



PAN AMERICAN HEALTH ORGANIZATION
WORLD HEALTH ORGANIZATION



44th DIRECTING COUNCIL
55th SESSION OF THE REGIONAL COMMITTEE

Washington, D.C., USA, 22-26 September 2003

RESOLUTION

CD44.R12

FAMILY AND HEALTH

THE 44th DIRECTING COUNCIL,

Having considered Document CD44/10 on Family and Health;

Recognizing that parents, families, legal guardians, and other caregivers have the primary role and responsibility for the well-being of children;

Recalling our shared commitment to preserve and protect human health and dignity;

Further recognizing that cultural norms, socioeconomic conditions, and education are significant determinants of health;

Stressing the importance of families and communities as the settings in which healthy behavior is first established and where culture, values, and social norms are first molded;

Acknowledging that science is now revealing how strong and supportive families and social networks have a positive impact on health;

Noting that the changes in the structure of the family units with an increase in the number of women and adolescents in the work force, mono-parental families, the disappearance of extended families, and the growing incidence and prevalence of noncommunicable diseases and STIs including HIV/AIDS have put additional challenges on the family;

Noting that unhealthy behaviors occur within the family and society—child abuse; neglect; spousal and domestic violence; and neglect of older persons, especially

those with disabilities—which, while illegal in our countries, are common occurrences of growing public health significance;

Recalling the commitments, goals, and outcome of United Nations conferences and summits that address family issues;

Noting that the Tenth Anniversary of the International Year of the Family will be observed in 2004;

RESOLVES:

1. To take note of the document CD44/10 Family and Health that stress the role of the families in maintaining and improving the quality of life and health outcomes of the population in the Americas and the need to better orient care and services to support that role.
2. To urge Member States to:
 - (a) strengthen national actions to ensure sufficient resources to fulfill the international commitments, goals and outcomes of relevant United Nations conferences and summits related to the family;
 - (b) ensure the availability of appropriate infrastructures to support parents, families, legal guardians and other caregivers in order to strengthen their capacity to provide care, nurturing and protection for children;
 - (c) take measures to ensure that health policies, plans and programs recognize the comprehensive health needs of families, and their members;
 - (d) strengthen the effective implementation of social, economic, and health promotion strategies for families in order to address existing health gaps and inequities, with a focus on vulnerable marginalized and hard-to-reach populations;
 - (e) establish and maintain information and surveillance systems to provide data disaggregated by gender, socioeconomic conditions, ethnicity, and education levels, in order to ensure the appropriate planning, implementation, monitoring and evaluation of evidence-based family-centered health interventions;
 - (f) advocate for national action and leadership at the highest levels of government to increase awareness and address the public health challenges affecting within the family context, including the complexities surrounding child abuse, neglect,

spousal and domestic violence, and neglect of older persons, especially those with disabilities;

- (g) develop and /or strengthen alliances and partnerships, including non-governmental organizations, community- and faith-based organizations, academia, the research community and relevant governmental agencies, to help enhance and expand family-centered health policies and programs.

3. Requests the Director to:

- (a) assist Member States in the development of information and surveillance systems to provide data disaggregated by gender, socioeconomic conditions, ethnicity, and education levels, in order to ensure the appropriate planning, implementation, monitoring and evaluation of evidence-based family-focused health interventions;
- (b) assist Member States to support the links between active participation of families and communities and the promotion and protection of their own health;
- (c) provide technical support to Member States in their efforts to fulfill their commitment to the goals and outcomes of relevant United Nations conferences and summits that address family issues, in collaboration with the relevant partners and other stakeholders;
- (d) develop and support a strategy on family-centered health across the Organization and to ensure synergy between this strategy and the other relevant strategies within the Organization;
- (e) utilize the occasion of the Tenth Anniversary of the International Year of the Family in 2004, to raise awareness of this issue and to assist countries to maximize the contributions of the World Health Organization (WHO), in collaboration with relevant United Nations agencies and other partners, in order to increase programming efforts to support family-centered health policies;
- (f) intensify efforts for mobilizing resources to help countries develop comprehensive family-centered health policies, strategies, and programs with special focus on vulnerable and hard-to-reach populations;
- (g) report to the 46th Directing Council in 2005 on progress made.

(Ninth meeting, 26 September 2003)