WORLD HEALTH ORGANIZATION:
INTERIM COMMISSION

Arrangement signed at New York July 22, 1946
Entered into force July 22, 1946
Terminated August 31, 1948

ARRANGEMENT CONCLUDED BY THE GOVERNMENTS REPRESENTED AT THE INTERNATIONAL HEALTH CONFERENCE, HELD IN THE CITY OF NEW YORK FROM 19 JUNE TO 22 JULY 1946

The governments represented at the International Health Conference convened on 19 June 1946 in the City of New York by the Economic and Social Council of the United Nations,

Having agreed that an international organization to be known as the World Health Organization shall be established,

Having this day agreed upon a Constitution for the World Health Organization, and

Having resolved that, pending the coming into force of the Constitution and the establishment of the World Health Organization, as provided in the Constitution, an Interim Commission should be established,

Agree as follows:

1. There is hereby established an Interim Commission of the World Health Organization consisting of the following eighteen States entitled to designate persons to serve on it: Australia, Brazil, Canada, China, Egypt, France, India, Liberia, Mexico, Netherlands, Norway, Peru, Ukrainian Soviet Socialist Republic, United Kingdom, United States of America, Union of Soviet Socialist Republics, Venezuela and Yugoslavia. Each of these States should designate to the Interim Commission a person technically qualified in the field of health, who may be accompanied by alternates and advisers.

2. The functions of the Interim Commission shall be:

1 Pursuant to a resolution adopted by the First World Health Assembly July 21, 1948.
2 TIAS 1808, post, p. 119.
(a) to convocate the first session of the World Health Assembly as soon as practicable, but not later than six months after the date on which the Constitution of the Organization comes into force;

(b) to prepare and submit to the signatories to this Arrangement, at least six weeks before the first session of the Health Assembly, the provisional agenda for that session and necessary documents and recommendations relating thereto, including:

(i) proposals as to programme and budget for the first year of the Organization,
(ii) studies regarding location of headquarters of the Organization,
(iii) studies regarding the definition of geographical areas with a view to the eventual establishment of regional organizations as contemplated in Chapter XI of the Constitution, due consideration being given to the views of the governments concerned, and
(iv) draft financial and staff regulations for approval by the Health Assembly.

In carrying out the provisions of this paragraph due consideration shall be given to the proceedings of the International Health Conference.

(c) to enter into negotiations with the United Nations with a view to the preparation of an agreement or agreements as contemplated in Article 57 of the Charter of the United Nations and in Article 69 of the Constitution. Such agreement or agreements shall:

(i) provide for effective co-operation between the two organizations in the pursuit of their common purposes;
(ii) facilitate, in conformity with Article 58 of the Charter, the coordination of the policies and activities of the Organization with those of other specialized agencies; and
(iii) at the same time recognize the autonomy of the Organization within the field of its competence as defined in its Constitution.

(d) to take all necessary steps to effect the transfer from the United Nations to the Interim Commission of the functions, activities, and assets of the League of Nations Health Organization which have been assigned to the United Nations;

(e) to take all necessary steps in accordance with the provisions of the Protocol concerning the Office International d’Hygiène publique signed 22 July 1946 for the transfer to the Interim Commission of the duties and functions of the Office, and to initiate any action necessary to facilitate the transfer of the assets and liabilities of the Office to the World Health Organization upon the termination of the Rome Agreement of 1907;

\[ TS 993, \textit{ante}, \text{vol. 3, p. 1153.} \]
\[ TIAS 1754, \textit{post}, \text{p. 114.} \]
\[ TS 511, \textit{ante}, \text{vol. 1, p. 742.} \]
(f) to take all necessary steps for assumption by the Interim Commission of the duties and functions entrusted to the United Nations Relief and Rehabilitation Administration by the International Sanitary Convention, 1944, modifying the International Sanitary Convention of 21 June 1926, the Protocol to Prolong the International Sanitary Convention, 1944, the International Sanitary Convention for Aerial Navigation, 1944, modifying the International Sanitary Convention for Aerial Navigation of 12 April 1933, and the Protocol to Prolong the International Sanitary Convention for Aerial Navigation, 1944;

(g) to enter into the necessary arrangements with the Pan American sanitary organization and other existing inter-governmental regional health organizations with a view to giving effect to the provisions of Article 54 of the Constitution, which arrangements shall be subject to approval by the Health Assembly;

(h) to establish effective relations and enter into negotiations with a view to concluding agreements with other inter-governmental organizations as contemplated in Article 70 of the Constitution;

(i) to study the question of relations with non-governmental international organizations and with national organizations in accordance with Article 71 of the Constitution, and to make interim arrangements for consultation and co-operation with such organizations as the Interim Commission may consider desirable;

(j) to undertake initial preparations for revising, unifying and strengthening existing international sanitary conventions;

(k) to review existing machinery and undertake such preparatory work as may be necessary in connection with:

(i) the next decennial revision of "The International Lists of Causes of Death" (including the lists adopted under the International Agreement of 1934 relating to Statistics of Causes of Death); and

(ii) the establishment of International Lists of Causes of Morbidity;

(l) to establish effective liaison with the Economic and Social Council and such of its commissions as may appear desirable, in particular the Commission on Narcotic Drugs; and

(m) to consider any urgent health problem which may be brought to its notice by any government, to give technical advice in regard thereto, to bring urgent health needs to the attention of governments and organizations which may be in a position to assist, and to take such steps as may be desirable to co-ordinate any assistance such governments and organizations may undertake to provide.

7 TS 762, ante, vol. 2, p. 545.
8 TIAS 1551, ante, p. 53.
9 TS 992, ante, vol. 3, p. 982.
10 TS 901, ante, vol. 3, p. 89.
11 TIAS 1552, ante, p. 56.
12 EAS 80, ante, vol. 3, p. 242
3. The Interim Commission may establish such committees as it considers desirable.

4. The Interim Commission shall elect its Chairman and other officers, adopt its own rules of procedure, and consult such persons as may be necessary to facilitate its work.

5. The Interim Commission shall appoint an Executive Secretary who shall:
   (a) be its chief technical and administrative officer;
   (b) be ex-officio secretary of the Interim Commission and of all committees established by it;
   (c) have direct access to national health administrations in such manner as may be acceptable to the government concerned; and
   (d) perform such other functions and duties as the Interim Commission may determine.

6. The Executive Secretary, subject to the general authority of the Interim Commission, shall appoint such technical and administrative staff as may be required. In making these appointments he shall have due regard for the principles embodied in Article 35 of the Constitution. He shall take into consideration the desirability of appointing available personnel from the staffs of the League of Nations Health Organization, the Office International d'Hygiène publique, and the Health Division of the United Nations Relief and Rehabilitation Administration. He may appoint officials and specialists made available by governments. Pending the recruitment and organization of his staff, he may utilize such technical and administrative assistance as the Secretary-General of the United Nations may make available.

7. The Interim Commission shall hold its first session in New York immediately after its appointment and shall meet thereafter as often as may be necessary, but not less than once in every four months. At each session the Interim Commission shall determine the place of its next session.

8. The expenses of the Interim Commission shall be met from funds provided by the United Nations and for this purpose the Interim Commission shall make the necessary arrangements with the appropriate authorities of the United Nations. Should these funds be insufficient, the Interim Commission may accept advances from governments. Such advances may be set off against the contributions of the governments concerned to the Organization.

9. The Executive Secretary shall prepare and the Interim Commission shall review and approve budget estimates:
   (a) for the period from the establishment of the Interim Commission until 31 December 1946, and
   (b) for subsequent periods as necessary.

10. The Interim Commission shall submit a report of its activities to the Health Assembly at its first session.
11. The Interim Commission shall cease to exist upon resolution of the Health Assembly at its first session, at which time the property and records of the Interim Commission and such of its staff as may be required shall be transferred to the Organization.

12. This Arrangement shall come into force for all signatories on this day’s date.

In faith whereof the undersigned representatives, having been duly authorized for that purpose, sign this Arrangement in the Chinese, English, French, Russian and Spanish languages, all texts being equally authentic.

Signed in the City of New York this twenty-second day of July 1946.

For Argentina:
ALBERTO ZWANCK

For Australia:
Subject to approval and acceptance by Government of Commonwealth of Australia.
A. H. TANGE

For the Kingdom of Belgium:
Subject to ratification [translation].
Dr. M. DE LAET

For Bolivia:
LUIS V. SOTELO

For Brazil:
GERALDO PAULA SOUZA

For Byelorussian Soviet Socialist Republic:
N. EVSTAFIEV

For Canada:
BROOKE CLAXTON
BROCK CHISHOLM

For Chile:
JULIO BUSTOS A.

For China:
SHEN, J. K.
L. CHIN YUAN
SZEMING SZE

For Colombia:
CARLOS URIBE AGUIRRE

For Costa Rica:
JAIME BENAVIDES

For Cuba:
Ad referendum
Dr. PEDRO NOGUEIRA
VICTOR SANTAMARINA

For Czechoslovakia:
Ad referendum
Dr. JOSEF CANČÍK

For Denmark:
Ad referendum
J. OERSKOV

For the Dominican Republic:
Dr. L. F. THOMEN

For Ecuador:
R. NEVAREZ VÁSQUEZ

For Egypt:
Dr. A. T. CHOUCHA
TAHA ELSAYED NASR BEY
M. S. ABASA

For El Salvador:
Ad referendum
ARÍSTIDES MOLL

For Ethiopia:
G. TESSEMA

For France:
J. PARISOT

For Greece:
Dr. PHOKION KOPANARIS

For Guatemala:
Ad referendum
G. MORÁN
J. A. MÚÑOZ

For Haiti:
RULX LEÓN

For Honduras:
JUAN MANUEL FIALLOS
For India:
C. K. LAKSHMANAN
C. MANI
These signatures are appended in agreement with His Majesty's Representative for the exercise of the functions of the Crown in its relations with the Indian States.

For Iran:
GHASSEME GHANI M.D.
H. HAFEZI

For Iraq:
S. AL-ZAHAWI
DR. IHSAN DOGRAMAJI

For Lebanon:
GEORGES HAKIM
DR. A. MAKHLOUF

For Liberia:
JOSEPH NAGBE TOGBA, M.D.
JOHN B. WEST, M.D.

For the Grand Duchy of Luxembourg:
Subject to ratification [translation].
DR. M. DE LAET

For Mexico:
MONDRAGNÓN

For the Kingdom of the Netherlands:
Ad referendum
C. BERG
C. BANNING
W. A. TIMMERMAN

For New Zealand:
Ad referendum
T. R. RITCHIE

For Nicaragua:
A. SEVILLA SACASA

For the Kingdom of Norway:
Ad referendum
H. TH. SANDBERG

For Panama:
Ad referendum
J. J. VALLARINO

For Paraguay:
ANGEL R. GINÉS

For Peru:
CARLOS ENRIQUE PAZ SOLDÁN
ALB. TORANZO

For the Republic of the Philippines:
H. LARA
WALFRIDO DE LEON

For Poland:
EDWARD GRZEGORZEWSKI

For Saudi Arabia:
DR. YAHIA NASRI
DR. MEDHAT CHEIKH EL ARDI

For Syria:
DR. C. TREFI

For Turkey:
Z. N. BARKER

For the Ukrainian Soviet Socialist Republics:
L. I. MEDVED
I. I. KALTCHEK

For the Union of Soviet Socialist Republics:
F. G. KROTKOV

For the United Kingdom of Great Britain and Northern Ireland:
MELVILLE D. MACKENZIE
G. E. YATES

For the United States of America:
THOMAS PARRAN
MARTHA M. ELIOT
FRANK G. BOUDREAU

For Uruguay:
JOSÉ A. MORA
R. RIVERO
CARLOS M. BARBEROUSSE

For Venezuela:
A. ARRIBAZA GUZMÁN

For Yugoslavia:
DR. A. STAMPAR

For Afghanistan:

For Albania:
T. JAKOVA

For Austria:
DR. MARIUS KAISER

For Bulgaria:
DR. D. P. ORAHOVATZ
For Eire:  
  JOHN D. MacCormack

For Finland:  
  OSMO Turpeinen

For Hungary:

For Iceland:

For Italy:  
  GIOVANNI Alberto Canaperia

For Portugal:  
  FRANCISCO JOSE C. Cambournac

For Rumania:

For Siam:  
  BUNLIANG Tamthai

For Sweden:

For Switzerland:  
  Dr. J. Eugster  
  A. Sauter

For Transjordan:  
  Dr. D. P. Tutunji

For Yemen: