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Mr. Chairman, Representatives,

The World Health Organization and the Pan-American Sanitary Organization - the latter being in process of affiliation to the former as a regional agency - gratefully acknowledge the invitation to take part in this meeting of the Economic Commission for Latin America.

I do not think the representatives here assembled are concerned with getting to know about the special work of those two organizations. On the other hand, I venture to suppose that they will be interested in a description of the part played by those organizations in improving the conditions of health and well-being of American man, connected as those conditions are with one of the aims of this Commission, which is to raise "the level of economic activity in Latin America"... Furthermore, I think the spirit of scientific enquiry and sincerity in which the Conference is developing is propitious for the examination of points of doctrine not sufficiently clarified, and for the expression of opinions on subjects in relation to which the viewpoint of the health experts is different from that of the economists.

Health and Economics

In the past it has been a commonplace to affirm that economics is closely connected with public health, since both are fundamental for human development. Furthermore, it has been established as an axiom that the state of health of a people is fundamentally dependent on the stage of its evolution in social, cultural and economic development.

Nevertheless, these principles have never been practically applied in Latin America, and it is notorious that only in exceptional cases have the organizations responsible for planning and developing these activities united their efforts in a common cause.

* This document is a revised translation of the original which was issued in Santiago.

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It has always seemed strange to us health officers that the economists should ignore the biological criterion in their calculations, as if the high finance of the State was an abstract world revolving in a social orbit of prices and not of human beings. The constant claims of the less fortunate classes for a minimum of health, well-being and decency, and the traditional niggardliness of the estimates allocated to public health, support the truth of our observation.

Fortunately the most modern conception of the individual as a social being accepts the thesis that all manifestations of his vitality and all the incidents of his social life form an indivisible complex in which the various factors influence one another.

This conception has introduced a considerable change into the definition of the health of the individual and the community, and has served to base the so-called "right to health" on wider and more modern foundations. It might be useful to give a few illustrations.

The Conception of Health

In the Constitution of the World Health Organization, terms are defined and principles established which mark a new stage in what we might call the integral biological humanism of man in society. Health is conceived of, not as the opposite of sickness, but as a state of complete physical, mental and social well-being at the highest stage. It is recognized that the health of the peoples of the world is a fundamental condition for obtaining peace and security, and that States incur the obligation to be responsible for and maintain health not only by sanitary but also by social methods. Of major importance is the recognition that public health cannot be controlled, sustained or improved by the exclusive use of medical technique, the practitioners of which are agreed that the official organs of public health should co-ordinate their activities with other State institutions whose purpose is to improve economic and social conditions.

The Right to Health

It would appear unnecessary to refer particularly to a human right which is universally recognized as a matter of course. Paradoxical though it may seem, we wish to state that in practice no such right exists, and that it has been confused with the health-service grants made by States through their departmental organizations. The right to health is much broader than such a simple form of relief, and we shall here demonstrate how it has acquired its present value and how it is progressing and evolving to the point almost of identification with the economic and social

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rights of man. In the strict legal, political and philosophical sense the natural existence of the last two rights may be denied, but no one will deny the right to health, which is essentially indistinguishable from the right to life, which is in its turn the root and foundation of all human rights.

When the United Nations insisted on the necessity for an adequate balance between the three larger aspects of human life, i.e., the political, the economic, and the guarantee of the human rights that have been mentioned, the Mexico Inter-American Conference insisted in its turn on the desirability of an adequate definition of those rights and of the duties they imply. The American Law Institute, in an attempt to state the essential human rights, included those of education, work, food, shelter and social security, and, in commenting on the last of these, adopts the position of the Declaration of Santiago de Chile drawn up in 1942 by the twenty-one American Republics and Canada. This Declaration imposes on States the duty of seeing that public resources are used for (1) raising standards of health; (2) preventing sickness and accidents; (3) providing necessary medical attention, including maternity services; and (4) providing financial support for the unemployed who are unable to earn and for their dependents, the aged, widows and orphans.

In 1943 the United States National Resources Planning Board noted that the Bill of Rights had remained unchanged for 150 years and insisted that any modern declaration of personal rights should include all those already mentioned and many others necessary for the complete enjoyment of life.

The Inter-American Conference of Chapultepec introduced a new era in the evolution of these ideas. When the Conference set up the Economic and Social Council, it hailed it as existing "to encourage social progress and raise the standard of life for all the peoples of America". In the Declaration of Mexico it states that "economic co-operation is essential to the common prosperity" of those peoples, and that "want among any of their peoples, and that "want among any of their peoples, whether in the form of poverty, malnutrition or ill health, affects each one of them and consequently all of them jointly". In the Economic Charter of the Americas it recognizes that "the two pillars on which a positive economic programme can be built...are rising levels of living and...economic liberty", and adds that "the basis of rising levels of living is found ultimately in enabling the individual to reach his maximum productivity". In the resolution on Health Security it affirms that "the improvement of public health, nutrition and food supplies is an essential factor in

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raising the standards of living and increasing ...productivity"; that peace and social security require democratic regimes for the exercise and defence of civic rights, which "cannot be efficiently fulfilled and rightly carried out unless the people are physically well and able to work to their full capacity, a condition not found if large parts of the population are ill, in precarious health, or under-nourished". Lastly, it recognizes that the establishment, economic development, security and well-being of America require an intensification of its vital forces by means of a united effort to improve conditions of health and, in particular, drainage, the prevention and cure of disease and the prevention of epidemics. The Pan-American Sanitary Bureau was approved as a co-ordinating body for the health of the continent.

From this the conviction follows that health and economics are, to say the least of it, inseparable, and that it is necessary to achieve practical co-ordination between them in order to secure really positive results for the human race.

Public Health and Emergency Economic Solutions

An essential element of this Commission's mandate is to study urgent economic problems arising from the war, with the clearly-defined purpose of saving the Latin-American economy from final collapse. It is clear that many of the means adopted will have the nature of emergency symptomatic treatment; but there is no possibility of evading the necessity for seeking a durable solution for the basic evils of our economy: that is to say, in medical terms, for making a safe diagnosis and instituting a therapy based on the aetiology.

I should like to point out that some of the palliative measures drawn from international finance and adopted in certain countries of Europe and America are deeply harmful to human life and have resulted in such great privations for the population that it is not astonishing to observe how physical distress, hunger, tuberculosis, a falling birth rate, a rising infantile mortality rate, an increase in infectious diseases, etc., are doing increasing harm to the future of the race.

The depreciation of money, in conjunction with the fall in the purchasing power of wages, is ruinous for the well-being of the worker, who has always complained with justification of the insufficiency of his wages. The indiscriminate export of certain articles of prime necessity, such as rice, sugar and fats, the sources of the people's energy, has been the cause of serious political crises and continues to be the cause of the low productivity of labour in various countries of America. The

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control of imports, when extended to commodities indispensable for the growth of children, like meat and milk, produces in the long run uneconomic results.

It has been said here that our type of economy is colonial, depending in the first resort on human labour and the produce of the soil. It is therefore obvious that we have a prime obligation to protect the human being, whether as biological capital, as a factor in work and production, or as a factor in consumption.

We might go so far as to say without fear of equivocation that in recent years it has been the national and international finance and credit institutions and national organizations regulating the American economy which have determined the level of public health on the continent to a greater extent than have the official health organizations themselves, and that this influence has not always been beneficial, since it has failed to achieve a close co-ordination of health and economic policies.

Public Health and Economic Rehabilitation

Various representatives have referred to the plans for economic rehabilitation being developed by their governments. It may be inferred from their speeches that social welfare and public health are indissolubly bound up with national economic conditions. I believe that it might be of some interest to the economists to get to know the points of view of the health specialists which the representatives of their own countries upheld before the old League of Nations Health Organization, to which the World Health Organization fell heir, and before the Pan-American Sanitary Organization, which through its seventeen Pan-American Health Conferences and its conferences of health officers has at its disposal a concrete picture of all aspects of continental life related to public health. The fifty years of continuous experience in which the representatives of our Bureau have collaborated with all the governments of America in solving their social and health problems can be represented by a documentation of the human situation on the continent which no other American international organization possesses. Amongst the thousands of studies carried out in various countries as a result of the recommendations of the Health Conferences, very many have a close relation to economics. A few observations deserve to be briefly dealt with in the following paragraphs.

1. Environment

Those countries with climates more favourable to human activity and more unfavourable to illnesses caused by environmental conditions, such as malaria, ankylostomiasis and intestinal fevers, have a greater productive

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yield. The economic utilization of the American soil in tropical countries depends, for more than three-fifths of the area concerned, on the drainage system in operation. Examples of schemes in which sanitary conditions have been co-ordinated with economics are:

(a) The eradication of Anopheles gambiae in the north-east of Brazil. The problem of Anopheles gambiae as a terrible carrier of malaria has not only threatened that area with depopulation but America as a whole with the most frightful catastrophe.

(b) The eradication of urban yellow fever by the elimination of the Stegomyia mosquito in accordance with the continental scheme adopted by the Pan-American Sanitary Organization, and the examination of the population exposed to forest yellow fever. Almost complete success has been achieved in the towns. Work in extensive forest areas has also been made possible and international aerial transport facilitated, with a consequent lessening of the restrictions that existed in the past.

(c) The almost complete abolition of maritime quarantine measures in exanthematic typhus and bubonic plague was recommended at the last meeting of the Committee for Epidemic Control of the World Health Organization, because new insecticides and rodenticides make the control of these diseases possible without any alteration in the atmospheric conditions favouring carriers and reservoirs.

(d) The drainage of the river basin carried out by the Brazilian sanitary authorities, with the consequent elimination of malaria. Other similar drainage schemes in Chancay and Chimbote, Peru; in Arica and Tarapacá, Chile; in Tucumán, Argentina, etc., will make possible an economic and biological saving which will decisively affect life in those regions.

(e) The schemes for the drainage of the Amazon Basin and the valley of the Río Doce, in which the Institute of Inter-American Affairs is taking an active part, are experiments which will decide the economic future of America.

(f) The scheme for the control of onchocerciasis worked out by our Bureau in co-operation with the Government of Mexico is considered fundamental to the economic development of the valley of the Papaleopan River. The success obtained by the measures of control now being developed will benefit other countries in which, as in Guatemala, onchocerciasis is a major problem.

(g) The schemes for controlling ankylostomiasis in Panama, Brazil
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and other countries, with the active co-operation of the Rockefeller Foundation, have made possible the cultivation of extensive agricultural areas simply through the recovery of populations from the listlessness and physical incapacity which characterize that disease.

(h) The drainage works carried out by the engineers of our Bureau in Central America have contributed to the construction of the Pan-American Highway.

Apart from these examples, which clearly indicate the importance to the economic system of an improvement in environmental conditions, it would also be worthwhile to mention the difficulties which may be encountered for similar reasons in internal colonization and to a still greater extent in connection with the immigration of masses of human beings unused to tropical conditions. Movements of population in connection with agriculture or mining have been well studied in Peru, and in some cases disastrous effects have been observed to result from the insanitary conditions encountered by the migrating masses.

2. Population

In the plans of the economists, 150,000,000 is given as a conservative estimate of the population of Latin America. If that estimate is correct numerically, it is not, on the other hand, qualitatively correct. Our continent has been depopulated of human beings with one hundred per cent of their biological capacity; and the distribution of the active and healthy is very unequal, with a preponderance in the temperate zones and in a handful of towns with a high urban standard of living. The greater part of the American population lives in the foothills of the Andes and the agricultural valleys, and it is precisely in those places where the greatest malnutrition and physical distress are to be found. Any increase in the area of fresh land to be exploited may encounter the problem of a shortage of labour for the work. The listlessness of the Andean Indians gives the high density of population in the Sierras a merely fictitious value for the calculation of labour output. If, on the other hand, the projected industrialization of the continent attracts the young country-dwellers to the towns, the debilitated human remnant in the rural areas will be incapable of maintaining a high production of raw materials.

3. Social System

If the word "democracy" had not acquired such a clearly-defined demagogic use, it might perhaps be said that Latin America is an anti-democratic continent, first because there exist in it all kinds of social strata - racial, social, economic, cultural and sanitary; and secondly

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because there is no equality of opportunity although in principle all American men are equal before the law.

The Indian constitutes a vital problem in economics and public health. In countries where the indigenous population is large, its failure to participate in exportable production and in the consumption of imported products weighs heavily on the national finances. For similar reasons public administration tends to be very costly. The consumer economy which was originally characteristic of the native population is in many areas disappearing and the Indian is living amidst distress, filth and alcoholism. We may note that in some countries which are producers of sugar cane, brandy is a monopoly and has turned out to be a certain means of destroying the vitality of the native. Simple calculations would show that those States lose in human biological value much more than they gain in their revenue from alcohol. In many countries economic planning which does not provide for the rehabilitation of the Indian and his incorporation into active national life may be considered beforehand as useless.

Of the social classes the most degenerate is that of the country-dwellers. In a word, that class is short of everything, an absurdity in a continent like Latin America where life is mainly rural. The labour codes do not apply to the rural areas; nor do social security measures. Paradoxically enough, the nutrition and general provisioning of the country-dwellers are worse than those of the urban workers. I never saw distress, either material or physical, equal to that of the agricultural labourer. The healthy country life is a poetic falsehood, because it is precisely there that one may observe a variety of disease conditions which nobody is concerned to cure, for in our America rural health services do not exist. Let us add that agricultural conditions differ so much from one country to another, and sometimes even from one area to another in the same republic, that it would be absurd to apply to them a common formula; but in general it may be said that where primitive methods of agricultural labour and the colonial organization of the use of the soil have been preserved, one finds less economic well-being and poorer conditions of health both for the individual and the community.

I shall not refer to the other social and labour conditions which affect the standard of life in relation to health, such as wages, distribution of land, quality of production, etc. I am handing over to the Secretariat a copy of the Quadrennial Public Health Plan which I had the honour to draw up for the Government of Ecuador and in which the relationships between the economic system and the health of the country are studied in detail in all their aspects.

4. Nutrition, Housing and Clothing

Innumerable studies have been carried out on these subjects by health experts in all countries. Among those with a bearing on these problems may be mentioned the Dragoni enquiry in Chile, carried out under the auspices of the Health Organization of the League of Nations; the studies carried out by the Consejo Nacional de la Alimentación (National Food Council), especially that of Mardones and Cox, and the reply drawn up by Engineer Bruno Leuschner to the Continental Enquiry into the Consumption of Food Products and Clothing and the Housing of the People carried out by the Consejo Permanente de Asociaciones de Comercio y Producción (Permanent Council of Trade and Production Associations).

Engineer Leuschner says that the average nutrition in Chile "is generally deficient, and particularly in milk, meat, animal fat and other protein foods. This fact may be confirmed in practice by our figures for general and infantile mortality, which are amongst the highest in the world. To under-nourishment may also be ascribed responsibility for the high percentage of tuberculosis, and for the results of various comparative anthropological studies which demonstrate the progressive reduction in size of the skeleton of the average inhabitant of Chile in the course of the last few decades". Mardones and Cox state that about one-third of the total population is far from being able to pay for an average diet. In the book by Liorens "Subconsumo de Alimentos en la America del Sur" (Deficient Consumption of Foodstuffs in South America), it is established that even in the countries with higher economic levels, like Argentina, a great mass of the population is undernourished, especially the population living far from the metropolis. Similar observations have been made in Brazil, by De Castro in technical and by Gilberto Freire in social studies.

It does not appear to be necessary to stress this point, nor does it seem worthwhile to expatiate on the shortage of clothing and housing accommodation which are permanent vital problems in our countries, especially in respect of agricultural labourers and industrial workers.

5. Human Economics of the Continent

The above comments make it possible to understand the influence of economics on health. In 1937 and 1944 I attempted to produce essays in what might be called "human economics" in relation respectively to Chile and Ecuador. The conclusions might be applied to the whole continent. In these works we analyzed exhaustively the medical, social and economic causes of the wastage of human life during pregnancy, childbirth, infancy, /maturity

maturity, and old age, and attempted to make approximate calculations of what these losses in biological capital mean for the national economy. The worker's low expectation of life and the high infantile and general mortality rates are the worst features.

Another uneconomic factor which has never received the consideration it deserves is the poor use made of human life. To give a simple idea of what that means we add a few calculations relating to Ecuador, expressed in sucres:

Losses due to short duration of life, calculated on an average of two years and a wage of five sucres a day	S./200,000,000
Premature loss of commercial value of human life (disablement, confinement in poor-house, insanity, lack of pension, etc.)	100,000,000
Interruption of productive capacity, based on absence from work, attendance in hospitals and out- patient departments, medical expenses, etc.	150,000,000

If the life of American man were extended by five years of activity, if the general mortality rate were reduced by five per thousand, and if absence from work diminished by twenty per cent - figures which could all be reached - at least \$10,000,000,000 would be saved annually in Latin America, taking the average annual value of a man's work as \$500.

Co-ordination of Economics with Public Health

I would ask you, Mr. President, to excuse me for having taken up the attention of the meeting for so long. However, the question of the relationships between health experts and economists in facing these problems has scarcely even been outlined. The World Health Organization would like to see a more permanent type of relationship, such as would be initiated, for example, by the establishment of a joint committee.

The World Health Organization understands that the isolated efforts of international bodies do not nowadays yield the maximum benefit that might be expected from them, because of the natural limitations imposed on them by their very specialization in face of the complexity of the problems of modern life in society.

Conscious of its limitations and of the benefits of close co-ordination
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with other international bodies, the World Health Organization has entered into negotiations for the establishment of study groups with the Food and Agriculture Organization for questions of rural nutrition and hygiene; with the International Labour Organization for questions of industrial hygiene, tuberculosis, and especially health insurances, which in many countries constitute the principal form of medical assistance; with the International Civil Aviation Organization in connection with various health problems of aviation; and with the United Nations Educational, Scientific and Cultural Organization on various points of common interest.

For its part the Pan-American Sanitary Organization, as a regional body of the World Health Organization and an integral part of the Inter-American System, has for fifty years been co-ordinating its efforts directly or indirectly with a great number of national and international bodies which in one form or another are concerned with determining the standard of health and well-being on the continent.

I will end by mentioning the resolution, approved at the fifth session of the Interim Committee of the World Health Organization, which states that co-operation (with various international bodies) should be continued, "with special reference to the importance of emphasizing..... that economic development without adequate health measures is necessarily incomplete, and that it is the right of the people to expect that proper health measures be taken concurrently with such economic efforts." The World Health Organization has requested me to state that it "is of the opinion that economic and health development should proceed together, and that this new Commission may serve as an excellent medium for the efforts of our two organizations to improve health conditions in Latin America."

Thank you, Mr. Chairman.

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