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REPORT ON THE FIFTH SUMMIT OF THE AMERICAS

Introduction

1. The goal of this document is to report to the Governing Bodies of the Pan American Health Organization (PAHO) on the results of the Summit of the Americas held in Port-of-Spain, Trinidad and Tobago, from 17 to 19 April 2009 and, in particular, to highlight the principal health mandates from the Heads of State and Government set forth in the Declaration of Port-of-Spain and the role that the PAHO Secretariat will play in follow-up to these mandates.

Fifth Summit of the Americas, Trinidad and Tobago, 2009

2. The Summit was characterized by cordial atmosphere and open dialogue. It was presided over by the Honorable Prime Minister of Trinidad and Tobago, Patrick Manning. Some 34 Heads of States and Government from countries in the Americas attended, as did the directors and heads of 12 international organizations, including the Director of the Pan American Sanitary Bureau (PASB), Dr. Mirta Roses-Periago.

3. Prior to the Summit, meetings were held with civil society, the private sector, the Youth Forum, and the Indigenous People's Forum to discuss different items on the hemispheric agenda.

4. The Agenda of the Fifth Summit of the Americas included items such as the global economic and financial crisis and its impact on the Region, emphasizing threats to the social achievements in poverty reduction, unemployment, health, and education. The issues of social development and human prosperity, as well as energy security, global warming, public security, and democratic governance were also discussed.

5. The Declaration of Commitment of Port-of-Spain “Securing Our Citizens’ Future by Promoting Human Prosperity, Energy Security, and Environmental Sustainability” was negotiated over a nine-month period by the Member States at Summit Implementation Review Group (SIRG) meetings. The Prime Minister of Trinidad and Tobago signed the Declaration on behalf of the Heads of State and Government of the countries of the Hemisphere. PASB participated in this negotiation process and assisted the Summit Implementation Review Group (SIRG) in negotiating the paragraphs on health and related topics.

Hemispheric Health in the Declaration of Commitment of Port-of-Spain

6. The Declaration of Commitment of Port-of-Spain “Securing Our Citizens’ Future by Promoting Human Prosperity, Energy Security, and Environmental Sustainability” has 97 paragraphs, including the preamble. Thirteen paragraphs are devoted to public health issues in the Hemisphere; there are paragraphs on environmental sustainability, and one on public security. (See Table No. 1). The full text of the Declaration can be accessed in the four official languages at <http://www.summit-americas.org/defaults.htm>.

7. Health occupies an important place in the Declaration, and the Heads of State and Government expressly request the collaboration of the Pan American Health Organization (PAHO) and the Joint Summit Working Group (JSWG), of which PAHO is part, to help Member States comply with these mandates.

8. The Declaration includes a commitment to promote universal access to health care and to address the problems of the most vulnerable groups. Increasing social protection in health and access to services based on primary health care (PHC) are the main strategies for meeting these objectives (paragraphs 26, 31).

9. The Region is to be recognized for the significant steps it has taken to reduce mortality in children under 5, but neonatal mortality has not fallen at the same rate. PAHO support is requested, so that it can continue helping the countries address this problem through implementation of the Regional Strategy and Plan of Action for Neonatal Health within the Continuum of Maternal, Newborn, and Child Care. (Paragraph 27). Special attention is paid to reducing the incidence of vertical, or mother-to-child, transmission of HIV to less than 5% by 2015 (paragraph 35).

10. There is a need for improved access to safe and nutritious food to address the problem of malnutrition, especially for vulnerable groups and children under 5. Mention is also made of other problems linked with an unhealthy diet—for example, obesity and diabetes—which are highlighted in paragraph 4 of the Declaration (paragraphs 24, 32, 33). International organizations are called upon to support countries in fighting malnutrition using a multisectoral approach, with the participation of civil society and the

private sector. A commitment is made to improve the nutritional status of all people in the Americas by 2015 through full implementation of the PAHO Regional Strategy on Nutrition in Health and Development 2006-2015.

11. There is a strong commitment to reducing the noncommunicable disease (NCD) burden by promoting comprehensive, integrated prevention and control strategies. The Heads of State reiterate their support for the PAHO Regional Strategy and Plan of Action on an Integrated Approach to the Prevention and Control of Chronic Diseases, including Diet, Physical Activity, and Health. They are also committed to adopting measures to reduce tobacco consumption, taking into account as appropriate, the WHO Framework Convention on Tobacco Control. They also instruct their Ministers of Health, with the support of PAHO, to include the surveillance of NCDs and their risk factors in existing national health information reporting systems by 2015 (paragraphs 28, 29).

12. They reiterate their commitment to attain the Millennium Development Goals in terms of halting and beginning to reverse the spread of HIV/AIDS infection by 2015 through identification and implementation of strategies to scale up towards the goal of universal access to comprehensive programs for prevention, treatment, care, and support for people living with HIV. There is also a commitment to implement the Regional HIV/STI Plan for the Health Sector 2006-2015, in coordination with PAHO, UNAIDS and other relevant institutions, and another to participate in and strengthen the Global Fund to Fight AIDS, Tuberculosis, and Malaria (paragraph 35).

13. The Heads of State and of Government give high priority to adopting the provisions of the International Health Regulations (IHR) (2005) to prevent the international spread of disease and respond to health emergencies such as pandemic influenza, yellow fever, dengue, and others. They also commit to establishing the basic capacities needed in the countries for surveillance and response to events that could constitute public health emergencies of international concern and request that PAHO work with and support the countries, in accordance with the functions entrusted to it in the IHR (2005) (paragraph 34).

14. In the section on environmental sustainability, paragraphs 61 and 62 mention topics related to disasters. PAHO has an important role to play in this regard, particularly with its Safe Hospitals Initiative and educational efforts for prevention, mitigation, and care during and after disasters. Paragraph 63 mentions aspects of climate change and the support of JSWG institutions, of which PAHO is one.

15. In the section on public security, paragraph 74 recognizes that violence is preventable and establishes the commitment to formulate or strengthen policies that take an integrated approach to its prevention. It also acknowledges the First Meeting of Ministers of Health of the Americas on Violence and Injury Prevention, held in Merida,

Mexico in March 2008, which commits to further innovate, develop, implement, and evaluate plans for violence prevention.

Monitoring the Health-Related Mandates of the Fifth Summit of the Americas

16. The Pan American Sanitary Bureau (PASB), as the PAHO Secretariat and a member of the Joint Summit Working Group, coordinated by the OAS Summits Secretariat, will report on the activities it carries out in compliance with the Declaration's agreed-upon mandates.

17. Table 1 lists paragraphs on health and related topics taken from the Declaration of Commitment of Port-of-Spain 2009, numbered as they appear in the Declaration. Another column shows relevant PAHO Directing Council and World Health Assembly resolutions, and declarations made by Ministers of Health in the Hemisphere that include commitments and decisions to work together to solve problems.

18. Based on the mandates of the Fifth Summit of the Americas and the resolutions of the Governing Bodies of PAHO and WHO, the Bureau will prepare monitoring reports on the mandates and provide information about them to the Governing Bodies of PAHO. The reports on the health mandates will be sent to the OAS Summits Secretariat for consolidation and delivery to the Summit Implementation Review Group (SIRG), which meets annually as part of OAS General Assembly regular sessions.

Table 1
Declaration of Commitment of Port of Spain
Fifth Summit of the Americas, Trinidad and Tobago 2009
Health paragraphs and topics related with Public Health in the Hemisphere

Number of paragraph of the Declaration	Mandates	PAHO and WHO Governing Bodies Resolutions Ministerial Declarations	Technical Area for Follow-up
	Section of Human Prosperity		
23	Providing our people with adequate and timely access to safe and nutritious food is among the most immediate challenges confronting our Hemisphere and the world. We recognise the negative impact on our people of food crises when they occur, and commit to taking urgent and coordinated action, working in partnership with the relevant international and regional organisations, as appropriate, to develop and implement comprehensive policies and programmes in order to confront the challenges of food security. We reaffirm our commitment to the objective of the Millennium Declaration to halve by 2015 the proportion of people who suffer from hunger; and we recognise United Nations General Assembly Resolution 63/235, which calls for addressing these challenges.	CD48.R13 — 15th Inter-American Meeting at the Ministerial Level on Health and Agriculture (RIMSA): “Agriculture and Health: Alliance for Equity and Rural Development in the Americas” http://new.paho.org/hq/index.php?option=com_content&task=view&id=770&Itemid=733&lang=en	PANAFTOSA- Centro Panamericano de Alimentos (PANALIMENTOS)
26	We recognise that the problem of inequality of access to comprehensive health care and health services persists, especially among vulnerable groups. We therefore commit to redoubling our efforts to promote social protection and to identify and implement strategies to advance towards universal access to quality comprehensive health care, taking into account labour, environment, gender-sensitive and social security policies, as well as the Health Agenda for the Americas 2008–2017, and will seek to provide necessary resources in order to improve our health indicators.	CSP26.R19 — Extension of Social Protection in Health: Joint Initiative of the Pan American Health Organization and the International Labour Organization http://www.paho.org/english/gov/csp/csp26index-e.htm CD47.R3 — Health Agenda for the Americas, 2008-2017 http://www.paho.org/english/gov/cd/cd47index-e.htm	Health Systems and Services (HSS)

Number of paragraph of the Declaration	Mandates	PAHO and WHO Governing Bodies Resolutions Ministerial Declarations	Technical Area for Follow-up
27	While the region has made significant progress in reducing both maternal mortality and mortality in infants and children under 5 years, neonatal mortality has not decreased at the same rate. We call on the Pan American Health Organization (PAHO) to continue to assist countries in addressing this problem through the implementation of the Regional Strategy and Plan of Action for Neonatal Health within the Continuum of Maternal, Newborn, and Child Care. We recognise the importance of cooperation in sharing experiences within the framework of the global Partnership for Maternal, Newborn and Child Health.	CD48.R4, Rev. 1 — Regional Strategy and Plan of Action for Neonatal Health within the Continuum of Maternal, Newborn, and Child Care http://new.paho.org/hq/index.php?option=com_content&task=view&id=770&Itemid=733&lang=en	Family and Community Health (FCH) y CLAP
28	We are convinced that we can reduce the burden of non-communicable diseases (NCDs) through the promotion of comprehensive and integrated preventive and control strategies at the individual, family, community, national and regional levels and through collaborative programmes, partnerships and policies supported by governments, the private sector, the media, civil society organisations, communities and relevant regional and international partners. We therefore reiterate our support for the PAHO Regional Strategy and Plan of Action on an Integrated Approach to the Prevention and Control of Chronic Diseases Including Diet, Physical Activity, and Health. We also commit to measures to reduce tobacco consumption, including, where applicable, within the World Health Organization (WHO) Framework Convention on Tobacco Control.	CD47.R9 — Regional Strategy and Plan of Action on an Integrated Approach to the Prevention and Control of Chronic Diseases, including Diet, Physical Activity, and Health http://www.paho.org/english/gov/cd/cd47index-e.htm CD48.R2 — WHO Framework Convention on Tobacco Control: Opportunities and Challenges for its Implementation in the Region of the Americas http://new.paho.org/hq/index.php?option=com_content&task=view&id=770&Itemid=733&lang=en WHO Framework Convention on Tobacco Control http://www.who.int/fctc/text_download/en/index.html	Health Surveillance, Disease Prevention and Control (HSD)

Number of paragraph of the Declaration	Mandates	PAHO and WHO Governing Bodies Resolutions Ministerial Declarations	Technical Area for Follow-up
29	We instruct our Ministers of Health, with the support of PAHO, to incorporate the surveillance of NCDs and their risk factors into existing national health information reporting systems by 2015. We encourage national planning and coordination of comprehensive prevention and control strategies for NCDs and the establishment of National Commissions where appropriate.	CD47.R9 — Regional Strategy and Plan of Action on an Integrated Approach to the Prevention and Control of Chronic Diseases, including Diet, Physical Activity, and Health http://www.paho.org/english/gov/cd/cd47index-e.htm	Health Surveillance, Disease Prevention and Control (HSD)
30	We commit to strengthening actions aimed at reducing drug abuse and illicit drug use, with particular regard to prevention, education, treatment, rehabilitation and reincorporation into society, with public awareness campaigns to assist in reducing the demand for illicit drugs.		
31	We commit to improving the health of our people through the renewal of primary health care and access by the population to comprehensive health care and health services, as well as to essential medicines. We therefore commit to take the necessary actions, in accordance with the laws, needs and capabilities of each of our countries, bearing in mind the Health Agenda for the Americas 2008-2017, the 2005 Declaration of Montevideo on the New Orientations for Primary Health Care, and the 30-15 Buenos Aires Declaration of 2007, as appropriate.	Regional <u>Declaration</u> on the New Orientations for Primary Health Care http://www.paho.org/english/gov/cd/cd46index-e.htm Declaration: Towards a health strategy for equity, based on primary health care	Health Systems and Services (HSS)

Number of paragraph of the Declaration	Mandates	PAHO and WHO Governing Bodies Resolutions Ministerial Declarations	Technical Area for Follow-up
32	We commit to improving the nutritional status of all the people of the Americas by 2015 and to the full implementation of the PAHO Regional Strategy on Nutrition in Health and Development 2006-2015. We will continue to promote the integration of nutrition into social and economic policies and plans and to reduce nutritional deficiencies through prevention and treatment strategies, including those targeted at the control of obesity and nutrition-related diseases. We also commit to increase awareness and educate our populations about the importance of diet and physical activity.	CD47.R8 — Regional Strategy and Plan of Action on Nutrition in Health and Development, 2006-2015 http://www.paho.org/english/gov/cd/cd47index-e.htm CD48.R9 — Population-based and Individual Approaches to the Prevention and Management of Diabetes and Obesity http://new.paho.org/hq/index.php?option=com_content&task=view&id=770&Itemid=733&lang=en	Family and Community Health (FCH) y HSD
33	We recognise that nutrition is important in combating poverty, hunger and chronic malnutrition for children, especially those under age five, and vulnerable groups. We consider it a high priority to address the issue of nutrition through the joint efforts of the public and private sectors, civil society and communities. We call upon international organisations where appropriate to continue to support national efforts to confront malnutrition and promote healthy diets.	CD47.R8 — Regional Strategy and Plan of Action on Nutrition in Health and Development, 2006-2015 http://www.paho.org/english/gov/cd/cd47index-e.htm	Family and Community Health (FCH)

Number of paragraph of the Declaration	Mandates	PAHO and WHO Governing Bodies Resolutions Ministerial Declarations	Technical Area for Follow-up
34	We reaffirm our commitment to the implementation of the International Health Regulations (IHR) (2005) to prevent the international spread of diseases such as pandemic influenza, yellow fever, dengue, malaria and others, and we commit to establish in our countries the basic capacities needed for surveillance and for responding to events that could constitute public health emergencies of international concern. We request that PAHO work with and support the countries, in accordance with the functions entrusted to it in the IHR (2005), in the areas of public health emergency prevention, control and response, particularly with respect to epidemics.	WHA58 A58/55 International Health Regulations (2005) http://apps.who.int/gb/ebwha/pdf_files/WHA58/A58_55-en.pdf	Sustainable Development and Environmental Health (SDE)
35	We are committed to meeting the Millennium Declaration objective of halting and beginning to reverse the spread of HIV/AIDS by 2015 through, <i>inter alia</i> , identification and implementation of strategies to scale up towards the goal of universal access to comprehensive prevention programmes, treatment, care and support. We will promote scientific research and social awareness geared towards producing safe and high quality medicines and supplies with the aim of increasing access to treatment. We will implement the Regional HIV/STI Plan for the Health Sector 2006-2015, in coordination with PAHO, UNAIDS and other relevant institutions. We commit to strengthening public policies aimed at reducing the incidence of mother-to-child transmission of HIV to less than 5% by 2015. We reiterate our commitment to participating in and strengthening the Global Fund to Fight AIDS, Tuberculosis and Malaria, including through resource mobilization.	CD46.R15 — Regional Strategic Plan for HIV/AIDS/STI, 2006-2015, of the Pan American Health Organization http://www.paho.org/english/gov/cd/cd46index-e.htm	Family and Community Health (FCH)

Number of paragraph of the Declaration	Mandates	PAHO and WHO Governing Bodies Resolutions Ministerial Declarations	Technical Area for Follow-up
41	We will continue working to incorporate issues of aging into public policy agendas. To this end, we request that the Economic Commission for Latin America and the Caribbean (ECLAC) further strengthen its programmes in this area, through the creation of enhanced information and data systems on the social and economic impacts of aging, as well as technical assistance, as appropriate, for the development of policies and programmes in support of the elderly.	CE144/9 — Plan of Action on the Health of Older Persons, Including Active and Healthy Aging http://new.paho.org/hq/index.php?option=com_content&task=blogcategory&id=1257&Itemid=1162	Technology, Health Care and Research (THR)
42	In this context, we will promote, in the regional framework and with support from PAHO and ECLAC, a review of the feasibility of preparing an inter-American convention on the rights of older persons.	CE144/9 — Plan of Action on the Health of Older Persons, Including Active and Healthy Aging http://new.paho.org/hq/index.php?option=com_content&task=blogcategory&id=1257&Itemid=1162	
	Section of Environmental Sustainability		
61	We will encourage the strengthening of domestic planning and zoning measures and building codes, as appropriate, in order to reduce risks, mitigate impact and enhance the resilience of future residential, commercial and industrial developments. We will consider measures, where feasible, to discourage developments in areas where risks cannot be reduced or impacts mitigated and to facilitate the protection or relocation of any areas of human settlement and sections of essential industrial and transport infrastructure that might be at risk. We will also promote education and training with the aim of increasing public awareness of natural disaster preparedness and of national plans for prevention, mitigation and post-disaster recovery.	CSP27.R14 Safe Hospitals: A Regional Initiative on Disaster-resilient Health Facilities http://www.disaster-info.net/safehospitals_refdocs/documents/english/PAHOresolutions/CSP27.r14-eSafeHospitals.pdf	Emergency Preparedness and Disaster Relief (PED)

Number of paragraph of the Declaration	Mandates	PAHO and WHO Governing Bodies Resolutions Ministerial Declarations	Technical Area for Follow-up
62	We instruct the relevant Ministers or pertinent high level authorities, in collaboration with the specialized national, regional and international disaster organisations, and in the context of the United Nations International Strategy for Disaster Reduction and the Hyogo Declaration and Framework for Action 2005-2015, to strengthen cooperation within the Americas in the areas of disaster risk reduction and management.		Emergency Preparedness and Disaster Relief (PED)
67	We renew our support for the work of the Intergovernmental Panel on Climate Change (IPCC), whose findings provide valuable information on climate change mitigation and adaptation. We call upon the relevant Ministers and other responsible authorities, and with the support of relevant international and regional organisations including those of the Joint Summit Working Group (JSWG), within the scope of their mandates and capabilities, to consider the findings of the IPCC with the aim of examining, as appropriate, the potential implications for our respective countries, in particular the poorest and the most vulnerable sectors, in order to reinforce national adaptation and mitigation actions and plans, and to inform, as appropriate, sub-regional plans for the management of the impact of climate change. We will enhance our cooperation in this area throughout the region.	WHA61.19 Climate change and health http://apps.who.int/gb/ebwha/pdf_files/A61/A61_R19-en.pdf	

Number of paragraph of the Declaration	Mandates	PAHO and WHO Governing Bodies Resolutions Ministerial Declarations	Technical Area for Follow-up
	Section of Public Security		
74	We recognise that violence is preventable and as such, we will formulate or strengthen policies that take an integrated approach to its prevention. To this end, we will complement law enforcement policies with other violence-prevention strategies of measurable outcomes, in areas such as education, labour, health and other pertinent fields, as appropriate. We will continue to strengthen and implement activities that promote a culture of non-violence within a public health context, and to create safe, healthy, sustainable environments and communities. We acknowledge the Declaration of the First Meeting of Ministers of Health of the Americas on Violence and Injury Prevention, held in Merida, Mexico in March 2008, which commits to further innovate, develop, implement, and evaluate plans for violence prevention.	CD48.R11 — Preventing Violence and Injuries and Promoting Safety: a Call for Action in the Region http://new.paho.org/hq/index.php?option=com_content&task=view&id=770&Itemid=733&lang=en Declaración Ministerial sobre Prevención de Violencia y Lesiones en las Américas http://www.paho.org/Spanish/D/DeclaracionMerida08.pdf	Sustainable Development and Environmental Health (SDE)
