



PAN AMERICAN HEALTH ORGANIZATION
WORLD HEALTH ORGANIZATION



52nd DIRECTING COUNCIL **65th SESSION OF THE REGIONAL COMMITTEE**

Washington, D.C., USA, 30 September to 4 October 2013

CD52.R15 (Eng.)
ORIGINAL: SPANISH

RESOLUTION

CD52.R15

COOPERATION FOR HEALTH DEVELOPMENT IN THE AMERICAS

THE 52nd DIRECTING COUNCIL,

Having reviewed the document *Cooperation among Countries for Health Development in the Americas* (Document CD52/11);

Taking into account United Nations Resolution 33/134, which endorses the Buenos Aires Plan of Action regarding Technical Cooperation among Developing Countries (1978); United Nations Resolution A/RES/64/222, which endorses the outcome document of the High-level United Nations Conference on South-South Cooperation, held in Nairobi (2009); and the Busan Partnership for Effective Development Cooperation statement (2011) as a follow-up to the Paris Declaration (2005);

Recalling Resolution EB60.R4 of the WHO Executive Board, which recommends that programs and activities promote and stimulate cooperation among countries, and Resolution CD25.R28 (1977) of the PAHO Directing Council, which recommends that technical cooperation programs be conducted jointly by countries both inside and outside subregional groupings;

Taking into account the reports provided by the PASB in 1980 (27th Directing Council), 1984 (30th Directing Council), 1985 (31st Directing Council), 1986 (22nd Pan American Sanitary Conference), 1998 (25th Pan American Sanitary Conference), and 2005 (46th Directing Council) on progress in the implementation of technical cooperation among countries initiatives;

Aware that both international health cooperation and the concept of technical cooperation among developing countries have evolved over time towards a broader concept of cooperation among countries and horizontal partnerships that can include a wide range of health development actors, including governmental entities, multilateral organizations, private sector, civil society, and academic institutions, among others;

Noting that traditional development assistance for health is declining among middle-income countries, including most of those in the Region of the Americas, and that complementary health development and cooperation mechanisms must be fostered and strengthened in order to continue advancement of the regional and global health agendas;

Recognizing that many countries and partners in the Region have made important health development advances and have acquired development expertise that may be beneficial to others in the Region and in other regions, and appreciating that many countries in the Region actively participate in South-South, triangular, and other forms of cooperation among countries, particularly in health development issues,

RESOLVES:

1. To approve the renewed policy for cooperation for health development in the Americas, as contained in Document CD52/11.
2. To urge Member States to:
 - (a) continue their advocacy in international forums and dialogue for the mobilization of political will and resources to support and further strengthen cooperation among countries and other donors, and solidify its role as a complementary approach to international cooperation;
 - (b) to initiate, lead and manage cooperation initiatives for health development and continue ongoing efforts to strengthen national capacity to participate in international health cooperation both within and across regions, in coordination with PAHO, as Member States may deem appropriate;
 - (c) promote and intensify ongoing initiatives to share good practices and experiences that then form the basis for exchanges and collective learning among countries, including the sharing of methodologies for the assessment of cooperation among countries activities;
 - (d) support the mobilization of resources for strengthening cooperation for health development within the Region and across regions;
 - (e) identify national institutions associated with PAHO/WHO that could potentially take part in technical cooperation initiatives with countries in the Region on specific issues;

- (f) promote the harmonization, alignment and complementarity of the health agendas between subregional agencies and PAHO in order to strengthen cooperation among countries, agencies, and other agents of change to effectively address common health issues.
3. To request the Director to:
- (a) promote and collaborate with Member States and other donors for South-South cooperation, triangular cooperation, and resource mobilization efforts aimed at strengthening cooperation among countries and subregions as a viable and sustainable modality of cooperation for health development;
 - (b) mainstream the policy on cooperation for health development modalities into the Organization's technical cooperation programs and the new Strategic Plan, avoiding duplication of efforts in the Region;
 - (c) promote the Organization's brokering role and facilitate the linking of supply and demand for health expertise, experience, and technology at the national, regional, and global levels in coordination with other WHO offices, other United Nations system and Inter-American system agencies, and other partners, in particular entities that support health development and humanitarian health assistance, including the development of the appropriate mechanisms for interregional exchanges;
 - (d) strengthen relations with subregional organizations by signing agreements, as appropriate, that designate the Organization as their specialized health agency in order to facilitate compliance with PAHO's strategic role in the coordination and optimization of cooperation among countries;
 - (e) facilitate the development of methodologies and guidelines for the assessment and evaluation of cooperation modalities and their impact on health development in order to strengthen evidence-based approaches and identify how best to use these modalities to strengthen and accelerate health progress in the Region;
 - (f) continue the development and enhancement of the regional knowledge-sharing platform in order to facilitate the exchange and sharing of good practices and methodologies based on the countries' experiences;
 - (g) promote the forging of strategic, sustainable, and flexible partnerships and networks among national and subregional institutions, regional centers of excellence, collaborating centers, and nongovernmental actors that can be called upon to address shared health issues both within and across regions;
 - (h) strengthen the mechanisms for technical cooperation among countries, promoting their strategic use to address targeted health priorities and health problems that are most effectively addressed through collective action within and across regions;

- (i) present the Directing Council or the Pan American Sanitary Conference with periodic evaluations of the implementation and impact of the policy on cooperation for health development in the Americas, especially cooperation which, for the Organization, involves resource mobilization in order to highlight the possible challenges and success factors that could help to further improve the policy, beginning with the 29th Pan American Sanitary Conference;
- (j) continue promoting the equitable and timely distribution of cooperation initiatives for health development in the framework of the principles of solidarity, sovereignty, dignity, equity, capacity development, and sustainability, aligned with the sectoral health policy of each country, in order to address health issues in the most efficient manner;
- (k) promote the harmonization of agendas between the Organization and subregional integration blocs that develop health initiatives, in order to take advantage of opportunities for synergy and complementarity, and avoid possible duplications.

(Ninth meeting, 4 October 2013)