

Fifty years of the World Health Organization

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The outcome of 50 years of existence as an individual, a family, a community or even a nation, can only be appreciated in terms of achievements in a given time and place. The resulting impact may vary according to whatever is available in terms of resources, programmes or added values.

In the case of the World Health Organization (WHO), however, the appraisal is quite different. Fifty years of relentless work by WHO have yielded worldwide results that reach from past ages, and will continue to be effective for ages to come.

The 50th anniversary of WHO offers us an opportune occasion to highlight some of the achievements realized by the Organization in the past 50 years and to identify the challenges we have to cope with in the future.

One of the major achievements realized is the dramatic decline in mortality rates in developing countries. In our part of the world life expectancy at birth increased from 52 years in 1975 to 64 years in 1997 and is expected to reach 72 years in the year 2025. Prolonged longevity did not occur in isolation. It is the result of major improvements in the health status, prevention and care, among both the haves and have-nots in all populations.

Another landmark in the life of WHO is the eradication of smallpox, a deadly disease which has been known in our Region since the days of the ancient Egyptians. Over three

millenia the disease had killed and crippled, particularly through blindness, many millions throughout the world, sometimes with a mortality rate of more than 50%. During the sixties, when WHO launched its worldwide eradication campaign, and the disease affected no fewer than 30 countries in the world, smallpox victims were estimated at 10–15 million each year, of whom as many as 1.5 to 2 million were condemned to death.

In October 1977 the Region saw in Somalia the last case of smallpox in the world. The determination of the people of the Eastern Mediterranean to collaborate with WHO to eradicate smallpox, was such that even war between neighbouring countries did not prevent them from working together.

It is now evident that both WHO and its Member States have learnt the valuable lesson of cooperation. The successful experience gained in smallpox eradication is being applied in the battle against a host of human ailments, including poliomyelitis, leprosy, dracunculiasis and other major sources of human suffering.

Another key change in the national and regional health profile is the progress from the practice of health for the few towards the strategy of health for all. It is worthwhile to recall that when the conference of Alma-Ata convened in 1978, the Eastern Mediterranean participants were proud to report their long experience in primary health care. East-

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ern Mediterranean countries had for several years before Alma-Ata. become concerned that large population sectors were receiving little or no health care. They endeavoured, therefore, to invent policies and approaches for involving the people concerned in improving their own health and well-being. Some of the major experiences recalled were the West Azerbaijan project in Iran, the Phased Programme for Overall Socioeconomic Development of Sudan and the Network of Rural Health Units in Egypt, in addition to the primary health care projects in Afghanistan and Pakistan. When the principles of primary health care were globally adopted with the Alma-Ata Declaration, Eastern Mediterranean countries applied the renewed principles and approaches to improve their health systems and promote community involvement in health development.

In our efforts to expand the implementation of the strategy of health for all, the Eastern Mediterranean Regional Office and Member States initiated a number of innovative approaches that were based on the prevailing social, economic and cultural norms and principles. These innovations include, to mention a few examples:

- Promoting the spiritual dimension in health services and care. This policy is being adopted throughout the Region as well as in countries elsewhere. It is on its way to being part of the Constitution of WHO.
- Adopting the use of national languages and local culture in health and medical information, education and communication. This policy is progressing slowly, but with steady and sure steps, towards better health education and promotion.
- Introducing basic health principles to young children through including health information and guidance in various subjects taught at schools. Towards that end

the Action-oriented School Health Curriculum is being implemented in 17 countries in the Region.

- Involving local communities in defining and addressing their basic development needs. This policy ensures that local people identify their top priority needs and the means to fulfill them. Contributions to meet such basic development needs are derived from the community as well as governmental, nongovernmental and international resources. This strategy is being followed in more than half of the countries of the Eastern Mediterranean.
- The healthy villages and cities strategy is another innovation aiming to ensure a better environment for the individual and community, with the anticipated outcome of better health development and increased productivity for individuals and their communities.

These are a few glimpses on how our Region has changed during the last 50 years with WHO, working towards the common goal of upgrading individual health and promoting national and regional well-being.

At this juncture, the golden jubilee of the World Health Organization must not give us a false feeling of complacency and relaxation. It is true that we have achieved goals and targets that had been beyond our reach for centuries. However, with our growing populations, peoples' increased mobility, the changing demography of nations, worldwide deterioration in the environment, plus the expanding needs and demands of individuals in all countries, public health provision and requirements will indeed change positively and negatively according to circumstances.

This fact throws more responsibility on our shoulders. It makes each and everyone of us everywhere and in every position, duty bound to collaborate. It also makes the

WHO's catalytic mechanism more needed now than ever before.

In its first 50 years, WHO was instrumental in changing our world into a different place. In the years to come, it is essential that more efforts should be made, more heads

should come together, more arms should unite, more partnership should be displayed and more achievements should be realized.

This is the only way for us to survive, to keep hold of our gains and to live in an atmosphere of a real physical, mental, social and spiritual well-being.

Preamble to the Constitution of the World Health Organization

THE STATES PARTIES to this Constitution declare, in conformity with the Charter of the United Nations, that the following principles are basic to the happiness, harmonious relations and security of all peoples:

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, political belief, economic or social condition.

The health of all peoples is fundamental to the attainment of peace and security and is dependent upon the fullest co-operation of individuals and States.

The achievement of any State in the promotion and protection of health is of value to all.

Unequal development in different countries in the promotion of health and control of disease, especially communicable disease, is a common danger.

Healthy development of the child is of basic importance; the ability to live harmoniously in a changing total environment is essential to such development.

The extension to all peoples of the benefits of medical, psychological and related knowledge is essential to the fullest attainment of health.

Informed opinion and active co-operation on the part of the public are of the utmost importance in the improvement of the health of the people.

Governments have a responsibility for the health of their peoples which can be fulfilled only by the provision of adequate health and social measures.

ACCEPTING THESE PRINCIPLES, and for the purpose of co-operation among themselves and with others to promote and protect the health of all peoples, the Contracting Parties agree to the present Constitution and hereby establish the World Health Organization as a specialized agency within the terms of Article 57 of the Charter of the United Nations.