144th SESSION OF THE EXECUTIVE COMMITTEE

Washington, D.C., USA, 22-26 June 2009

CE144.R5 (Eng.) ORIGINAL: ENGLISH 24 June 2009

RESOLUTION

CE144.R5

FAMILY AND COMMUNITY HEALTH

THE 144th SESSION OF THE EXECUTIVE COMMITTEE,

Having considered the concept paper *Family and Community Health* (Document CE144/21),

RESOLVES:

To recommend to the Directing Council that it adopt a resolution along the following lines:

FAMILY AND COMMUNITY HEALTH

THE 49th DIRECTING COUNCIL,

Having considered the concept paper *Family and Community Health* (Document CD49/__);

Recognizing that the Health Agenda for the Americas 2008–2017 calls for increasing social protection and access to quality health services, tackling health determinants, diminishing health inequalities among countries and inequities within them, reducing the risks and burden of disease, and strengthening the management and development of health workers;

Taking into account the 2008 World Health Report on primary health care and the need to develop and strengthen public policies to extend coverage in the delivery of quality health services with a family and community health orientation; and

Mindful of the international and regional mandates on family and community health, and acknowledging that if the health targets of the Millennium Development Goals are to be achieved at the national, Regional, and global levels they must be fulfilled at the local level with the participation and collaboration of health and social services, families, and communities,

RESOLVES:

- 1. To urge Member States to:
- (a) adopt a comprehensive and intercultural family and community health approach as an effective framework for promoting and integrating social policies, local development strategies, public health programs, and health care services aimed at strengthening the coping capabilities of families and communities and ensuring the health and wellbeing of their members;
- (b) intensify their efforts to ensure universal access to quality individual and collective health services and programs as a critical component of a social protection agenda, through the development of integrated health systems based on primary health care;
- (c) strengthen the development, governance, management, and performance of integrated networks of health services with a population focus to respond to the specific health needs of individuals at different stages of their life course and in the context of their families and communities; and
- (d) invest in the development of the necessary human resources to sustain the outreach and expansion of multidisciplinary and team-based, primary health care services and public health programs and interventions with a comprehensive and intercultural family and community health approach.
- 2. To request the Director to:
- (a) support the development of models of care and training of human resources as well as the organization, management, and delivery of health services with a family and community oriented focus to provide comprehensive, continuous, and integrated quality health care with a gender and intercultural approach;

- (b) promote integration of the family and community health approach in PAHO programs;
- (c) advocate for the involvement of international agencies, scientific and technical institutions, civil society organizations, the private sector, and others in supporting national and local initiatives on family and community health, with special emphasis on priority countries and socially unprotected areas and populations of the Americas; and
- (d) facilitate the exchange of experiences and good practices on family and community health between countries, and strengthen mechanisms for operational research and standardized evaluation and monitoring of family and community health activities, in order to allow for international and longitudinal comparisons of their effectiveness and efficiency to be made.

(Fifth meeting, 24 June 2009)