Nearly seventy-five years ago, our Organization began operations in a corner of the Pan American Union in Washington, D.C. Its small staff was charged by its Member Governments with a relatively clear-cut task: to straighten out the maze of quarantine regulations which were then hampering the commerce between the nations of the Americas.

In the intervening three-quarters of a century, as mankind set new standards for itself and new goals in public health, our Organization grew and was given many new responsibilities. Today, foremost among these is the campaign to make basic health services available to all the people in our Hemisphere.

Thus, born as a vehicle to promote participation by the community of nations to improve health, PAHO is now cooperating with these nations to improve health conditions in each of the Hemisphere’s hundreds of thousands of communities. Once again, we will reach our goal through participation, not only by nations, but also by the individual members of the communities involved. For this reason, PAHO’s Member Governments have selected “Community Participation in Health” as the theme for this 75th anniversary of the Pan American Health Organization.

Until quite recently, most experts working in international development believed that we could focus our efforts on rapid economic growth. This, they believed, would produce the fuel needed to move society ahead on all fronts, thus reducing the general level of poverty.

But no such reduction has occurred. So we are forced to conclude that many elements in society will have to change before a real improvement takes place. Whole institutions, whole social systems must change, and this will only happen if many individual people are motivated to shoulder new responsibilities in helping themselves and their communities. In short, real social improvements cannot be brought in from outside or from above; they must come from within.
In essence, such internal improvement depends on educating both societies and individuals to increase their capacity to identify and solve their own problems. And this is achieved through responsible, active, and informed community participation.

Therefore, our approach for the future must depart from the experience of the past. Formerly, development programs used communities to achieve objectives that were preestablished by the program's technical personnel. The needs and expectations of the communities themselves were disregarded. The attitudes and behavior of their members were ignored. Promises made to the communities were not fulfilled, thus creating a feeling of distrust and frustration which experts incorrectly interpreted as community apathy or indifference to progress.

Part of the problem has been that development programs have been modeled on experiences from the developed countries that are not suited to the cultural, social, and political conditions of the developing countries. Communities have been used as instruments—either to operate health services or to carry out test programs confirming the effectiveness and efficiency of specific techniques—without giving due consideration to the fact that human beings are the subjects and the objects of development.

We have learned to facilitate cooperation among communities of nations. Our task for the coming years is to duplicate this success at the level of towns, villages, and neighborhoods. This is the theme of PAHO's 75th anniversary, and this is our future goal.

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