

CENTENARY CONGRESS OF THE INTERNATIONAL RED CROSS

Geneva. 28 August - 10 September 1963

COUNCIL OF DELEGATES

DS/2/2

HEALTH AND SOCIAL COMMISSION

Item 2 on the Agenda

THE RED CROSS AND HEALTH SERVICES

2nd REPORT ON THE RELATIONS BETWEEN

THE LEAGUE OF RED CROSS SOCIETIES

and

THE WORLD HEALTH ORGANIZATION*

It will be recalled that, in accordance with Resolution No.XXIII concerning "Red Cross relations with Government Authorities, governmental and non-governmental organizations in the medico-social field" (see Annex I) adopted at the XIXth International Conference of the Red Cross (New Delhi, October-November 1957), and a subsequent Resolution, No.XVIII, adopted by the 80th Session of the Executive Committee of the League of Red Cross Societies (Geneva, October 1960), instructing the League Secretariat to prepare "a report on the development of present relations with and co-operation between the League of Red Cross Societies and the World Health Organization (WHO)", such a report was submitted to the IXth Session of the League's Health Advisory Committee (Prague, September 1961). That report included a reminder of the origin of League/WHO relations, a section on the present state of these relations, and another on their future prospects.

This report is therefore the second summarizing the co-operation between the League of Red Cross Societies and the World Health Organization for the period October 1961 - September 1963.

A. DISASTER RELIEF

At the XXXIst Session of the Executive Board of WHO (January 1963) a resolution on "the role of WHO in emergencies" was adopted. This emphasised "the close co-operation which WHO enjoys with the League of Red Cross Societies" (see Annex II)

* A brief summary of League/WHO relations is included in the introductory report for Item 4 of the Agenda of the Council of Delegates' General Commission entitled "Development and Nature of Relations of the Red Cross with non-Red Cross Organizations".

B. THE FIGHT AGAINST DISEASE

On the outbreak of the following epidemics,

(a) The League maintained close liaison with WHO's specialist services, and in particular with the Epidemiological Service;

November 1961	Typhoid	Somalia
November 1961	Cholera	Philippines
January 1962	Smallpox	Pakistan
May 1962	Smallpox	Congo
May 1962	Smallpox	Senegal
May 1963	Cholera	Burma
May 1963	Cholera	Malaya

(b) Malaria - At the IXth Session of the Health Advisory Committee (Prague, September 1961), Rajkumari Amrit Kaur, Chairman of the Indian Red Cross, proposed that an appeal be made to each National Society with a view to obtaining funds to be passed by the League to WHO for its work in the eradication of malaria. This proposal was incorporated in the report of the League's Executive Committee. The League was subsequently able to hand over to WHO contributions received from some ten National Societies.

(c) Anti-Fly Campaign in Morocco - At the request of the League representative in Morocco, WHO requested its European Regional Office to send posters, publicity material and other documentation to the Moroccan Government, in particular in Casablanca, to assist it in its campaign against this pest.

(d) Vaccination - At the request of WHO, the medical service at the Palais des Nations has agreed to undertake the vaccination of League delegates to facilitate their departure on missions at short notice.

(e) Medical service for Algerian refugees - When Algerian refugees were being repatriated, the League's Health and Social Service Bureau (HSSB) co-operated with WHO experts in the preparation of a list of medical and pharmaceutical supplies for medical check points which were set up for the examination, and vaccination against smallpox, of these refugees on their departure from Morocco and Tunisia.

(f) Study Grants - A gift of \$10,000 from the Norwegian Red Cross enabled two Congolese students, selected by WHO, to study at European universities, one as a doctor and the other as a physiotherapist.

(g) World-Health Day - Each year, in accordance with the agreement established with WHO, the HSSB draws the attention of National Societies to the subject for World Health Day and encourages them to participate in this event. Similarly, the League requests WHO to include the National Societies in its circulation list for all documentation concerning this occasion, which is distributed by its Regional Offices.

In 1962, the HSSB, in agreement with WHO, devoted No.21 of its Medico-Social Documentation Series to the subject for World Health Day - "Preserve sight, prevent blindness".

In 1963 the subject chosen was "Hunger - disease of millions".

C. CONFERENCES AND TECHNICAL MEETINGS

(a) League participation in WHO meetings

(i) World Health Assembly

The League was represented by several members of the Secretariat at the XVth and XVIth World Health Assemblies, held at the Palais des Nations in Geneva. WHO/League co-operation was stressed on several occasions by the League Secretary General and by the WHO Director General who paid tribute to the Red Cross in his report submitted on 8th May 1963. The League also took part in technical discussions, in 1962 on "Mental health programme in public health planning" and, in 1963 on "Education and training of the physician for the preventive and social aspects of clinical practice".

(ii) WHO Executive Board

At the XXIXth, XXXth, XXXIst, and XXXIInd Sessions of the WHO Executive Board, held in Geneva, the League was represented by its Medical Director.

(iii) WHO Regional Committees

Depending on the place, the League was represented, either by delegates of the local Red Cross Society or by members of the Secretariat, at the following sessions of WHO Regional Committees:

25.9. - 3.10.1961 Brazzaville	XIth Session of the Regional Committee for Africa Delegate General of the French Red Cross in Brazzaville
3-17.10.1961 Washington	XIIIth Session of the Regional Committee for the Americas Associate Medical Director, The American National Red Cross

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| 21.8 - 6.9.1962 | XIVth Session of the Regional Committee for the Americas |
| Minneapolis | (XVIth Pan American Sanitary Conference)
Medical Consultant, St. Paul Regional Blood Centre, The American National Red Cross |
| 10-14.9.1962 | XIIth Session of the Regional Committee for Europe |
| Warsaw | A Member of the Central Committee of the Polish Red Cross |
| 18-24.9.1962 | XVth Session of the Regional Committee for South-East Asia, |
| New Delhi | The Director of the Maternity and Child Welfare Bureau of the Indian Red Cross |
| 19-21.9.1962 | XIIth Session of the Regional Committee for the Eastern Mediterranean |
| Geneva | Assistant of the Health and Social Service Bureau of the League |
| 20-25.9.1962 | XIIIth Session of the Regional Committee for the Western Pacific |
| Manila | A Member of the Board of Governors and the Manager of the Philippine National Red Cross |
| 24.9.-2.10.1962 | XIIth Session of the Regional Committee for Africa |
| Geneva | Assistant of the Health and Social Service Bureau of the League |

(iv) Technical Meetings

At the meeting of the Sub-Committee of Specialists in Blood Problems (Rome, 2nd-5th April 1962), organised by the Expert Committee on Public Health of the Council of Europe, WHO was represented by the League delegate.

Discussions by Experts on Blood Transfusion (League of Red Cross Societies - World Health Organization - International Society of Blood Transfusion). The experts continued their work and a "Manual on the minimum requirements for the organisation of a blood transfusion service" is nearing completion. A further meeting is planned for November 1963.

A meeting of a limited number of League experts and advisers on blood transfusion was held at League headquarters on 20th November 1962 and attended by a representative of WHO. Discussion centred on the preparation of a provisional programme for a Regional Seminar on Blood Transfusion to be held in the Near East, and on co-operation between the three organisations.

Reanimation and transport of the injured. Preliminary talks have been held at League headquarters, prior to the technical discussions to take place at the XIIIth Session of the WHO Regional Committee for Europe in Stockholm in September 1963, and the Red Cross has been asked to provide an expert for this Session. (see: LOAN OF EXPERTS). Introductory reports have been prepared by Dr. W. Stoeckel, Director of the German Red Cross Federal School in Bonn on "The Organization of traffic-accident casualty services, from the scene of the accident to the hospital" and by Dr. Z.S. Hantchef, the League's Medical Director, on "Mouth-to-Mouth Method of Artificial Respiration - Red Cross Point of View".

Expert Committee on Nursing. In 1962 the Director of the League's Nursing Bureau was re-elected as a member of the Expert Committee on Nursing for a term of five years.

The Director of the Nursing Bureau took part in an Information Meeting convened by WHO to discuss the possibilities of setting up a library of publications and articles on Nursing and Nurses.

(v) Joint Meetings with other International Organisations

Conference between the International Federation of Surgical Colleges, WHO, and the League of Red Cross Societies (London, 29th June 1962).

Similar meetings took place with the International Committee of the Red Cross (ICRC), the World Medical Association (WMA) and the International Committee of Military Medicine and Pharmacy (ICMMP).

(vi) Briefing of WHO delegates

There is co-operation between the League and WHO in connection with doctors who are taking courses for WHO delegates before going to African and Asian countries as Government advisers. These doctors are received at League headquarters and given information on the Red Cross, and in particular on its medico-social work. The League then invites the National Society of the country to which the delegate is being sent to contact him, in order that the latter benefit from its advice and that there may be increasingly close co-operation at national level between the Red Cross and the Government concerned.

There is also close liaison with the WHO Nursing Section, particularly when WHO is sending nurses to various countries. These nurses come to the League Secretariat to be briefed on Red Cross activities in the countries to which they are going.

(b) WHO participation in League meetings

WHO has been regularly represented at sessions of the League's governing bodies and Advisory Committees, namely, the Health and Social Service Advisory Committee and the Nursing Advisory Committee.

A WHO health education expert also took part in the IInd Red Cross International Study Centre which was organised as part of the Centenary celebrations and took place at Founex (Switzerland) from 19th July to 9th August 1963. Those taking part in the course were invited to WHO headquarters for a general information session.

D. LOAN OF EXPERTS

During the period covered by this report, WHO, which had been requested to send experts to make a preliminary study of the organisation of blood transfusion centres and the initiation of a national blood transfusion scheme in Iraq and the Syrian Arab Republic, asked the League to suggest two experts, and these were made available to WHO by the Swiss Red Cross.

At the request of WHO, an expert in First Aid from the German Red Cross in the Federal Republic of Germany has been selected to take part in the XIIIth Session of the WHO Regional Committee for Europe in Stockholm in September 1963.

The League's Medical Director has been appointed by WHO as a temporary Adviser on Blood Transfusion matters, and represented it in this capacity at the Council of Europe.

E. MESSAGE FROM WHO - WHO PUBLICATIONS

In January 1963, Dr. M.G. Candau, Director General of WHO, sent a message to the President of the ICRC and the League Secretary General on the occasion of the Red Cross Centenary. He has also paid tribute to the Red Cross when presenting his report to the last two World Health Assemblies. Finally, WHO devoted the April 1963 number of its publication "World Health" to the Red Cross Centenary. This issue (with a circulation of more than 100,000 copies) was distributed to all the delegates to the XVth World Health Assembly and has been sent to all National Societies.

ANNEX I

Resolution No. XXIII^{*}Red Cross Relations with Government Authorities, Governmental and Non-Governmental Organizations in the Medico-Social Field

The XIXth International Conference of the Red Cross,

Considering with satisfaction the development over recent years of the working relations between the Secretariat of the League of Red Cross Societies, the World Health Organization, and other governmental and non-governmental international organizations,

Recognizing the importance of these contacts in bringing about co-ordination of activities and in making the best use of the available resources,

Recalling the terms of the resolutions adopted on this point by the Board of Governors of the League in 1946 and by the XVIIth International Conference of the Red Cross in 1948,

Recommends the development of existing links between the League and these organizations on both the international and the regional level,

Suggests that National Red Cross Societies,

- (a) develop their relations with the regional and national offices of these organizations in order to ensure that the best possible use is being made of Red Cross resources in terms of personnel, professional and auxiliary, as well as of equipment, and that the largest possible participation be encouraged of Red Cross volunteers of all categories in carrying out medico-social activities of particular interest to the area under consideration;
- (b) make contact with the competent government services in order to ensure closer co-operation on the national level and thus co-ordinating the programme of activities.

* XIXth International Conference of the Red Cross
(New Delhi, October-November 1957)

ANNEX II

THE ROLE OF WHO IN EMERGENCIES *

The Executive Board,

Bearing in mind the provisions of the WHO Constitution relating to the assistance of the Organisation in emergencies;

Having reviewed the Director General's report describing the present role of WHO in emergencies (WHO document EB31/27),

1. CONSIDERS that the present practices and procedures of WHO in emergencies are adequate and correspond to the Organisation's responsibilities and its financial resources,
2. NOTES with satisfaction the progress achieved in the co-ordination of emergency activities of WHO and other interested organisations and in particular the close co-operation which WHO enjoys with the League of Red Cross Societies.

* Thirty first Session of the WHO Executive Board, January 1963.

CENTENARY CONGRESS OF THE INTERNATIONAL RED CROSS

Geneva. 28 August - 10 September 1963

COUNCIL OF DELEGATES

DS/2/3

HEALTH AND SOCIAL COMMISSION

Item 2 of the Agenda

Red Cross and Health Services

Report on the Red Cross International Meeting of First Aiders

Macolin (Switzerland), 18-24 August, 1963

First aid seems to be a basic activity for the National Societies. It was therefore particularly suitable to organize a Red Cross International Meeting of First Aiders in conjunction with the Centenary, which would commemorate the initial action of the Red Cross on the battlefield of Solferino in a concrete fashion.

At the request of the Commission for the Red Cross Centenary, an Organization Committee was set up for this under the chairmanship of the Director of the League's Health and Social Service Bureau. It was composed of representatives of the National Societies of France, Germany (Fed.Rep.), Poland, Switzerland, United Kingdom and Yugoslavia.

The executive work for the meeting was placed in the hands of the Assistant Director of the Health and Social Service Bureau, who received technical assistance from the President of the Swiss Samaritans' Alliance and the Director of the French Red Cross First Aid Instruction.

The meeting was arranged to take place at Macolin (Switzerland) in the Ecole Fédéral de Gymnastique et de Sport whose extensive equipment corresponded to the nature of the meeting and reduced the expenses for those attending to a minimum.

Here we should like to thank the Swiss authorities and the Management of the Macolin School for their understanding and for the manner in which they facilitated arrangements.

The meeting assembled 140 participants from 37 National Societies belonging to the following countries: Austria, Belgium, Congo, Czechoslovakia, Dahomey, Denmark, Ethiopia, Finland, France,

Germany (Dem.Rep.), Germany (Fed.Rep.), Greece, Haiti, Iran, Ireland, Italy, Japan, Lebanon, Luxemburg, Monaco, Netherlands, New Zealand, Nicaragua, Nigeria, Norway, Poland, Portugal, Senegal, South Africa, Spain, Switzerland, Togo, United Kingdom, United States, Upper Volta and Yugoslavia.

In principle, each delegation was composed of a team of first aiders under a leader, and totalled five persons. To ensure the efficiency of this event, National Societies were asked to select qualified persons. In consequence, many of the participants were instructors or assistant instructors in first aid and their average age was estimated at 30.

The programme included general lectures on the role of the League, the role of the International Committee of the Red Cross (ICRC), the Geneva Conventions and first aid in the service of public health.

We would take this opportunity to thank the Director of General Affairs of the ICRC and the Director General of the International Children's Centre (ICC) for their brilliant contributions to these addresses.

The greater part of the programme was however reserved for practical comparisons and discussion of first aid techniques. Each of the National Societies represented had been asked to present a particular aspect of first aid by a teaching or purely technical demonstration, which was afterwards discussed among participants.

This programme permitted the following sections of first aid to be studied:

- wounds and fractures
- haemorrhage
- transport and stretcher-bearing
- asphyxia and resuscitation
- water rescue

to which another section was added entitled "the first aider in face of an accident".

Emphasis should be laid on the general interest manifested by participants in these comparisons, made in a constructive spirit and free from any form of competition or criticism whatsoever.

One afternoon was given up to the official reception arranged by the civilian and military Federal authorities, representatives of the International Red Cross and National Societies. After the teams had been introduced and the Chairman of the Organizing Committee had delivered an address, speeches were made by the representative of the Swiss Federal Council, the Vice-Chairman of the League and President of the Swiss Red Cross, the Vice-President of the ICRC and Chairman of the Centenary Commission, and the Chairman of the League Health and Social Service Advisory Committee. This official ceremony closed with demonstrations by the first aid teams.

At the end of this meeting, the first fact which stands out is that

- while there may be slight variations of detail, the basic technical principles are alike for all the National Societies

The following points observed deserve special mention:

- simplification of binding of wounds with the built-up dressing and the triangular bandage which has many uses
- binding of fractures of the lower limb with one, two or three splints or by using the opposite limb
- tendency to standardise techniques for the collection of wounded and placing them on stretchers
- similarity of improvised transports
- use of mouth-to-mouth and Nielsen methods of artificial respiration (which are both to be found in the recommendations of the League's First Aid Commission)
- it appears desirable for the evacuation of the injured that a series of conventional indications denoting the nature of injury or other symptoms should be given publicity and employed. These could be marked on the forehead of the patient and on the evacuation card.

The differences in techniques observed are due to individual methods established by national first aid officers. Here comparison is a matter for the attention of the League's Commission on First Aid Practice, set up following Resolution no. 17 of the League's Board of Governors at its September, 1961, session (Prague) and the first meeting held in Geneva in January, 1963, which dealt partly with haemorrhage and artificial respiration. As you know, this Commission's work was the subject of a report which has already been forwarded to the National Societies for information and will be submitted for the approval of the League Health and Social Service Advisory Committee at its next session.

It should however be stressed that differences are to be found in the technical application of the same method, as each National Society constantly aims at improvement.

It is from this angle that a meeting such as the Macclin Meeting is of the greatest interest, in permitting the exchange of experience on the basis of common principles. Such meetings should certainly be repeated. They constitute the practical application of the First Aid Commission's conclusions and enable the Societies represented and the League (with a view to diffusion among the other Societies) to benefit from the experience and improvements of all.

Finally, we would emphasize the general wish voiced by participants that exchanges of information on first aid between Societies, through the intermediary of the League, should be speeded up and made more detailed.

We cannot urge too strongly National Societies sending delegations to this type of meeting to select qualified persons who play an active part in first aid activities and thus possess wide practical experience.

The detailed technical report of the meeting will be published later by the League's Health and Social Bureau in a coming issue of its Medico-Social Documentation series and forwarded to all the National Societies.

We would not close without mentioning the spirit of international fellowship which prevailed throughout and showed the true friendship uniting first aiders all over the world in the service of their neighbour, whatever their race, nationality, or language.

At the end of the Red Cross International Meeting of First Aiders, the Swiss Red Cross gave participants the opportunity of attending its remarkable demonstrations in co-operation with the Swiss Army Medical Services, on 24 and 25 August, at Colombier. All the participants wish to thank the host Society and in particular its Chief Medical Officer very warmly for this invitation.



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CENTENARY CONGRESS OF THE INTERNATIONAL RED CROSS

Geneva. 28 August - 10 September 1963

COUNCIL OF DELEGATES

RED CROSS AND HEALTH SERVICES

RED CROSS AND SOCIAL SERVICES

**(Items 2 and 3 of the Health and Social Commission's
Provisional Agenda)**

**Report submitted by the
League of Red Cross Societies**

**Geneva
May 1963**

THE RED CROSS AND HEALTH SERVICES

At the end of a hundred years spent in fighting suffering, the Red Cross perceives that its medico-social activities are constantly expanding their scope to meet the changing needs of a rapidly evolving world. If this work is to remain as effective and world-embracing as hitherto, its purpose and confines must be examined.

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The Red Cross must inevitably encompass the world, the decreasing importance of geographical distances facilitates exchanges, but it confronts us with many problems and reveals the extraordinary complexity of needs. In developing countries (3/5th of the world) we have a high birth rate, combined with a high mortality among the young, due in the main to contagious and parasitic diseases, malnutrition and local conditions of personal and environmental hygiene. On the other hand in countries with a relatively high economic standard (2/5th of the world) we witness a constant lengthening of the life span, which inevitably raises social problems, and a mounting curve of accidents, cardiovascular, cancerous and mental diseases.

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This variety of problems and hence of needs, once again illustrates the conception of health (now generally admitted and defined over 20 years ago by René Sand) as something which touches on every aspect of human life. Health and Social Services thus obviously remain inseparable, as shown by the different items of the present Commission's agenda.

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Health viewed from this broad angle has become one of the Governments' main preoccupations. Their efforts are supported by technical assistance from the international governmental organisations such as WHO and FAO, and other specialised governmental or non-governmental agencies. The fact that the whole world is now alive to this problem facilitates and at the same time modifies Red Cross action, as all health questions are tending to become primarily an official responsibility. Pilot projects on a large scale are hence increasingly less incumbent on the Red Cross, but where they remain indispensable because there is a hiatus, the public authorities are inclined to show themselves all the more understanding and ready to help.

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The development of joint actions by governments and specialised agencies compel the Red Cross carefully to avoid any work which would overlap. Its role is to hand over to the public authorities activities it has launched successfully and turn its attention to new matters which urgently demand pioneer efforts. There is a somewhat similar situation as a result of the evolution of social diseases, the regression of which in certain countries is leading the Red Cross to reconvert establishments it designed for their treatment.

On the other hand, the expansion of health activities and the necessary humanising of medicine in face of the indispensable clinical specialisation give the volunteers trained by the Red Cross an essential role. This training implies full knowledge of the needs, duties and limits of each type of task on the part of National Societies and offers them the prospect of valuable activities in future.

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Finally, there is the main health work of the Red Cross, which could be said to constitute its hub: education. Official schemes and activities for the benefit of the population essentially demand active participation of the latter for national health work to bear fruit. Hence the importance of health education to which the Red Cross can continue to make a very important contribution in every country, owing to its familiarity with national life, its large audience and the confidence it inspires in every section of the population, on account of its ideals and the disinterested nature of its work. All considered, it would seem that the essence of our present medico-social mission is to obtain general co-operation in governmental schemes. This can bring about that joining of all forces in every country which is essential for any lasting progress in world health to be achieved.

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FIRST AID

First aid, before it existed as such, was the very first activity of the Red Cross and its starting point. A hundred years later, it still constitutes the essential basic activity of any National Society.

There is an obvious reason for this: first aid corresponds to an emergency situation produced by suffering, often in an impressive and dramatic form. It can be primordial in saving a life. It is a first step on the way to clinical intervention of which it is merely an auxiliary.

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It is consequently easy to understand the importance of training volunteers according to simple but precise methods. The League was desirous of achieving this from the very beginning. It carefully considered the matter and in 1924 a Resolution of the General Council (No. 36) requested the League Secretariat "to study the unification and standardisation of the main lines of the training of "Samaritans"". Much more recently, in 1961, a Resolution adopted by the Board of Governors (No. 17), at its XXVith Session in Prague, instructed the Chairman of the Health and Social Service Advisory Committee and the League Secretary General to set up a Commission on First Aid Practice. The aim of this Commission is to formulate technical and pedagogical first aid methods in line with the needs and solutions offered by the world of today. At its first meeting (1963, Geneva), it examined two instances in which speedy intervention is required within the limits dictated by the subsequent role of the doctor: haemorrhages and artificial respiration. Its conclusions, which will be submitted to the Health and Social Service Advisory Committee, have been communicated to all the National Societies for their information.

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Recruitment and training of instructors are just as important problems as the training of first aiders. They have been solved satisfactorily by many of the National Societies (a special document in the Health and Social Service Bureau's Medico-Social Series⁽¹⁾ deals with this subject), but not by the new Societies. One of the League's aims in its Development programme is to facilitate the training of instructors either by sending out experts from more experienced sister Societies or by organising training courses, or again by arranging study visits.

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(1) "The Training of First Aid Instructors", MSD No. 22

First aid training, which awakens a sense of individual responsibility for personal and others' health concerns all the members of the population. Thereby - we would strongly underline - it constitutes a means of Red Cross education of the general public. This opens up a way for the National Societies in developing countries, where first aid instruction can include lessons in personal and environmental hygiene and the fight against disease. The mission of National Societies in countries with a high standard of living is different in this sphere, but is none the less essential (fight against social diseases, abuse of medicine, accident prevention, mental health, etc.)

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Since first aid concerns everyone, it is a community service, and many of the National Societies are charged with giving courses to the members of private and public corps (police, firemen, teachers, etc.).

The social aspect of first aid finds its fullest expression in the first aid teams trained to hold themselves ready for action in the event of a major disaster, (sometimes in conjunction with Civil Defence) or to exercise medical supervision during important public celebrations. These well trained teams are sometimes given supplementary instruction in "specialised" first aid (highway first aid, water safety, mountain rescue, industrial first aid, etc.). Beyond this, first aid teams can be considered as a trained "striking force", a nursery of ready helpers, willing to apply their energies to new tasks falling to National Societies. First aid undoubtedly offers a means of recruiting volunteers anxious to realise their ideal of devotion by service to others and logically constitutes the basic framework, technically and morally, of a National Society's medico-social action.

The League therefore promotes international meetings of first aid teams, which enable them to compare techniques and at the same time foster their common ideal of service to mankind. It is significant that the first gathering of this type should have taken place in June 1959 at Salo, a few miles from Solferino, just before the hundredth anniversary of that oft-cited battle. When the present Report is submitted the most recent of these meetings will have come to a close at Macolin (Switzerland); it will have been attended by the teams of some 30 National Societies from all over the world.

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ACCIDENT PREVENTION AND HEALTH EDUCATION

"The growing number of accidents at home, in schools, at sports, on the streets and at work, are tending to become an increasingly important cause of death and disablement amongst adults and children".⁽¹⁾ Accidents can be considered as a social illness and even the word "epidemiology" is applied in that context.

Here again is a problem which is the responsibility of the public authorities, only to take road safety, for example. The Red Cross nevertheless has an important task in this connection, because whatever steps of a general order may be taken, prevention is only effective if those concerned receive safety education, whether it be the mother of a family, a school-child, or a worker. In a word "keener safety consciousness" has to be developed among the members of the public. First aid and blood transfusion already fall within the National Societies' "Safety Services", and accident prevention (at home, at school, in places of work, in the street) is a subject to which the Societies and their Junior Sections have given special attention and which the League has continued to study with a view to providing information and coordinating any Red Cross action.

Viewed in this way, accident prevention is inseparable from health education.

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All through this Report we have emphasised the important role the Red Cross is called upon to play in public health education. This is "an essential component of all Red Cross medico-social and educational activities", as stated in Resolution No. 26 of the XIXth International Conference of the Red Cross.

Health education certainly remains a governmental responsibility. It implies a general programme of public health and the assistance of qualified experts. While these are too ambitious for the Red Cross, its position nevertheless once again depends upon the urgency of a situation. Pending the implementation of governmental schemes, it is for the National Societies to launch pilot projects. These form part of their health action and enable them to take an active part in educating the public. Health educators can moreover give valuable assistance to the National Societies in training Red Cross auxiliary workers. This enables Red Cross volunteers, first aid teams, blood donors and hospital and dispensary personnel to assume their responsibilities for the health of the community. Here the importance of home nursing courses and the Junior Red Cross programme, with its ideal of protecting "health and life" should be stressed.

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(1) XIXth International Conference of the Red Cross, 1957, Resolution No. 25.

BLOOD TRANSFUSION

Technical progress, which is at the root of the rising accident rate, and the evolution of therapy combine to make blood transfusion questions increasingly harrassing.

It is a world problem, as pointed out in a recent League booklet⁽¹⁾ and few countries have so far found a satisfactory solution. The Red Cross has had to grapple with it precisely on account of its emergency character.

The solutions offered by National Societies have varied according to national requirements. Some have even been entrusted with full responsibility and others partial responsibility for the National Blood Transfusion Service. But most of them concentrate on the recruitment of blood donors.

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Transfusion involves two different problems, the first of which might be qualified as purely medico-social: the recruitment of donors.

There is no substitute for blood, as we all know. To obtain it, appeal must be made to human beings. The gift of blood can only be conceived as a free gift, to which no conditions are attached.

Blood transfusion is consequently dependent on the understanding and goodwill of the public. Its members must be educated, their indifference and prejudices overcome, an ideal of neighbourly service and a sense of responsibility developed. The role of the Red Cross is easy to perceive, and has now received wide recognition; the participation of the League in the work of the Council of Europe (at its request) affords an illustration.

The Red Cross is of the greatest help in recruitment campaigns, with its members and volunteer teams ready to place themselves at the disposal of the operation. On these occasions it endeavours to convert the occasional donor thus recruited into a regular donor, for that is what is needed. In this connection, the role of donors' societies under the sponsorship of the Red Cross, cannot be too strongly stressed.

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The recruitment of blood donors however raises different problems in different countries. To facilitate matters for the National Societies, the League has already organised two International Seminars (Rome 1958, Tokyo 1960) where they discussed their difficulties together and compared the choice of solutions. It has also published an outline of the means employed

(1) "The gift of blood and some international aspects of blood transfusion - The rôle of the Red Cross".

by National Societies in its Medico-Social Series.⁽¹⁾ But whatever means are employed, it is motivation which in the last issue will make the individual decide to give his blood. The Health and Social Service Bureau plans to launch an enquiry among the National Societies on this key question, whose results will be submitted to the next Red Cross International Seminar on Blood Transfusion planned for 1964 in Stockholm.

* * *

The second aspect of the problem of transfusion, as it refers to the Red Cross is more closely linked with the technical side: on account of gaps on the national level, the Societies have had to establish transfusion centres, which involve heavy expenditure on equipment and demand a highly qualified personnel. The League works closely with the World Health Organization (WHO) and the International Blood Transfusion Society (IBTS) in these matters, and several of their experts are members of and advisers to the Red Cross. Moreover, the Red Cross International Seminars have been arranged in conjunction with the IBTS Congresses and have awakened the interest and understanding of experts from all over the world to such an extent that at the most recent of these (September 1962, Mexico) the study of Red Cross problems was actually included in the Congress programme.

* * *

The League receives the support of qualified experts who meet to study the main questions that arise in connection with the role of the Red Cross in transfusion.

Among these is the very current question of transfusion instruction in Medical Faculties and Schools of Nursing.

Special attention has been given to the needs of National Societies in developing countries and the League has promoted the idea of "sponsorship" here, "with the aim of interesting a National Society with experience in a given medico-social field in similar activities undertaken by a sister Society in the process of development".⁽²⁾

Requests for assistance made simultaneously by National Societies and their governments are moreover jointly considered by WHO and the League, and the latter has several times placed experts at the disposal of WHO to study the situation on the spot.

(1) "Blood Donor Recruitment - Ideas and suggestions", MSD No. 16

(2) XXVIth Session of the Board of Governors, Prague 1961, Resolution No. 19.

Finally, the problem of the actual equipment of transfusion centres is now being studied by the League, WHO and the IBTS as a team, and a Handbook on minimum requirements will shortly be published.

* * *

It is easy to conceive the importance of training Red Cross professional and auxiliary workers for donor recruitment and the technical services of Transfusion Centres. The League is attentive to this and does all it can to arrange study visits and field work for qualified members of National Societies, whereby that active international cooperation is established among the National Societies which illustrates that blood transfusion, in the same way as all activities for the benefit of health, obviously knows no frontiers.

* * *

THE RED CROSS AND SOCIAL SERVICES

(principles, training of personnel, social work for the chronically ill and handicapped, general child welfare.)

The rapid evolution of today's world from the economic and social angles is a much discussed theme; it cannot, however, be passed over in silence when it is a question of considering the social work of an organisation, whether governmental or private.

In the same way as for any other social institution, the activities of the Red Cross bear the imprint of this changing world.

If an attempt were made to trace the history of their development, it would be found that as far back as 1934 the International Conference of the Red Cross recognized the importance of health and welfare work and in 1936 the Board of Governors noted "the growing interest of National Red Cross Societies in many different forms of social work"; in 1948, the International Conference urged the importance of social work, recommending cooperation with national and international social welfare organisations, and the appointment of qualified professional workers at the head of National Societies' social assistance services. Later, in 1958, we observe that the Executive Committee approved the organisation of a Working Party to study social work. This project was implemented in 1960 with the cooperation of United Nations Technical Assistance, with the direct result that an Expert Committee on Social Welfare was set up and met in February 1963 at League Headquarters.

New needs imply new measures; these demand a lively imagination always able to find a solution for unfamiliar problems resulting from modifications of family, social and occupational structures.

This clearly shows how difficult it is to define the social work of the Red Cross.

Its activities, however, despite their varied character, follow certain principles. They raise problems which are to be found to some degree almost everywhere; among them the training of personnel is certainly not the least important.

The underlying principles are those which guide the general policy of the Red Cross, whether it is a question of social work or any other activity.

While at the present time it can obviously not have the ambition of covering a whole country so far as social work is concerned, it can engage in pilot experiments and open up the way for official bodies with their more complex administrative machinery.

The line of conduct assumed by the Red Cross is to act as a pioneer, fully aware of its possibilities and limitations and to be wise enough when the time comes to hand over whatever it has set in motion to some body better qualified or better equipped to handle the work.

The problem of the training of personnel is far from new, but in a world where technics are occupying an increasingly important place, where social work,

itself in full development, aims at assuming the character of both an art and a science, in which intuition is used to serve method, the Red Cross could not simply rely on the goodwill of its voluntary workers. It, therefore, had to draw up courses at different levels for a series of social service activities, in order not only to train volunteers as social workers aides, gray ladies, hospital hostesses, recreational therapists, etc. but also personnel to teach them.

The contents of these courses naturally rejoin one another insofar as the human element is always present in such activities: in particular they must include the rudiments of psychology and more specifically the psychology of one whose health is impaired, which make it easier to understand the person who is no longer fit. Other more specific instruction, such as elementary anatomy and medicine, is given by some Societies to recreational therapists, in line with the aim of the course.

These National Societies are fully aware of the superficial character of this instruction and their only ambition is to train auxiliary personnel which alongside official bodies, can help to overcome daily difficulties, introduce a human note and at times give technical assistance where Science or the Law of Numbers has relegated the human being to the rank of a "case".

The "catalogue" of social service activities is eloquent as regards the varying forms assumed by Red Cross social work, but it would seem that nowadays the National Societies in economically developed countries are particularly concentrating on those to whom life has been unkind - the handicapped, old people, all those who find themselves in a state of passing or permanent inferiority. The change in the work of the Red Cross Societies, inspired by their unwavering desire to act as pioneers and to avoid any overlapping, deserves to be pointed out at this juncture. While the child was, and still is for some of the National Societies, the centre of their medico-social activities, they are to be seen progressively drawing away from this as governments assume responsibility. In many countries, however, maternal and child welfare is not yet looked upon as an entirely governmental responsibility and it is the Red Cross which has the task of protecting the child, not only by caring for it if necessary, but also by educating mothers in the course of pre- and post-natal consultations or milk or food distributions. A whole process of health education is effected during these moments, when mothers are particularly open to medico-social advice.

In many cases, the Red Cross, after drawing the public authorities' attention to the lot and living conditions of children, turns to old people, whose last years of life are often a sore trial, as they have to cope unaided with the difficulties of existence, deserted by everyone in this modern world in which the old but rarely find a corner in the home.

But how attract the authorities' attention except by means of direct experience which makes it possible to base one's arguments on facts?

This was what first induced the Red Cross, apart from its traditional Homes or Institutions, to cross the threshold of these waiting rooms of death, bringing with it a breath of fresh air and arousing new interest in life by means of recreational therapy, libraries, outings, etc.

Before long, a new idea was conceived: why not go to the private homes of the old, chronically ill, handicapped, to enable them to remain surrounded by familiar persons and things as long as possible?

This was how meals on wheels services, domestic help, recreational therapy, chiropody, etc. came to be instituted.

There is a similar wide range of activities for the handicapped, which unfold in line with the evolution of science itself. While Red Cross action in this connection may appear quite secondary, it nevertheless helps to reintegrate the handicapped into social and economic life.

The dynamic elements of Red Cross social work are threefold: detect a need, launch an activity to meet it, and withdraw when the work is ready to be carried out on a larger scale. This also explains the variety of tasks undertaken.

If it is true, as the League Expert Committee on Social Welfare thought in February 1963, that in order to live in society we must have opportunities of expressing our humanitarian instincts, and that volunteer work is just as indispensable for the volunteer as for the beneficiary, the widely varied activities of the Red Cross offer an excellent programme which all people of goodwill can accept, whatever the standard of living in the country concerned.

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DS/2/6

HEALTH AND SOCIAL COMMISSION

Item 2 of the Agenda

The Red Cross and Public Health

Draft Resolution submitted by the Red Cross Societies of Argentina, Chile, Cuba, Colombia, Spain, El Salvador, Mexico, Nicaragua, Peru and Uruguay.

It is recommended that

the League increase its technical and material assistance in order that the National Societies may instruct and engage in first aid, and may receive the cooperation and assistance that will permit the training of first aid experts.

CONGRÈS DU CENTENAIRE DE LA CROIX-ROUGE INTERNATIONALE

Genève, 28 août - 10 septembre 1963

CONSEIL DES DÉLÉGUÉS

DS/2/6

COMMISSION DE LA SANTE ET DES AFFAIRES SOCIALES

Point 2 de l'ordre du jour

La Croix-Rouge et la santé publique

Projet de résolution présenté par les Sociétés de la Croix-Rouge de l'Argentine, du Chili, de Cuba, de la Colombie, de l'Espagne, du Mexique, du Nicaragua, du Pérou, du Salvador et de l'Uruguay.

La Commission RECOMMANDE

que la Ligue intensifie son assistance sur le plan technique et matériel de façon que les Sociétés nationales soient en mesure d'assurer l'enseignement et la pratique des premiers secours et de bénéficier de la coopération et de l'assistance qui leur permettront de procéder à la formation de spécialistes dans ce domaine.

P.2106/GRo/2.9.63

CENTENARY CONGRESS OF THE INTERNATIONAL RED CROSS

Geneva. 28 August - 10 September 1963

COUNCIL OF DELEGATES

DS/2/7

HEALTH AND SOCIAL AFFAIRS COMMISSION

Item 2 of the Agenda

THE RED CROSS AND PUBLIC HEALTH

EMERGENCY FIRST AID - ACCIDENT PREVENTION

Draft Resolution submitted by the
Argentine Red Cross Society

WHEREAS

Accidents are always a misfortune for the victim, whether of an individual or collective nature,

They may be fatal or cause physical, mental, material, moral or financial and social prejudice not only to the individual but also to the family, the group concerned, the community or the nation,

They head the list in mortality tables of causes of death, especially where children and young people are concerned,

They show a constant increase in the home, on the highway and in the streets, on playing fields and on industrial premises, and the causes thereof are varied, thus excluding a general solution, although the human factor and environment, constitute elements representing possible dangers which must be taken into account when seeking to prevent them

THE ARGENTINE DELEGATION RECOMMENDS THAT

1. Increased efforts be made to educate the public in this respect, through the intermediary primarily of doctors, school teachers and all those whose role it is to stimulate, inspire and coordinate general safety and wellbeing;

2. Wider research should be made into the causes of accidents, especially as regards the human factor;
3. Laws be established making it compulsory to notify accidents, prohibiting the sale of certain articles and products: insecticides, poisons, drugs, other noxious products;
4. The emergency services be improved and properly trained teams be attached thereto (doctors, traumatologists, transfusion experts, nurses/or orderlies, etc.) in order that reliable assistance may be rapidly forthcoming and recovery may proceed under the best conditions;
5. All the National Societies coordinate their efforts through the League's intermediary in order to take advantage in every area of regional emergency posts, which can provide speedy and complete first aid;
6. Home nursing be taught by instructors, and especially by graduate nurses, and exceptionally by midwives, school teachers, domestic science teachers and social workers with a gift for teaching.

CENTENARY CONGRESS OF THE INTERNATIONAL RED CROSS

Geneva. 28 August - 10 September 1963

COUNCIL OF DELEGATES

DS/2/11

HEALTH AND SOCIAL AFFAIRS COMMISSION

Item 2 of the Agenda

THE RED CROSS AND PUBLIC HEALTH

(Draft Resolution submitted by the Red Cross Societies of Argentina, Chile, Cuba, Colombia, Mexico, Nicaragua, Peru, Salvador, Spain and Uruguay)

FIRST AID

Expansion of First Aid among National Societies

The Health and Social Affairs Commission of the Council of Delegates,

considering First Aid as an essential activity of National Societies and the teaching of the subject to the public as an intrinsic part of the activity of the Red Cross in promoting good health,

considering the role which First Aid teams in particular are called upon to play in the varied aspects of health education of the greatest importance,

draws the attention of recently-founded National Societies to the importance of encouraging the holding of First Aid courses and of the organisation of properly-trained First Aid teams,

underlines the essential duty, in this field, of training instructors and leaders in the various grades of the National Society,

requests the old-established and more experienced sister-Societies to afford, through the League, every possible assistance with the object of training First Aid leaders and increase the number of First Aid teams among recently-founded National Societies.

CONGRESO DEL CENTENARIO DE LA CRUZ ROJA INTERNACIONAL

Ginebra, 28 de Agosto - 10 de Septiembre de 1963

CONSEJO DE DELEGADOS DS/2/11

COMISION DE LA SALUD Y ASUNTOS SOCIALES

Punto 2 del Orden del Día

La Cruz Roja y la salud pública

Proyecto de Resolución presentado por las Sociedades de la Cruz Roja Argentina, Colombia, Cuba, Chile, El Salvador, España, México, Nicaragua, Perú y Uruguay

PRIMEROS SOCORROS

Desarrollo de los Primeros Socorros en las Sociedades nacionales

La Comisión de la Salud y Asuntos Sociales del Consejo de Delegados,

considerando los primeros socorros como una actividad de base de las Sociedades nacionales y su enseñanza a la población como parte integrante de la acción de la Cruz Roja en favor de la salud,

considerando el cometido primordial que pueden asumir, en particular los equipos de primeros socorros, en los múltiples sectores de la educación sanitaria,

llama la atención de las Sociedades nacionales de reciente formación, sobre la importancia que presenta la difusión de los cursos de primeros socorros, y la formación de equipos de socorristas debidamente adiestrados,

subraya el cometido esencial, en este dominio, de la preparación de los instructores y de los responsables, en los diferentes grados de la Sociedad nacional,

ruega a las Sociedades hermanas más antiguas y más experimentadas, que presten toda la ayuda posible, por intermedio de la Liga, a la formación de responsables de socorrismo y al desarrollo de equipos de primeros socorros en las Sociedades nacionales de nueva creación.

CENTENARY CONGRESS OF THE INTERNATIONAL RED CROSS

Geneva. 28 August - 10 September 1963

COUNCIL OF DELEGATES

DS/2/12

HEALTH AND SOCIAL COMMISSION

Item 2 of the Agenda

RED CROSS AND HEALTH SERVICES

Draft resolution presented by the Argentine Red Cross

The Health and Social Commission of the Council of Delegates,

in consideration of Resolution No. XXV of the XIXth International Conference and Resolution No. XVI of the XXVIth Session of the Board of Governors, on health education and accident prevention,

recalling the mission of the Red Cross in public health and aware of the educational role the Red Cross is called upon to play, by reason of its moral credit with and the vast response it obtains from the general public,

emphasises the vital part which National Societies can take in the health education of the public, and, more particularly, in the prevention of accidents, firstly through their various branches of activity and the work of their numerous volunteers, and secondly by drawing the attention of the public authorities, teachers and doctors to the problems of health education and accident prevention,

encourages National Societies to continue their activity in this field in cooperation with the public authorities and specialised agencies, particularly in respect of the prevention of accidents and disease.

CENTENARY CONGRESS OF THE INTERNATIONAL RED CROSS

Geneva. 28 August - 10 September 1963

COUNCIL OF DELEGATES

DS/2/13

HEALTH AND SOCIAL AFFAIRS COMMISSION

Item 2 of the Agenda

THE RED CROSS AND PUBLIC HEALTH

(Draft Resolution presented by the Health and Social Affairs Commission)

FIRST AID

Simplification and Standardization of Techniques

The Health and Social Affairs Commission of the Council of Delegates,

bearing in mind Resolution No. XXIII of the XXVth Session of the Board of Governors and also Resolution No. XVII of the XXVIth Session of the Board of Governors,

considering the objective undertaken by the First Aid Advisory Committee of the Health and Social Affairs Commission of the League and the encouraging results achieved at the International Meeting of Red Cross First Aid Workers at Macolin in 1963,

proposes the promotion of simplification and standardization of first aid methods and equipment, both on the national and the international levels,

to this end, encourages the League to repeat at regular intervals the organization of such international meetings of first aid workers, where the representatives of National Societies who are qualified in first aid training may pool their experiences, in accordance with the work of the First Aid Committee,

invited the National Societies to take the results of such meetings into consideration and as far as possible keep their members who are responsible for first aid advised of such experiences,

in the same order of ideas, requests National Societies to promote the first aid work of the Red Cross by regularly communicating to the League their achievements in this field and to circulate amongst the members concerned such documents which the League might publish on basis of the information communicated to it.

P.2142/hrb/3/9/63

CONGRESO DEL CENTENARIO DE LA CRUZ ROJA INTERNACIONAL

Ginebra, 28 de Agosto - 10 de Septiembre de 1963

CONSEJO DE DELEGADOS

DS/2/14

COMISION DE LA SALUD Y ASUNTOS SOCIALES

Punto 2 del Orden del Día

La Cruz Roja y la salud pública

TRANSFUSIÓN SANGUINEA

Proyecto de Resolución presentado por la Comisión de la Salud y Asuntos Sociales del Consejo de Delegados

La Comisión de la Salud y Asuntos Sociales del Consejo de Delegados

subrayando los términos de la Resolución XIV de la XXV Reunión del Consejo de Gobernadores, y de la Resolución XIX de la XXVI Reunión del Consejo de Gobernadores,

vuelve a afirmar el cometido que está llamada a asumir la Cruz Roja en el sector de la transfusión, problema actual de particular urgencia y cuya solución exige una verdadera educación por parte de la población,

invita a las Sociedades nacionales a que continúen esta educación del público, trabajando activamente para el reclutamiento de dadores de sangre, regulares y voluntarios y a que presten a los poderes públicos cuanto ayuda puedan, con miras al desarrollo de la transfusión en su país,

da las gracias a la Liga por la ayuda y la coordinación que ha aportado al esfuerzo de las Sociedades nacionales en favor de las Sociedades hermanas menos experimentadas, y la ruega que prosiga sus actividades, favoreciendo los intercambios de experiencia entre las Sociedades (encuentros y seminarios) así como la ayuda técnica (padrinazgos, envío de expertos, donativos y préstamo de material),

ruega a la Liga que continúe su colaboración con las grandes organizaciones internacionales interesadas por la transfusión (Organización Mundial de la Salud, Sociedad Internacional de Transfusión Sanguínea, Consejo para Europa) con miras a una acción común cada vez más eficaz ante los poderes públicos y también ante las poblaciones.

CENTENARY CONGRESS OF THE INTERNATIONAL RED CROSS

Geneva. 28 August - 10 September 1963

COUNCIL OF DELEGATES

DS/2/14

HEALTH AND SOCIAL AFFAIRS COMMISSION

Item 2 of the Agenda

THE RED CROSS AND PUBLIC HEALTH

(Draft Resolution presented by the Health and Social Affairs Commission)

BLOOD TRANSFUSION

The Health and Social Affairs Commission of the Council of Delegates,

stressing the terms of Resolution No. XIV of the XXVth Session of the Board of Governors and of Resolution No. XIX of the XXVIth Session of the Board of Governors,

reaffirms the rôle which the Red Cross is called upon to play in the field of blood transfusion, which is a particularly topical and urgent problem the solution of which demands a real work of education of the public,

invites the National Societies to continue this education of the public by actively working for the recruitment of regular volunteer donors and by backing up the civil authorities with all possible assistance with a view to the promotion of the popularisation of blood transfusion in their countries,

thanks the League for the help it has given to National Societies and for having co-ordinated their efforts on behalf of the less experienced sister-societies and invites the League to continue its activities to foster the exchange amongst Societies, of experience, (for instance by meetings and seminars), and of technical assistance, (patronage, delegation of experts, donations and loans of equipment),

encourages the League to carry on co-operation with the large international organisations which are concerned with blood transfusion (World Health Organization, International Blood Transfusion Society, Council of Europe) with a view to ever-increasingly effective concerted action vis-à-vis civil authorities and the public.

DS/2/14

COMMISSION DE LA SANTE ET DES AFFAIRES SOCIALES

Point 2 de l'ordre du jour

LA CROIX-ROUGE ET LA SANTE PUBLIQUE

(Projet de résolution présenté par la Commission
de la Santé et des Affaires Sociales)

TRANSFUSION SANGUINE

La Commission de la Santé et des Affaires Sociales du Conseil
des Délégués,

en soulignant les termes de la Résolution XIV de la XXV^e Session
du Conseil des Gouverneurs et de la Résolution XIX de la XXVI^e Session du
Conseil des Gouverneurs,

réaffirme le rôle auquel est appelée la Croix-Rouge dans le
domaine de la transfusion, problème actuel d'une particulière urgence et
dont la solution réclame une véritable éducation de la population,

invite les Sociétés nationales à poursuivre cette éducation
du public, en travaillant activement au recrutement des donneurs de sang
réguliers et bénévoles et à apporter aux pouvoirs publics toute l'aide
possible en vue du développement de la transfusion dans leur pays,

remercie la Ligue pour l'aide et la coordination apportée
à l'effort des Sociétés nationales en faveur de Sociétés soeurs moins
expérimentées et l'invite à poursuivre ses activités en favorisant entre
Sociétés les échanges d'expériences (rencontres et séminaires) et l'aide
technique (parrainages, envoi d'experts, dons et prêts de matériel),

encourage la Ligue à poursuivre sa collaboration avec les gran-
des organisations internationales intéressées à la transfusion (Organisation
Mondiale de la Santé, Société Internationale de Transfusion Sanguine,
Conseil de l'Europe) en vue d'une action commune toujours plus efficace
auprès des pouvoirs publics comme des populations.

F. 2143/lc/3.9.63