

## HEALTH AND PROGRESS IN THE AMERICAS

*The Pan American Sanitary Bureau, Regional Officer of the WHO, in Washington, published in March 1966 the annual report of its Director, Dr. A. Horwitz (Official Document 63). The title of the report is Health and Progress in the Americas ; part of it, dealing with the problems of education and health, is reproduced below.*

Activities in education and training are regarded as an “ instrument ” in carrying out the health function, representing as they do a combination of resources to carry out specific action within limits fixed by technical and economic factors. “ Concepts of education, like those of freedom, bristle with difficulties. It is hard to define education because of what it connotes, which depends in no small measure upon the particular culture in which education occurs. Education is intimately bound to the culture of the community it serves, and for this reason what education means differs from one community to another. What all education has in common after allowance is made for cultural differences is ‘ teaching ’ and ‘ learning ’. Thus, to educate means etymologically to educe or draw out of a person something potential and latent ; it means to develop a person morally and mentally so that he is sensitive to individual and moral choices and able to act on them ; it means to fit him for a calling by systematic instruction ; and it means to train, discipline, or form abilities, as, for example, to educate the taste of a person. The act or process of achieving one or more of these objectives is, as a first approximation, what education is about. ”<sup>1</sup>

The foregoing considerations are highly relevant to the training of professionals and technicians for the activities with which we are concerned. When we consider the range of specialization within

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<sup>1</sup> Schultz, Theodore W. *The Economic Value of Education*. New York and London, Columbia University Press, 1963. p. 3.

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each profession, we find few university functions requiring greater diversification than those related to the sciences and arts of health. Within society, these are perhaps the ones in which the greatest personal involvement is required in order to instill in every human being principles for preventing or treating disease and protecting family health. If the universities and other institutions do not adequately motivate their students to fulfil their social commitments, they will be unable to transmit their knowledge and experience to those they will be serving, observing due respect for their cultural characteristics.

Significant work was done by the Organization during 1964 in the provision of advisory services both to educational institutions and for auxiliary and post-graduate training. We should like merely to comment briefly on what remains to be done and on certain programs.

Data on the estimated total number of nurses and nursing auxiliaries in the South American countries indicate a ratio of 2.6 nurses per 10,000 population, whereas the ratio for physicians is 5.5 if the ratio for all Latin America is applicable to South America. This relationship is obviously the reverse of the needs. It might be compensated for by adding in the total of auxiliaries ; this would increase the ratio to 10 nursing workers per 10,000 population, or double the proportion to physicians. Unfortunately, no more than a third of the auxiliaries have been properly trained.

This analysis brings out the problem of training health technicians in quantity and in quality. It is not reasonable that the ratio of professionals to population used today in the technically advanced societies be applied to the developing societies, where population growth and structure are different, as is the incidence of disease, whatever its etiology. The difference also applies to manpower and material resources. From all this it follows that health needs and demands in Latin America must be examined from the standpoint of reality, measured by the most appropriate indices, to determine the number of professionals and auxiliaries that will be required to serve a constantly growing population affected by certain problems and having a low income. This is the purpose of the studies initiated in Colombia under the sponsorship of the Ministry of Public Health, the Association of Schools of

Medicine, the Milbank Memorial Fund, and the Organization. Besides producing valuable information for medical education and education in allied disciplines and for the country's general health policy, the studies will develop a method possibly applicable to other countries interested in determining their manpower resources.

With respect to the quality of education, worthy of mention are the advisory services rendered to several universities in connection with medical pedagogy as an expression of human relations between professors and students. Despite the tremendous progress being made in the biology of learning, there will always be a need for motivation and eliciting adequate response from the students, based on the understanding of the professors. It has been aptly said that the practice of medicine is the realization of kindness.

Direct advisory services provided by the Organization are valuable for the improvement of teaching content and methods in universities and other schools. Also of value are post-graduate programs, such as those in social pediatrics, public health, sanitary engineering, and industrial hygiene. Worthy of mention also was the emphasis placed in 1964 on training activities concerned with preventive and economic aspects of veterinary medicine and preventive dentistry ; the same may be said about the training of nursing and sanitation auxiliaries.

The fellowships of the Organization constitute an educational procedure designed generally for specialization abroad by teachers and other professionals in the health field. A total of 639 fellowships were awarded in 1964—12 per cent more than in the previous year. Of these, 80 per cent were for academic and special studies. It is gratifying to confirm the sustained demand for fellowships and consequently report the greater investments.

Similarly, notice may be taken of increasing participation by educational centers in the Americas.

Research is another instrument of health work as a social service. It is evident that knowledge that has been usefully applied in other societies has not been so used in Latin America for similar situations. Furthermore, the sense of urgency to speed up development seems at times to oppose prior studies on any undertaking. Experience shows, however, that knowing what to do is not enough without knowing how to do it, and this depends on the ability to

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adapt what has been successful elsewhere to a different environment and culture. Moreover, education disassociated from research, basic or operational, is difficult to imagine. When this happens, education progressively loses its sense of reality and runs the risks of becoming a routine affair, disseminating principles and standards that are not always valid.

At its Third Meeting, the Advisory Committee on Medical Research of the Pan American Health Organization examined 45 operating projects in which scientists and institutions all over the Hemisphere are taking part. The projects deal with subjects that are part of the general activities of collaboration of the Pan American Sanitary Bureau. We should like to draw attention to the special session analyzing "environmental determinants of community well-being". Several experts explored the effects of environment on health, with emphasis on the problems created by migration to cities. People's difficulties in adapting from a rural to an urban environment, and in attaining a minimum standard of living, were highlighted. Areas for research—practical in its effects but with deep anthropological, biological, and cultural roots—were indicated.

The Committee examined the relationship between population dynamics and health and agreed that "the tremendous importance of the problems calls for studies of the highest quality". It suggested, among others, studies on human reproduction, dealing with hereditary and environmental factors in sterility and fertility; research on preventable malformations; demographic studies of live births, abortions, and fetal and maternal deaths; and research on family size and structure in relation to socio-economic factors in urban and rural communities. The Committee also indicated the need for training in epidemiology and demography, based on development, in schools of medicine and public health. It proposed that the Pan American Health Organization, in cooperation with the World Health Organization, initiate long-range studies of these subjects.

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