# . . . from the Surgeon General's FOREWORD

The fifth decade of this century witnessed some extraordinary advances in international collaboration in the field of public health. Although these advances were partly due to the urgencies of World War II, they have continued into this decade. There is reason to think that, when the history of these troubled times is finally written, the careful historian will see in the emergence of the cooperative health programs in Latin America a significant development in the Western Hemisphere's search for higher levels of health and stability.

The translation of an underlying cooperative spirit into effective action through a joint administrative device, the *Servicio*, marks a significant experiment in international cooperation in health. A will to work together has been coupled with a way to work together in the family of nations.

#### Servicio Principle

The Servicio, as an administrative device, has stood out as one of the special and characteristic features of the Institute of Inter-American Affairs program. The president of the Institute in 1951 described Servicio as:

"... the generic name of the administrative device through which the Institute works with the other American Republics in the execution of technical assistance or basic economic development programs. The Spanish word "Servicio" means service; it is also the synonym for Government bureaus in the United States. A cooperative Servicio is a bureau or department of a ministry of a Latin American government, such as the Ministry of Agriculture, Public Health, or Education. . . .

"Although a Servicio is part of a ministry, it is autonomous in many respects. Its autonomy is derived from the authority vested in the director to determine, with the concurrence of the minister, the administrative procedure to be followed by the Servicio. . . . The Latin American Republic is represented by the minister of the cooperating ministry, and the Institute of Inter-American Affairs is represented by the chief of field party. The Insti-

tute sends to the American Republic such technicians as are required and names as the head of the group a chief of field party. The minister and the chief of field party are coequals in developing the administrative techniques to be followed by the Servicio."

#### The Task of Evaluation

To characterize the Servicio is one thing. To attempt to trace and evaluate the operation of the Servicio in all its multiphasic detail and significance is quite another.

The Public Health Service's report represents an initial step toward tracing and evaluating the operation of the Servicio in inter-American cooperative agreements. The study is the first of its kind, and is, therefore, unique. It was a shared project in which the chiefs of field party and the specialists of the evaluation team worked together in the field and later around a conference table in Washington. Their aim throughout, through the process of give and take in frank discussion, was to reach a consensus on the final report. Although time limitations prevented gathering the ideal amount of survey data, the report as a whole gives a picture of the program and sets out some guideposts. Incomplete as the study may be, it can serve as a springboard for further accomplishment in international cooperation for the advancement of health.

LEONARD A. SCHEELE, M.D.

# . . . from the IIAA President's INTRODUCTION

During the decade 1942-52 many factors gave impetus to the widespread development of public health throughout the Americas. In light of the importance of public health promotion on a worldwide basis, it seemed important to make some estimate of the values inherent in the joint programs of the Institute of Inter-American Affairs, and to determine somehow, if at all possible, the particular merits of the techniques used and the value and effectiveness of programs focused, as these were, at certain defined areas of health development. It was considered necessary that the facts at least be placed in the open for others to study.

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With these ends in view, the Institute determined upon an evaluation of its accomplishments in health, yes, and its failures. It wished this to be as objective as possible. It therefore suggested to the Public Health Service, which has had wide and varied experience in evaluating programs within the United States, that it undertake this task. The Public Health Service agreed to attempt the job and has produced a report unique in character and charged with solid values. The evaluation has been not a dead analysis, but a creative assessment, a guide for the future.

That such an undertaking was impossible of accomplishment on any quantitative, traditional, statistical basis was evident from the fact that the basic data concerning the underlying problems and the progress made toward their solution were lacking. This lack is indeed one of the outstanding problems in Latin America even today. It is one to which too little attention has been paid during the course of the years in the international programs. Further to complicate the problem, the Institute itself did not have basic data with which to measure truly the effect of its individual projects and their impact upon communities. The program from the beginning was an action program which under the exigencies and pressures of war did not allow for the basic studies and the establishment of measuring rods which were known to be desirable. Under war conditions, the indispensable was dispensed with.

The impact upon crude health problems which could be easily seen by the untrained eve could not be measured to the full satisfaction of the technically trained. Many thousands throughout the hemisphere feel, live, and know the deep and truly great values of this program. Recognizing that a cold routine analysis could not be made, it remained, therefore, to determine how an estimate of the accomplishments of the program could be arrived at with the greatest objectivity. It was apparent both to the Public Health Service and to the Institute that an evaluation of the accomplishments of the program would have to be limited to a comparatively quick but nonetheless expert "look-see," one which, while not exhaustive, would carry authority in the world of public health.

C. O. Rowe, Acting President.

## The Evaluation Survey

The survey was a joint undertaking of the Public Health Service and the Institute of Inter-American Affairs. Representing the Service until his death in April 1952 was Joseph W. Mountin, M.D., chief of the Bureau of State Services. He was succeeded by J. O. Dean, M.D., associate chief of the Bureau of State Services. Representing the Institute was Henry Van Zile Hyde, M. D., then director of the Division of Health and Sanitation, Institute of Inter-American Affairs, now chief of the Division of International Health, Public Health Service.

### The Evaluation Team

Wilton L. Halverson, M.D., director, California Department of Public Health (team director).

John J. Bourke, M.D., executive director of the New York State Joint Hospital Survey and Planning Commission.

Earl V. Bradsher, director of Welfare Administration for New York City and formerly a staff member of the Public Administration Service.

Edna F. Brandt, assistant chief nurse, Division of Chronic Disease and Tuberculosis, Public Health Service.

Mayhew Derryberry, Ph.D., chief of the Division of Public Health Education, Public Health Service.

**George M. Foster, Ph.D.,** visiting professor of anthropology, University of California, and formerly director of the Institute of Social Anthropology, Smithsonian Institution.

**Richard F. Poston,** officer in charge of Western Gulf and Colorado Drainage Basins Office for Stream Pollution Control, Public Health Service.

**George K. Strode, M.D.,** formerly director of the Division of International Health, Rockefeller Foundation.

The evaluation team was assisted by A. Joan Klebba of the Institute of Inter-American Affairs and Howard Wheeler of the Public Health Service, who contributed to the development of historical data and made extended search and analysis of file material.