regional Office and devoting more money to implementing the projects which had had to be relegated to the supplementary list.

The SECRETARY drew the attention of the Committee to two facts. From 1959 to 1961 there had been no increase in the number of people employed. Out of 57 staff members in the Regional Office appearing in page 4 of document WP/RC10/4 Part I the number of international staff recruited from elsewhere in the world was 15 and the rest were local staff. The Regional Office had been maintained with a relatively small number of staff for quite some time. The second point he wished to make was that the Regional Office was responsible for programmes financed not only from regular funds but from the Malaria Eradication Special Account, the Technical Assistance programme and projects of supplies from UNICEF. The total amount of funds for the Western Pacific Region in 1960 was an estimated \$3 700 000 and out of this \$464 000 were allocated to the Regional Office and approximately

\$3 230 000 to field activities. On the basis of this figure the percentage spent on the Regional Office was 12.43%, the remaining 87.57% being spent on field activities. He assured the Committee that the Regional Director was fully aware of the importance of keeping the overhead expenses of the Regional Office as low as possible.

Mr. SAITO noted that the post of Regional Adviser in Tuberculosis was being discontinued effective the end of June this year, and wondered whether this action reflected diminished interest on the part of the Regional Office in tuberculosis programmes. He did not believe that this was so, since tuberculosis was the subject of the Technical Discussions during this session. However, his Government was very interested in tuberculosis, and he asked if he could be enlightened on this point.

The SECRETARY replied that the representative from Japan was quite right in assuming that the Regional Director maintained continuing interest in the tuberculosis programmes in this region. However, as already explained, the staffing pattern of the Regional Office had been adjusted to meet the needs of the various programmes and the Regional Director had, therefore, found it necessary to combine the posts of Regional Adviser in Tuberculosis and Regional Adviser in Venereal Diseases and Treponematoses into one post, that of the Regional Adviser in Communicable Diseases. The Secretary reiterated that this action did not in any way reflect a lack of interest in tuberculosis on the part of the Regional Director who, he was sure, would be happy to readjust his staffing pattern should this be called for.

Dr. SCRAGG (Australia) referred to the number of posts appearing under Malaria in the budget document and stated that he did not understand why three posts were given on page 1, one post on page 6, and a number of posts in the Malaria Eradication Special Account section. He wondered whether some of the people were included several times, or whether these were within sections of the Organization.

The SECRETARY admitted that the procedure being carried out was a rather complicated one; however, this was the pattern which WHO Headquarters had asked the Regional Office to follow. Actually, there were four malaria experts in the Regional Office: one Regional Adviser in Malaria, one malariologist, one entomologist and one sanitary engineer, the last three being financed under the MESA budget.

Dr. SCRAGG asked if the three posts indicated on page 1 of the document were the same as the three given on page 4 of the MESA section.

The SECRETARY explained that the three posts on page 1 were for field projects and should not be confused with the three posts appearing under MESA; the three posts on page 1 were being financed from the regular budget.

Dr. SCRAGG thanked the Secretary for his explanation and stated that he could now see very clearly that it was a purely administrative way of showing how money was spent. He presumed that there was a unit dealing with malaria as opposed to what had been set up in the budget.

The SECRETARY drew attention to the increased provision for duty travel for Area Representatives reflected in page 8, which was a result

of the policy being followed that area representatives should visit the countries and territories in their areas more often to bring them into closer contact with the health administrations and project activities existing in their respective jurisdictions. As would be noted, this kept the duty travel expenditure of Regional Advisers to a minimum.

Referring to the staffing pattern in the Regional Office, Dr. YEN expressed concern about the new post of regional adviser in communicable diseases. He wondered whether the staff member occupying this new post would be able to deal with the vast field of communicable diseases, of which tuberculosis, and the venereal diseases and treponematoses were only a part. As pointed out by the representative from Japan, tuberculosis still constituted a very important programme in this region. The post of regional adviser in communicable diseases would be considered a very important one and the P.4 grade given to it was, in his opinion, rather low. Dr. Yen believed, that since this post covered a wide range of specialties, it deserved a P.5 grade in the same way as the regional adviser in malaria did.

The SECRETARY stated that the Regional Director was confident that one staff member would be able to undertake responsibility for tuberculosis, venereal diseases, treponematoses, leprosy and other allied communicable diseases. He suggested, however, that this point be raised again at the plenary session of the Regional Committee when the Regional Director could reply to the question in person. He was confident that the Regional Director would gladly consider a re-grading of this post, should this staff member's responsibilities be found to be greater than what were presently envisaged. The Secretary added that he would

also bring this matter to the Regional Director's attention.

The CHAIRMAN suggested that the points raised by the representative from China be referred to the Regional Director at the plenary meeting of the Committee.

It was so agreed.

Area Representatives (page 8)

The SECRETARY drew attention to the fact that there were now four area representatives - thus, the Region was fully covered. He emphasized once again the statement he had made earlier regarding the increase in the duty travel expenditure of these staff members.

Country Programmes (pages 9-40)

Dr. REDSHAW stated that his Government's contribution for 1961 had not been indicated in the document. However, the amount to be contributed in 1961 would be the same as that of 1960.

Referring to the public health administration project in his country, Dr. THOR-PENG-THONG (Cambodia) informed the Sub-Committee that his Government's contribution to this project would be \$10 000 in 1960 and also \$10 000 in 1961.

Inter-country Programmes (pages 41-47)

There being no comments on the other country programmes, the Sub-Committee proceeded to review the inter-country programmes given on pages 41-47 of the document under consideration.

Dr. YEN expressed his Government's appreciation of the implementation of the Seminar on Diarrhoeal Diseases in 1961, and the hope that the funds allotted would be increased. He wondered if it would be necessary to organize a seminar in the future as a result of the International Health and Medical Research Year.

The SECRETARY referred to the comment made by the representative from China regarding the Seminar on Diarrhoeal Diseases and stated that the Regional Office would do its best to increase the allocation for this project, should savings become available, in order to permit the attendance of a greater number of participants or the purchase of more supplies and equipment. In relation to the statement made regarding the International Health and Medical Research Year, the Secretary drew attention to the fact that this subject would be coming up as a separate item in the agenda and would be discussed at the plenary session of the Committee. If, in observing the Year, Member governments felt that it would be profitable to hold a seminar on this subject and therefore submitted a request for its implementation, the Regional Director would be very happy to give consideration to it.

Malaria Eradication Special Account (pages 1-10)

The SECRETARY reiterated his previous statement that programmes under this heading would be implemented from the special voluntary contributions made by Member governments of the World Health Organization. Since the World Health Assembly had repeatedly expressed its desire to intensify malaria eradication measures, the Director-General was very anxious to see malaria eradication programmes carried out in all regions. As would be noted on page 1 of this section, budgetary provisions had

been made for a five-year period, as a result of the Organization's desire to eradicate malaria in all parts of the Region.

Concerning WHO's assistance to Viet Nam in the field of malaria eradication, Dr. LE-CUU TRUONG (Viet Nam) drew attention to the fellowship for which WHO had provided \$5000 in 1959. His Government requested that this fellowship be divided into several fellowships to enable more people to benefit from the experience. The request had already been submitted and it was hoped that WHO would give it some consideration.

The SECRETARY said that the fellowship appearing on page 9 of the MESA budget had been given careful consideration by the Regional Adviser in Malaria and placement of the candidate was now in progress.

Dr. TRUONG explained that this fellowship was for twelve months. His Government felt that twelve months for one person were too long and therefore would like to have the fellowship shared by three fellows who would visit countries in the Western Pacific Region.

The SECRETARY stated that this request would be given attention by the Regional Office.

Dr. VALENCIA (Philippines) asked for the comments of the Subcommittee members on the international malaria training course being conducted in Tala, Philippines. Any suggestions and comments they made would be very much appreciated by his Government and would contribute to the success of the training programme in the Philippines.

Dr. HAJI MOHAMED, referring to the fellowships being awarded by WHO in 1959, mentioned that his Government was sending this year

one senior officer to attend the training course in Tala and would like to request postponement of the other to 1960 when the Government would send one other fellow for training.

Dr. DICKIE (United Kingdom) noted that at the beginning of the discussions the Secretary had read a very relevant paragraph from the introduction to the document which stated that the budget was based on the tentative allocation of the Director-General. He commented that the Regional Committee could only approve the programme but not the budget which must be passed by the Health Assembly, and enquired if there was a system of priorities for programmes in the event that the Assembly did not allocate the amount requested.

The SECRETARY confirmed that the target figure shown in the budget for 1961 was only a tentative figure, the firm amount to be known when the budget had been approved by the World Health Assembly. The figures given for projects might, however, be considered more or less reliable, although modifications might again be necessary next year as a result of the revision of the target figure. Regarding the programme priorities to be followed, the Secretary referred to resolution WP/RC9.R3 passed by the Regional Committee at its ninth session last year and read it to the Sub-Committee. The Regional Director had followed very closely the policy laid down in this resolution.

Dr. REDSHAW said that he was aware of this resolution but felt that this sub-committee should have more authority for determining actual priorities of projects which might be included in the programme should funds become available. He believed that the Committee did not quite accept its responsibility in the matter of deciding priorities

were passed over to the Regional Director. He suggested that the Regional Committee might seriously consider accepting this responsibility and not just including priorities in general terms such as had been accepted last year.

Dr. YEN expressed his delegation's agreement in principle with the suggestion of the representative from Australia. He pointed out, however, that in the past sessions of the Regional Committee the subject of priorities had been brought up again and again. It had been extremely difficult at those times to lay down specific items, particularly because developments in the countries in the Region varied considerably. The priorities had been established as a guide for the Regional Director. Dr. Yen added that if the representative from Australia would like a further discussion and study of this subject it might be worthwhile to set up a working group to do this.

Dr. DICKIE thought that, instead of fixing priorities from the top, it might be a good idea to go the other way round and fix priorities from the bottom, to determine which projects could be shelved for the time being should money not be sufficient to cover all.

Decision: The Sub-Committee approved the programme and budget proposed for 1961.

The CHAIRMAN then reminded the members that the rest of the items appearing on the agenda would be discussed at the next meeting of the Sub-Committee on Friday afternoon.

The meeting adjourned at 5.10 p.m.