



PAN AMERICAN HEALTH ORGANIZATION  
WORLD HEALTH ORGANIZATION



## **32nd DIRECTING COUNCIL**

39th SESSION OF THE REGIONAL COMMITTEE

*Washington D.C., 21-25 September 1987*

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### ***RESOLUTION***

#### ***CD32.R11***

## **COORDINATION OF SOCIAL SECURITY AND PUBLIC HEALTH INSTITUTIONS**

*THE 32nd DIRECTING COUNCIL,*

Having seen the report "Coordination of Social Security and Public Health Institutions" for the period 1984–1987 (Document CD32/17);

Noting that in various countries of the Region lack of functional and operational coordination still persists among the institutions of the health sector, and particularly between the ministries of health and social security institutions, and that this has unfavorable repercussions on the health care of the population and on the efficient and equitable use of the health resources of those countries; and

Recognizing the growing significance and importance of the health care programs being carried out by social security institutions in Member Countries, as well as their potential to help in the attainment of universal health care coverage in this Region,

### ***RESOLVES***

1. To accept the report on "Coordination of Social Security and Public Health Institutions" (Document CD32/17).

2. To reiterate to Member Governments the recommendations included in Resolution XXXIV of the XXVIII Meeting of the Directing Council (1981) and Resolution XV of the XXX Meeting of the Directing Council (1984), especially that governments "include representatives of social security agencies and other health sector institutions in delegations to the meetings of the Organization's Governing Bodies."

3. To recommend to the governments of Member Countries where problems of coordination persist between ministries of health and social security institutions that they adopt a strategy with a clearly defined program of activities to:

a) Extend social security coverage to the entire population as a way to avoid "separate clienteles" for ministry of health and social security programs, aiming at universal health care coverage and the establishment of truly integrated national health policies, based on the strategy of primary health care and the principles of the goal of health for all by the year 2000;

b) Improve the efficiency of resource use by formulating and adopting joint investment plans; information, programming, and budgeting processes: the selection, incorporation, and use of medical technology; and the organization of supply, maintenance, and other support components; to this end they should also promote functional integration between ministries of health and social security institutions by developing common systems for the organization and administration of services at the local level;

c) Make rational use of health sector financing by coordinating the resources provided by contributions from social security and those allocated from public budgets, and also by tightening production costs and adjusting outlays to priorities;

d) Study alternative ways of increasing the amounts received in the aforementioned forms of financing, in view of the rising costs of the sector;

e) Work jointly toward the strengthening of health infrastructures and develop firm decentralization policies that permit use of financing at the local level and participation by the public, private, and teaching sectors in order to achieve functional integration of the services network and conciliation of their respective outlooks in the particular circumstances of each country.

4. To urge Member Governments to use and to share experiences regarding coordination of health sector institutions in the Region, which may serve as a reference in the selection of alternative methods for organizing and financing health services.

5. To request the Director, subject to the policies and resources of the Organization, to:

a) Promote the inclusion of social security entities in the technical cooperation programs of PAHO at the national level:

- b) Encourage the exchange of experiences among countries and groups of countries through the preparation of case studies to analyze the legal, organizational, financial, and operational aspects of the health services, while emphasizing institutional coordination aspects within the sector;
- c) Establish an appropriate mechanism, such as an advisory group, to assist the Organization in the promotion of improved coordination between ministries of health and social security institutions;
- d) Strengthen PAHO's working relationship with international organizations involved in activities related to social security, and with other intergovernmental agencies, to improve technical cooperation activities in this area;
- e) Circulate among the Governments information that would be of interest, either presently available or generated in the future, in the area of country studies, analyses of experience, and any other data relating to the aforementioned coordination problems:
- f) Promote the follow-up of measures taken for the evaluation of progress achieved, and include this subject in his Annual Report.

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