



XX PAN AMERICAN SANITARY CONFERENCE XXX REGIONAL COMMITTEE MEETING

ST. GEORGE'S, GRENADA SEPTEMBER - OCTOBER 1978

Provisional Agenda Item 29

CSP20/26 (Eng.)
7 August 1978
ORIGINAL: SPANISH

EXTENSION OF HEALTH SERVICES TO THE UNDERSERVED POPULATION IN RURAL AND URBAN AREAS

The annexed Document CE80/11 was examined by the Executive Committee at its 80th Meeting, held in Washington, D.C., in June-July 1978. The Committee adopted the following Resolution XXII:

THE EXECUTIVE COMMITTEE,

Having examined the report of the Director on the PAHO program of collaboration with the Governments (Document CE80/11), prepared in compliance with Resolution XIV of the XXV Meeting of the Directing Council on the Final Report of the IV Special Meeting of Ministers of Health of the Americas;

Recognizing that both the strategies of primary health care and community participation, and the activities proposed for implementing that resolution, constitute the basic requirements for attaining the coverage goals set by the countries;

Bearing in mind that health services coverage must be universal, accessible (geographically, economically and culturally) and continuous, and that no single model is applicable in all countries;

Mindful of the importance of taking into consideration intersectoral approaches;

Considering that the experience of the countries thus far seems to indicate that the above strategies are feasible and effective; and

Bearing in mind that, in order to bring about the required extension of coverage, it is necessary:

- To identify and analize systematically the basic problems in the health field in order to formulate appropriate strategies for their solution,

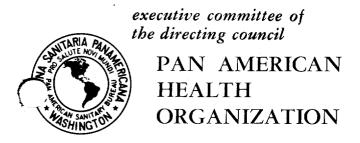
- To strengthen administrative development processes that will maximize the productivity of the resources allocated,
- To identify the sociocultural barriers that hamper the provision of health services,
- To focus attention on the development of primary health services, including referral systems to hospitals, in order to guarantee to the population access to all levels of care, and to build up their capacity for meeting the needs of both urban and rural populations,
- To promote the capacity of the community to participate in the solution of its own health problems through participation in educational activities,
- To identify the priority problem areas for which appropriate technology must be developed, and to devise national mechanisms for doing so, and
- To determine the financial and other resources required for the implementation of plans and programs,

RESOLVES:

- 1. To urge the Governments to accelerate and intensify their efforts to attain the coverage goals established by following the above strategies and adjusting them to their particular national situations.
- 2. To request the various international agencies, multinational, bilateral and private, as well as international lending institutions, to cooperate systematically in these national efforts.
- 3. To recommend to the Director that he give priority to continuing the technical cooperation between the Bureau and requesting Governments and that he submit a progress report on this matter to the XX Pan American Sanitary Conference.

Accordingly, it is the intention of the Secretariat to present to the XX Pan American Sanitary Conference an updated version of the document presented to the Executive Committee, coherently incorporating the conclusions that emerge from the International Conference on Primary Health Care being held at Alma Ata, Union of Societ Socialist Republics, from 6 to 12 September this year, in order to ensure compatibility between the efforts of the various Regions in this enterprise.

Annex



working party of the regional committee

WORLD HEALTH ORGANIZATION



80th Meeting June-July 1978 Washington, D.C.

Provisional Agenda Item 19

CE80/11 (Eng.) 5 May 1978 ORIGINAL: SPANISH

EXTENSION OF HEALTH SERVICES TO THE UNDERSERVED POPULATION IN RURAL AND URBAN AREAS

The recognition of the importance of approaching the acceleration of the process of extending health service coverage with a strategy different to that which has traditionally been adopted in the past has led to a series of resolutions on the part of the Governing Bodies of the Organization, urging the Governments and Secretariat of PAHO/WHO to take action to solve the problems associated with extended health service coverage. The Final Report of the IV Special Meeting of Ministers of Health of the Americas held in September 1977, and Resolution XIV adopted by the XXV Meeting of the Directing Council in October 1977, established a political and hemispheric framework for a new approach to national health plans and programs and to the Organization's technical cooperation activities.

Resolution XIV recommends to the Governments that they renew their efforts to extend health services to the underserved population in rural and urban areas with the required vigor and speed, directing their efforts primarily at:

- Programming for strengthening the strategies of community participation and primary health care;
- Restructuring of health systems on the basis of the establishment of functional levels of care with clearly defined referral procedures;
- Revision of manpower development plans at all levels in both the institutional and the traditional community systems:
- Development by countries with similar characteristics and common health problems of joint programs for evaluating, selecting, and adapting or creating appropriate technologies.

In the same resolution the Director of PASB/WHO is requested to make a study of the impact of these recommendations and of the changes they imply in the Bureau's program of collaboration with the Governments.

On the basis of these recommendations, the Governments have begun to take action to accelerate this process within their own political, administrative and legal spheres of responsibility. Among the principal measures initiated are the following:

- Studies to determine the numbers, distribution and nature of the underserved population, together with a review of current health programs, in order to adapt these to the new policy and strategy;
- Investigation of practical means of achieving responsible and active community participation, together with studies of traditional medicine, with a view to its integration with institutional health systems;
- Operational research into the use of appropriate technologies with a view to promoting their selection for and/or adaptation to the strategy of primary health care;
- Study and review of the adjustments needed by the health system with respect to its organization, administration, levels of care, referral mechanisms, etc.;
- Review of the various categories and levels of training programs for health personnel;
- Experimentation with evaluation models in order to determine which quantitative and qualitative parameters should be applied to primary health care.

For its part, the Pan American Sanitary Bureau has prepared a plan of action for cooperation with Member Governments in the implementation of these recommendations. (See Annex.)

The plan provides for action along the following lines:

- Collaboration in the analysis of technical cooperation needs in preparing and implementing programs of extended coverage with primary health care and community participation strategies.

- Cooperation in preinvestment studies to obtain the external financing needed for programs of this kind, manpower training studies, identification of the basic restructuring needs of the health services, and the introduction of machinery for the interchange of experience between experts from various countries.
- Strengthening of the machinery for collaboration between PAHO/WHO and the executive secretariats of subregional groupings of countries in the conduct of programs and activities that, by decision of the Ministers of Health of Central America and Panama, the Andean Group, the Caribbean, and the River Plate Basin, are being implemented to extend the coverage of health services. This includes special emphasis on the promotion of technical cooperation between developing countries.
- So far as interagency cooperation is concerned, the objective is to strengthen the machinery for coordination between bilateral and multilateral international agencies, through the holding of meetings to discuss criteria for joint action in specific programs of extended coverage with the United Nations, UNICEF, OAS, the World Bank, IDB, CIDA, AID, etc.

In order to facilitate the realization of these objectives, the Bureau has developed and introduced, in association with Member Governments, a new programming structure for its technical cooperation activities and given a new direction to its internal policies in order to lay special emphasis on the strategies of primary health care and community participation, assign priority to the training of intermediate and auxiliary personnel, and ensure that the activities of the regional centers both support and reinforce the implementation of these policies.

Annex

EXTENSION OF THE COVERAGE OF HEALTH SERVICES AND THE STRATEGIES OF PRIMARY HEALTH CARE AND COMMUNITY PARTICIPATION

Proposed Plan To Implement
Resolution XIV of the XXV Meeting
of the Directing Council of PAHO/WHO

PAN AMERICAN HEALTH ORGANIZATION WORLD HEALTH ORGANIZATION

December 1977

Introduction

In the course of 1977, PAHO formulated the first part of a plan to augment the efforts and resources devoted to providing health services for the population as a whole, adopting the strategies of primary health care and community participation. Three multidisciplinary working groups composed of national experts met to discuss operational thinking on primary health care, community participation, technology and administration.

The conclusions of the three study groups were summarized in Document REMSA4/4, entitled "Extended Coverage of Health Services and the Strategies of Primary Health Care and Community Participation." This document was used as a frame of reference in the analysis made by 24 governments of the status of national programs and strategies in this field. This analysis assumed special importance as it became the basis for the discussions of the Ministers of Health at their IV Special Meeting, held on 26 and 27 September 1977 in Washington, D.C.

In the course of this Meeting, the operational concepts and factors affecting the extension of health service coverage and primary care were examined. A review was also made of the results of the national analyses. The report of the IV Meeting was submitted to the Directing Council of PAHO, Regional Committee of WHO, for its consideration during its XXV Meeting held in early October. The Directing Council adopted Resolution XIV, which incorporates primary health care and community participation, together with the appropriate technologies and administrative development, into the policy of PAHO, as instruments for guaranteeing health service coverage that is universal. A copy of this Resolution appears as Annex A to the present document.

Resolution XIV clearly defines regional health policy for the Governments and for the Organization. The immediate responsibility of PAHO is to provide the Governments with the necessary technical cooperation to put into practice each of the recommendations of this resolution.

Document REMSA4/4, the results of the national analyses, the report of the IV Special Meeting of Ministers and, finally, Resolution XIV itself, agree that the fundamental objective is to accelerate and strengthen procedures for the extension of health service coverage, in association with the strategies of primary health care and community participation. They constitute an effort on a hemispheric scale to solve this problem, while, at the same time, assuming a global commitment to promote the strategy of primary health care.

On these assumptions the second stage has been initiated. With this in view a preliminary plan has been prepared to be launched in 1978. This plan identifies certain significant factors that must be taken into account by Member Governments in their efforts to expand health service coverage. It also defines the measures that PAHO should take in support of the action taken by countries to implement each part of Resolution XIV. It should be noted that the Director of PASB is to present a report on the progress made to the next Pan American Sanitary Conference. The results of this analysis, together with the recommendations of the Alma Ata Conference, will provide the basis for recommending the adjustments and modifications that should be made in 1979.

EXTENSION OF THE COVERAGE OF HEALTH SERVICES AND THE STRATEGIES OF PRIMARY HEALTH CARE AND COMMUNITY PARTICIPATION

Proposed Plan for Implementing Resolution XIV of the XXV Meeting of the Directing Council of PAHO/WHO

Resolution XIV of the XXV Meeting of the Directing Council reads as follows:

To incorporate the development of community participation and primary health care into the policy of PAHO as basic strategies, and administrative development and the development of appropriate technologies as instruments for guaranteeing health service coverage that is universal, comprehensive, accessible, effective and continuous in the context of general socioeconomic development of the countries in the Hemisphere.

It therefore represents a standard to be adopted both by Member Governments and by the Organization as a whole.

The resolution also defines a series of measures to be taken by the Governments that are signatories to the Final Report of the IV Special Meeting of Ministers. The following recommendations include some of the more important types of action it is hoped that the Governments will take in an effort to extend health service coverage, together with those activities that the Organization should promote and undertake in support of the measures being taken by the countries themselves.

ACTION TO BE TAKEN BY GOVERNMENTS

Among the measures that countries are promoting or implementing in order to accelerate the extension of health service coverage, it is hoped that the Governments will be taking action along the following lines:

1. Determine the scope of the problem of shortage of services by defining the present status of coverage in both rural and urban areas in the face of demographic growth and migration. Establish the nature of coverage in the light of the socioeconomic and political conditions obtaining in each country.

- 2. Adopt strategies to extend health service coverage to neglected and underserved population groups, including action as follows:
 - Adopt the strategies of primary health care and community participation;
 - Select and develop appropriate technologies;
 - Identify the kind of health service system needed in the light of:
 - . the structure of demand, including accessibility, levels of medical care and referrals
 - . the organization and administration of the system
 - . the feasibility of financing and the availability of critical resources.
- 3. Program the development of the operational capacity of the health service system at all levels.
- 4. Program human, material and financial resources.
- 5. Introduce and carry out a program including improvements in health services and in the control and implementation of health activities.
- 6. Evaluate the program and make periodic adjustments to it.

ACTION TO BE TAKEN BY THE ORGANIZATION IN 1978

At the level of each country, the PAHO/WHO Representative, in the light of the national analysis made in August 1977, shall review, in association with the health authorities, each of the recommendations made for action to be taken by the governments to increase health service coverage, at whatever stage each government finds appropriate. This relates specifically to technical cooperation, in order to determine the status of and the possibilities for acceleration of coverage, in the light of the strategies of primary health care and community participation.

It is also intended that specific action should be taken under each of the headings in operative paragraph 2 of Resolution XIV (as detailed in the following tabular statement), and that such action should be initiated in 1978.

As part of the process of "PAHO Programming and Evaluation," the PAHO Representative in each country is expected, on the basis of local conditions and the information furnished in the present document, to prepare the strategies to be adopted for the implementation of this resolution. This includes the program content of services, expressed in terms of action in the areas of maternal and child health, nutrition, control of diseases, and environmental sanitation, according to the nature of the problems and the local situation.

Those countries that are in the course of extending health service coverage are assured of multidisciplinary support from the staff of the Divisions, Centers and Areas in programming, in association with local PAHO and country personnel, such modifications as need to be made to national programs, as well as of PAHO technical cooperation in seeking to extend coverage through the strategies of primary health care and community participation.

RESOLUTION XIV ON THE IV SPECIAL MEETING OF MINISTERS OF HEALTH OF THE AMERICAS ACTION BY THE ORGANIZATION IN 1978

	RESOLUTION XIV	PROPOSED ACTION	COUNTRY	DATE	COMMENTS
2.	To recommend to the Governments that they renew their efforts to extend health services to the underserved population in rural and urban areas with the required vigor and speed,"	Technical cooperation in examining the status of coverage and the prospects for accelerating its pace. Identify the nature of the problem, determine the strategies to be adopted, verify the operational capacity of the system and of the resources needed.	Countries requesting this service	Throughout the year	Responsibility of of Country Representatives with the Health Services Divis!on
a	Programming for strengthening the strategies of community participation and primary health care, in accordance with the political realities and the socioeconomic and cultural characteristics of each country."	a.1 Technical cooperation with countries in the design and/or implementation of programs of expanded services, adopting the strategies of community participation and primary health care, including the determination of more effective procedures and approaches adapted to local needs and community characteristics. Such cooperation will be based on the current status of preparation and execution of programs in which community participation can be identified as an essential factor.	Inter alia: Haiti, Paraguay, Guatemala, Ecuador, Colombia, Peru, and Brazil	From the 2nd quarter onwards	PAHO personnel and Country Representatives. Support of Health Services Division and short-term consultants. Participation of other Divisions according to program content
		a.2 Development in 1978 of two multidis- ciplinary workshops to define criteria for the analysis of community characteristics in relation to health problems and pro- grams in order to ensure their participa- tion in the development of services. This would be done in the second and fourth quarters.	Honduras and Ecuador	2nd quarter 4th quarter	Programming and development by Health Services Division with local PAHO support and the participation of other Divisions
		a.3 As part of the "1978/79 Development Program of the Director General of WHO," a program of "intercountry research into methods to promote community participation in the expansion of health services coverage based on primary health care strategles" will be launched. The aim is to develop research methods for the study of urban and rural communities and of the traditional community health system, in order to articulate these with the institutional system. At the same time, appropriate technological structures for community participation will be developed.*	One Central American country and one Andean Group country	To be ini- tiated in the 2nd quarter of 1978	Responsibility of the Health Services Division
"b	Development of the adminis- trative process in the plan- ning and programming of in- vestments and services, logistics, evaluation and control of operations in order to guarantee the effec- tive and efficient delivery of services."	b.1 Technical cooperation in examining the substantive aspects of the administration of the health services in relation to the needs of extended coverage. This would comprise the strengthening of planning and programming processes, the development of operational capacity, the improvement of administrative management procedures and the integration of sector components. In the light of the existing status of programs in the countries it is expected to be possible to intensify these efforts.	Haiti, Paraguay, Peru, Ecuador, Nicaragua, Guatemala, El Salvador, Costa Rica, Honduras, Uruguay, Guyana, Jamaica, and Dominican Republic	Throughout 1978	PAHO personnel and Country Representatives. Support of the Health Services Division
		b.2 Training of staff in the new courses on the Administration and Operation of Services to be initiated in 1978 at the School of Public Health of Mexico and in Trinidad and Tobago. These courses have been designed to cover the organizational and administrative needs of the process of extended coverage of health services.	Mexico, Trinidad and Tobago	2nd semester of 1978	Responsibility of Health Services Division Support of Human Resources Division
		b.3 Two regional management seminars on organization and investments in the health sector, with the participation of Directors General of Health and Directors of Administration of Ministries of Health. Officials of Finance Ministries will also participate.	One English speaking Caribbean country and one South American country	2nd semester of 1978	Responsibility of Health Services Division

RESOLUTION XIV ON THE IV SPECIAL MEETING OF MINISTERS OF HEALTH OF THE AMERICAS ACTION BY THE ORGANIZATION IN 1978

ACTION BY THE ORGANIZATION IN 1978					
RESOLUTION XIV	PROPOSED ACTION	COUNTRY	DATE	COMMENTS	
"c) Restructuring of health systems on the basis of the establishment of functional levels of care, with clearly defined referral procedures and effective intrasectoral and intersectoral coordination machinery."	c.1 Technical cooperation with countries in the reorganization of their health systems as part of measures to adapt these to the changes resulting from extended coverage programs. In view of current requirements and the needs of ongoing programs and of those to be introintroduced in 1978, it is expected to concentrate on the following:	Haiti, Honduras, El Salvador, Nicaragua, Guatemala, Costa Rica, Ecuador, Guyana, Paraguay, Chile, Peru, Colombia, and Brazil	Throughout the year	Responsibility of PAHO personnel and Country Representatives, with the support of the support of the Health Services Division and short-term consultants	
	c.2 In the light of existing problems and the progress made, provide multidisciplinary technical cooperation to the countries indicated in c.1, in order to define the program content of maternal and child welfare, nutrition, disease control and basic sanitation programs. Also included are support for and coordination with vertical programs. This activity involves all Divisions.	Haiti, Honduras, El Salvador, Nicaragua, Guatemala, Costa Rica, Ecuador, Guyana, Paraguay, Chile, Peru, and Colombia	Throughout the year	Responsibility of PAHO personnel and Country Representatives and with the support of all the Divisions, Centers and Area Advisors	
	c.3 Multidisciplinary working groups will be organized for the following:			Responsibility of Health Services Division	
	- Preparation and application of models for the expansion of services; - Design and introduction of supervision guides, preparation of handbooks, casereferral and inservice education	One Central American country	3rd quarter	nearon services protiston	
	- Development of analytical and research instruments for the reorganization and development of basic hospitals - Elaboration of methods for defining levels of medical care	One South American country	4th quarter	······································	
	 c.4 Preparation of guidebooks on the following: Planning and programming of the expansion of health service coverage Analysis of production, performance and cost Analysis of sector financing 	Regional level	2nd, 3rd, and 4th quarters	Responsibility of Health Services Division and short- term consultants	
	c.5 Preparation and implementation of a plan of action for technical cooperation with the Governments in order to implement Resolution XXIX of the XXV Meeting of the Directing Council on "Coordination between social security and public health systems," with a view to ensuring that the resources of both are brought into line with the objective of expanding health service coverage to underserved populations	At the request of countries	Throughout the year	Responsibility of Health Services Division	
	c.6 Technical cooperation and the development of country working groups to redefine the role of nursing personnel in relation to different levels of medical care and in view of appropriate technologies and the socioeconomic situation, as provided in Resolution XXIV of the XXV Directing Council.	2 Central American countries, 2 English- speaking Caribbean countries, and 2 South American countries	2nd, 3rd, and 4th quarters	Responsibility of PAHO personnel and Country Representatives, with the support of Health Services Division	
	c.7 As part of the "1978/79 Development Program of the Director General of WHO," it is proposed to introduce the "Program for Supervision, Training and Advisory Services in Local Health Service Units," whose purpose is to train the personnel needed for supervision and advisory services and to organize a system that makes provision for or facilitates such training services. Joint activity of the Health Services and Human Resources Divisions.*	Selected countries from group c.1	To be initiated in the 2nd quarter	Joint activity of the Human Resources and Health Services Divisions	

RESOLUTION XIV ON THE IV SPECIAL MEETING OF MINISTERS OF HEALTH OF THE AMERICAS ACTION BY THE ORGANIZATION IN 1978

_	RESOLUTION XIV	PROPOSED ACTION	COUNTRY	DATE	COMMENTS
d)	Revision of manpower development plans at all levels in both the institutional and the traditional community systems, and the introduction of strengthening of measures for improving the training of that manpower so that it may contribute harmoniously to the process of change required by the extension of coverage."	d.1 Technical cooperation with those countries that are either planning or implementing programs of extended coverage in order to determine the kind of personnel needed at all levels and their training requirements. Conduct of the corresponding programs. Foster the incorporation of the training component in the preparation of plans that will receive specific funding both from country and from external resources.	Nicaragua, Guyana, Paraguay, Ecuador, and Guatemala	Throughout the year	Responsibility of PAHO personnel and Country Representative. Joint programming by Human Resources and Health Services Divisions, in consultation with other Divisions
e)	Development by countries with similar characteristics and common health problems of joint programs for evaluating, selec- ting, and adapting or creating appropriate technologies that will expedite the extension of coverage."	e.l Program technical cooperation for the preparation of intercountry pro- grams, possibly at the level of subregional groupings, for the evaluation, selection, adaptation and introduction of appropriate technologies.	Central American and Andean Group countries	2nd semes- ter of 1978	Joint action by the Health Services and Human Resources Divisions, in con- sultation with other Divisions
		e.2 As part of the "1978/79 Development Program of the Director General of WHO," the project to provide "appropriate technologies for the extension of health service coverage in association with primary health care and community participation" will be implemented. Its Its objective is to cooperate with the Governments in the evaluation of their technological needs, and to promote studies that will facilitate the selection, and adoption and also the design of the necessary technologies. Promote the interchange of information and establish machinery for intrainstitutional coordination and for coordination between national and international agencies. Joint activity of the Health Services and Human Resources Divisions*	Haiti, Paraguay, Guatemala, Honduras, Micaragua, Ecuador, and Peru	2nd, 3rd and 4th quarters	Joint activity of the Health Services and Human Resources Divisions, in consul- tation with other Divisions
		e.3 Promote and develop a regional program on appropriate technologies for the extended coverage of health services and negotiate the participation of the Inter-American Development Bank in this enterprise.	Regional level	2nd semes- ter of 1978	Joint activity of the Health Services and Human Resources Divisions
"f)	Planned interchange of specialized personnel and of experiences with strate- gies and methods used in the countries for extending coverage."	f.1 Design and implement a program of technical cooperation between developing countries with a view to the interchange between countries of personnel with experience in the programming and implementation of measures designed to provide health services for the entire population. In addition, the training of personnel from one country in another in programs of extended health service coverage based on a primary health care strategy. Activities of this kind will be promoted and launched, at an initial stage, in the subregional groupings.	Central American and Andean Group coun- tries	4th quarter of 1978	Joint activity of the Office of Liaison and the Health Services Division
		f.2 Undertake, in the course of 1978, at least two country studies clearly identifying the approach and strategy adopted in extended health service coverage, in association with primary health care and community participation. These studies will be undertaken in Honduras and Costa Rica, subject to the approval of their Governments. The results of these experiments will be made available to other countries.	Honduras and Costa Rica	2nd, 3rd and 4th quarters of 1978	Responsibility of the Health Services Division with the support of Country Representatives
"g) Systematized analysis of the requirements of the countries for external cooperation and financing, and of their capacity to make appropriate use of it in supplementing their	g.1 Technical cooperation in making such analyses, preferably in countries that have highly complex external assistance structures and are involved in programs of extended health service coverage.	Nicaragua and Dominican Republic	4th quarter of 1978	Country Representatives with the support of Health Services Division
	national resources."	g.2 Cooperate with countries in the analysis and programming of country requirements in external aid and financing and preparation of guidebooks for such activities.	Paraguay and Ecuador	2nd semes- ter of 1978	Responsibility of Health Services Division

RESOLUTION XIV ON THE IV SPECIAL MEETING OF MINISTERS OF HEALTH OF THE AMERICAS ACTION BY THE ORGANIZATION IN 1978

	RESOLUTION XIV	PROPOSED ACTION	COUNTRY	DATE	COMMENTS
"3.	To request the Director to make a study of the impact of the foregoing recommendations and of the changes they imply in the PAHO/WHO Program of Collaboration with the Governments in implementing these recommendations as soon as possible and to report on the matter to the XX Pan American Sanitary Conference."	In July 1978 an analysis must be made of the progress achieved in implementing this plan. It will also be necessary to verify the pattern of country requirements for PAHO technical cooperation, and estimate its possible impact on the preparation of the 1979 program and budget.	Regional level	July 1978	Responsibility of the Health Services Division, in consultation with other Divisions
74.	To recommend to PAHO that the conclusions of the IV Special Meeting of Ministers of Heal h of the Americas and the summary of the presentations made by the Ministers and Heads of Delegation on the status of processes of extending the coverage of services in their respective countries be presented as a contribution of the Region of the Americas to the World Conference on Primary Health Care to be held in Alma Ata, USSR, in September 1978."	By the end of June a document not exceeding 50 pages should be available representing the contribution of the Region of the Americas to the Conference on Primary Health Care in Alma Ata. In accordance with the timetable approved by the Director, this document should be prepared in the following stages: - Assembly of data obtained at the Meeting of Ministers and from the working groups. To this should be added informtion obtained from countries in their country analyses. On this basis a working document is to be prepared. - The working document is to be submitted by the middle of February for consideration and study by the Divisions and by at least 10 Country Representatives. Comments and suggestions are to reach Headquarters no later than 15 March. - Between 15 March and 1 May the first draft will be prepared in Spanish. During May it will be translated and the necessary amendments made. - On 1 June it will be submitted to the Director for his final review, and Divisions will be consulted as necessary on appropriate points.	Regional level	lst semes- ter of 1978	Responsibility of the Health Services Division, in consultation with other Divisions

PAN AMERICAN HEALTH ORGANIZATION REGIONAL COMMITTEE

WORLD HEALTH ORGANIZATION



XXV Meeting

XXIX Meeting

RESOLUTION XIV

REPORT OF THE IV SPECIAL MEETING OF MINISTERS OF HEALTH OF THE AMERICAS

THE DIRECTING COUNCIL,

Having taken note of the Final Report of the IV Special Meeting of Ministers of Health of the Americas, which was held in compliance with Resolution XXXII of the Directing Council of the Pan American Health Organization, at the Headquarters of the Organization in Washington, D.C., on 26 and 27 September 1977; and

Considering that its conclusions contain recommendations that provide valuable guidance for accelerating the processes of extending coverage of health ser ices in all the countries of the Americas,

RESOLVES:

- 1. To incorporate the development of community participation and primary health care into the policy of PAHO as basic strategies, and administrative development and the development of appropriate technologies as instruments for guaranteeing health service coverage that is universal, comprehensive, accessible, effective and continuous in the context of general socioeconomic development of the countries in the Hemisphere.
- 2. To recommend to the Governments that they renew their efforts to extend health services to the underserved population in rural and urban areas with the required vigor and speed, directing their efforts primarily at:
 - a) programming for strengthening the strategies of community participation and primary health care, in accordance with the political realities and the socioeconomic and cultural characteristics of each country;
 - b) development of the administrative process in the planning and programming of investments and services, logistics, evaluation and control of operations in order to guarantee the effective and efficient delivery of services;

- c) restructuring of health systems on the basis of the establishment of functional levels of care, with clearly defined referral procedures and effective intrasectoral and intersectoral coordination machinery;
- d) revision of manpower development plans at all levels in both the institutional and the traditional community systems, and the introduction or strengthening of measures for improving the training of that manpower so that it may contribute harmoniously to the process of change required by the extension of coverage;
- e) development by countries with similar characteristics and common health problems of joint programs for evaluating, selecting, and adapting or creating appropriate technologies that will expedite the extension of coverage;
- f) planned interchange of specialized personnel and of experiences with strategies and methods used in the countries for extending coverage; and
- g) systematized analysis of the requirements of the countries for external cooperation and financing, and of their capacity to make appropriate use of it in supplementing their national resources.
- 3. To request the Director to make a study of the impact of the fore-going recommendations and of the changes they imply in the PAHO/WHO program of collaboration with the Governments in implementing these recommendations as soon as possible, and to report on the matter to the XX Pan American Sanitary Conference.
- 4. To recommend to PAHO that the conclusions of the IV Special Meeting of Ministers of Health of the Americas and the summary of the presentations made by the Ministers and Heads of Delegations on the status of the processes of extending the coverage of services in their respective countries be presented as a contribution of the Region of the Americas to the World Conference on Primary Health Care to be held in Alma Ata, USSR, in September 1978.

(Approved at the seventh plenary session, 4 October 1977)





XX PAN AMERICAN SANITARY CONFERENCE XXX REGIONAL COMMITTEE MEETING

ST. GEORGE'S, GRENADA SEPTEMBER - OCTOBER 1978

Provisional Agenda Item 29

CSP20/26, ADD. I (Eng.) 25 September 1978 ORIGINAL: ENGLISH

EXTENSION OF HEALTH SERVICES TO THE UNDERSERVED POPULATION IN RURAL AND URBAN AREAS

The International Conference on Primary Health Care, jointly organized by WHO and UNICEF, took place in Alma Ata, USSR, 6-12 September 1978. This intergovernmental conference was attended by delegations from 138 governments and by representatives of more than 60 United Nations Organizations, specialized agencies and nongovernmental organizations in official relations with WHO and UNICEF.

The Conference reviewed and discussed the main issues relating to primary health care and development, the technical and operational aspects of primary health care, as well as national strategies for primary health care and international support, and made a number of recommendations pertaining thereto.

On the final day the Conference adopted the Declaration of Alma Ata. This Declaration urges governments, WHO and UNICEF, international organizations and agencies, all health workers and the whole world community to support national and international commitment to primary health care and to channel increased technical and financial support to it, particularly in developing countries.