

PAN AMERICAN HEALTH ORGANIZATION

WORLD HEALTH ORGANIZATION



XXVI Meeting

XXXI Meeting

Washington, D.C. September-October 1979

INDEXED

Provisional Agenda Item 16

CD26/26 (Eng.) 15 August 1979 ORIGINAL: ENGLISH

RESOLUTIONS OF THE THIRTY-SECOND WORLD HEALTH ASSEMBLY AND OF THE SIXTY-FOURTH SESSION OF THE EXECUTIVE BOARD OF INTEREST TO THE REGIONAL COMMITTEE

The Director of the Pan American Sanitary Bureau, Regional Director of the World Health Organization for the Americas, brings to the attention of the Regional Committee, for information and any action it deems appropriate, the following resolutions approved by the Thirty-second World Health Assembly and by the Executive Board at its 64th session:

WHA32.8	Scale of Assessment for the Financial Period 1980-1981
WHA32.9	Appointment of the External Auditor
WHA32.11	Collaboration with the United Nations System: General Matters - United Nations Water Conference. Follow-up to the Mar del Plata Action Plan
WHA32.13	Development of the Mental Health Programme
WHA32.14	Workers' Health Programme

WHA32.15 Development and Coordination of Biomedical and Health Services Research

WHA32.16 Health Laboratory Technology

WHA32.24 Collaboration with the United Nations System: General Matters
- Coordination of Activities with Other United Nations Agencies
and Attainment of Health for All by the Year 2000

WHA32.25 Collaboration with the United Nations System: General Matters - Health Care of the Elderly

WHA32.28 Appropriation Resolution for the Financial Period 1980-1981

WHA32.29 Tentative Budgetary Projections for the Financial Period 1982-1983

WHA32.30 Formulating Strategies for Health for All by the Year 2000

WHA32.31 Review of the Medium-term Programme for the Promotion of Environmental Health

WHA32.33	Respiratory Diseases
WHA32.34	Emergencies Caused by Yellow Fever and Other Communicable Diseases
WHA32.39	Leprosy
WHA32.41	Action Program on Essential Drugs
WHA32.42	WHO Long-term Programme for Maternal and Child Health
EB64.R2	Confirmation of Amendments to the Staff Rules

Annexes

SCALE OF ASSESSMENT FOR THE FINANCIAL PERIOD 1980-1981

The Thirty-second World Health Assembly,

1. DECIDES that the scale of assessment for 1980-1981 shall, subject to the provisions of paragraph 2 below, be as follows:

Member	Scale (percentage)
Afghanistan	0.01
Albania	0.01
Algeria	0.10
Angola	0.02
Argentina	0.83
Australia	1.51
Austria	0.63
Bahamas	0.01
Bahrain	0.01
Bangladesh	0.04
Barbados	0.01
Belgium	1.06
Benin	0.01
Bolivia	0.01
Botswana	0.01
Brazil	1.02
Bulgaria	0.14
Burma	0.01
Burundi	0.01
Byelorussian Soviet Socialist Republic	0.40
Canada	2.99
Cape Verde	0.01
Central African Empire	0.01
Chad	0.01
Chile	0.09
China	5.41
Colombia	0.11
Comoros	0.01
Congo	0.01
Costa Rica	0.02
Cuba	0.11
Cyprus	0.01
Czechoslovakia	0.83
Democratic Kampuchea	0.01
Democratic People's Republic of Korea	0.05
Democratic Yemen	0.01
Denmark	0.63
Djibouti	0.01

Dominican Republic 0.02	Member	Scale (percentage)
Egypt 0.08 El Salvador 0.01 Ethiopia 0.01 Fiji 0.01 Fiji 0.01 Finland 0.43 France 5.73 Gabon 0.01 Gembia 0.01 German Democratic Republic 0.01 Germany, Federal Republic of 7.58 Ghana 0.02 Greece 0.34 Grenada 0.01 Guatemala 0.02 Guinea 0.01 Guinea 0.01 Guinea 0.01 Guinea 0.01 Haiti 0.01 Honduras 0.01 Hungary 0.32 Iceland 0.02 India 0.67 Indonesia 0.67 Indonesia 0.14 Iran 0.39 Ireland 0.08 Ireland 0.15 Israel 0.23 Italy 0.23 Italy 0.02 Japan 8.50 Jordan 0.01 Kenya 0.02 Japan 8.50 Jordan 0.01 Kenya 0.01 Liberia 0.01 Liberia 0.01 Liberia 0.01 Liberia 0.01 Liberia 0.01 Malaysia 0.02 Malaivi 0.01 Malaysia 0.09 Maldives 0.01 Malayia 0.09 Maldives 0.01 Malayia 0.01 Malayia 0.09 Maldives 0.01 Malayian 0.01 Mauritania 0.01 Mauritania 0.01 Mauritania 0.01 Mauritius 0.01	Dominican Republic	0.02
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Mexico 0.78		
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Member	<u>Scale</u> (percentage)
Monaco	0.01
Mongolia	0.01
Morocco	0.05."
Mozambique	0.02
Namibia	0.01
Nepal	0.01
Netherlands	1.40
New Zealand	0.25
Nicaragua	0.01
Niger	0.01
Nigeria	0.13
Norway	0.44
Oman	0.01
Pakistan	0.07
Panama	0.02
Papua New Guinea	0.01
Paraguay	0.01
Peru	0.06
Philippines	0.10
Poland	1.37
Portugal	0.19
Qatar	0.02
Republic of Korea	0.13
Romania	0.23
Rwanda	0.01
Samoa	0.01
Sao Tome and Principe	0.01
Saudi Arabia	0.23 0.01
Senegal	0.01
Sierra Leone	0.01
Singapore	0.01
Somalia	0.41
South Africa	0.01
Southern Rhodesia	1.51
Spain	0.02
Sri Lanka Sudan	0.01
Suriname	0.01
Swaziland	0.01
Sweden	1.22
Switzerland	0.94
Syrian Arab Republic	0.02
Thailand	0.10
Togo	0.01
Tonga	0.01
Trinidad and Tobago	0.03
Tunisia	0.02
Turkey	0.29
Uganda	0.01
Ukrainian Soviet Socialist Republic	1.51
Union of Soviet Socialist Republics	11.42

Member	<u>Scale</u> (percentage)
United Arab Emirates	0.07
United Kingdom of Great Britain and	
Northern Ireland	4.45
United Republic of Cameroon	0.01
United Republic of Tanzania	0.01
United States of America	25.00
Upper Volta	0.01
Uruguay	0.04
Venezuela	0.38
Viet Nam	0.03
Yemen	0.01
Yugoslavia	0.38
Zaire	0.02
Zambia	0.02

^{2.} REQUESTS the Director-General, in the event that assessments are fixed provisionally or definitively by the present Health Assembly for any new Members, to adjust the scale as set forth in paragraph 1.

Eleventh plenary meeting, 18 May 1979 A32/VR/11

APPOINTMENT OF THE EXTERNAL AUDITOR

The Thirty-second World Health Assembly

- 1. RESOLVES that Sir Douglas Henley be appointed External Auditor of the accounts of the World Health Organization for the financial period 1980-1981 and that he conduct his audits in accordance with the principles incorporated in Article XII of the Financial Regulations, with the provision that, should the necessity arise, he may designate a representative to act in his absence;
- 2. EXPRESSES its thanks to Sir Douglas Henley for the work he has performed for the Organization in his audit of the accounts for the financial year 1978.

Eleventh plenary meeting, 18 May 1979 A32/VR/11

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COLLABORATION WITH THE UNITED NATIONS SYSTEM: GENERAL MATTERS

United Nations Water Conference: Follow-up to the Mar del Plata Action Plan

The Thirty-second World Health Assembly,

Recalling resolutions WHA30.33 and WHA31.40, and having considered resolution EB63.R32 of the Executive Board;

Reiterating that safe drinking-water and sanitation are essential components of primary health care;

Recognizing the importance of the targets set at Mar del Plata for the International Drinking-Water Supply and Sanitation Decade for attaining a satisfactory level of health;

1. THANKS the Director-General for his report¹ and endorses the action he has taken, as outlined therein;

URGES Member States:

- (1) to give high priority to the provision of safe water supply and sanitation in national development plans, bearing in mind that these services are essential for the attainment of the goal of health for all by the year 2000;
- (2) to give urgent attention to preparing national plans and programmes for the Decade if they have not yet done so;
- (3) to support the cooperative action for the Decade initiated by the United Nations, the United Nations Children's Fund, the United Nations Development Programme, the International Labour Organisation, the Food and Agriculture Organization of the United Nations, the World Health Organization, and the World Bank;
- (4) to support the UNDP resident representative by establishing a mechanism within the government that will assure the effective and coordinated interaction of external agencies and all relevant government bodies:

3. REQUESTS the Director-General:

- to continue to implement resolutions WHA30.33 and WHA31.40;
- (2) to ensure the full coordination of WHO's activities in this field with other efforts of the Organization for providing primary health care and attaining the social goal of health for all by the year 2000;

¹ Document EB63/34 Add.2.

- 4. EXPRESSES its thanks to those governments that have made contributions to WHO, and to the United Nations Development Programme for its support to the Organization's preparatory action at country level, particularly in the least developed countries;
- 5. CALLS UPON other Member States also to support these activities.

Eleventh plenary meeting, 18 May 1979 A32/VR/11

DEVELOPMENT OF THE MENTAL HEALTH PROGRAMME

The Thirty-second World Health Assembly,

Recalling resolutions WHA28.84, WHA29.21 and WHA30.45 which noted with concern the magnitude and severity of psychosocial stresses and their effects on the health of populations, as well as the importance of psychosocial factors in health and health care;

Recalling that the Conference of Alma-Ata recommended that primary health care should include as one of its elements the promotion of mental health, linking mental health with the training of primary care personnel, provision of health services and sharing of research;

Considering that, in planning for Health for All by the Year 2000 and in implementing such plans, due emphasis needs to be given to the promotion of mental health and psychosocial development, including identification of research in both areas;

Noting that the response of Member States to provide voluntary contributions to the Mental Health Programme has been insufficient to provide the financial and technical means necessary for the full implementation of the resolutions referred to above,

- 1. THANKS those governments, foundations, industries, labour organizations and nongovernmental organizations, who have made contributions to the programme thus allowing for priority activities to be initiated;
- 2. URGES Member States who have not yet contributed to this programme to make every effort to do so;
- 3. INVITES foundations, industry, labour organizations, nongovernmental organizations and individuals to support WHO in its efforts to lay emphasis on the development of the Mental Health Programme;
- 4. DECIDES to establish a Special Account for the Mental Health Programme as a sub-account of the Voluntary Fund for Health Promotion;
- 5. REQUESTS the Director-General to submit a report to a future World Health Assembly on further developments in regard to this programme and the support received for it.

Twelfth plenary meeting, 22 May 1979 A32/VR/12

WORKERS' HEALTH PROGRAMME

The Thirty-second World Health Assembly,

Having considered the Report of the Director-General on the Occupational Health Programme; $^{\rm L}$

Noting with concern the serious increase in occupational and work-related diseases in many parts of the world where at the same time occupational health services are either non-existent, weak or isolated from general health services;

Noting further that the health of the worker is a major factor in the well-being of the family and community and has a considerable impact on human productivity and socioeconomic development;

Convinced that the field of occupational health calls for a broad multidisciplinary approach;

Recalling that the Alma-Ata Declaration refers to bringing health care as close as possible to where people live and work, and convinced that this will require the use of resources in industry and other economic activities to enhance health promotion;

Aware of the opportunities that work has in health promotion and that these have not as yet been fully exploited for the improvement of the health of nations;

Concerned at the uncontrolled introduction of some industrial and agricultural processes with physical, chemical, biological and psychosocial hazards, especially in developing countries where lower standards of health may further aggravate the situation;

Stressing that in many countries enterprises and employers do not provide adequate resources and facilities for the development of occupational health services, while there is inadequate legislation in this field;

Aware that the health and well-being of the families of workers have a profound influence on the health of workers;

Noting that migrant workers have particular health and social problems as do their families both in the countries of employment and their countries of origin;

Noting that the Report of the Director-General contains important elements and proposes new programme areas requiring action by WHO, as well as coordination within WHO and with ILO and other United Nations agencies and organizations;

Noting also that technology and standards in occupational health are in need of coordination and adaptation to conditions in developing countries, and that the rapid increase of toxic agents and biological hazards in work-places and of occupational hazards require more intensive efforts by WHO and countries;

Document A32/WP/1.

- 1. THANKS the Director-General for his report and efforts in developing this programme;
- 2. CONFIRMS its conviction that workers' health is an essential programme in which WHO should maintain its leading role;
- 3. REITERATES those recommendations and requests addressed to Member States and to the Director-General in resolution WHA29.57 and other related resolutions;

4. URGES Member States

- (1) to give special attention to working people by developing appropriate occupational health care in work-places as a contribution to the attainment of health for all by the year 2000;
- (2) to develop legislation aimed at increasing the provision of resources by enterprises and employers for such occupational health care, and at meeting the special health and related social needs of migrant workers and their families;
- (3) to strengthen coordination between health care services for workers, where they exist, and general health services;
- (4) to develop and strengthen occupational health institutions and to provide measures for preventing hazards in work-places, for the setting of standards and for the research and training in occupational health;

5. REQUESTS the Director-General

- (1) to prepare a programme of action to deal with the new dimension contained in his report, 1 and to present a progress report to the Thirty-third World Health Assembly;
- (2) to strengthen WHO occupational health resources so as to activate more effective technical cooperation with Member States and to collaborate in setting occupational health standards and guidelines;
- (3) to initiate appropriate mechanisms for seeking extrabudgetary resources and voluntary contributions to implement and strengthen the Workers' Health Programme and to report thereon to a future session of the Assembly; and
- (4) to strengthen cooperation and collaboration, in respect of WHO's Workers' Health Programme, with ILO and other organizations of the United Nations system such as UNEP and UNIDO, as well as other organizations, and to report thereon to the Thirty-third World Health Assembly.

Twelfth plenary meeting, 22 May 1979 A32/VR/12

Document A32/WP/1.

DEVELOPMENT AND COORDINATION OF BIOMEDICAL AND HEALTH SERVICES RESEARCH

The Thirty-second World Health Assembly,

Recalling resolutions WHA25.60, WHA27.61, WHA28.70, WHA29.64, WHA30.40 and WHA31.35, as well as the Executive Board's decision at its sixty-third session in January 1979 concurring with the conclusions of its Programme Committee on the review of biomedical and health services research; 1

Considering that biomedical and health services research and application of its results will be among the decisive factors for the attainment of the goal of "Health for all by the year 2000";

Noting:

- (a) the progress made in strengthening national and regional research capabilities and in establishing research coordination mechanisms at regional and global levels;
- (b) that WHO's research priorities are now being defined in accordance with the policy directives of the governing bodies by groups of national scientists, e.g. the global and regional Advisory Committees on Medical Research, and other mechanisms;
- (c) that the Director-General is preparing a report on the research activities of the Organization including their management;
- (d) that major portions of the Organization's regular budget for research are invested in research in, or for the benefit of, developing countries;

1. URGES Member States to:

- (1) identify and pursue, in collaboration with WHO as appropriate, research that is most relevant to their own major health problems, and establish effective focal points for national coordination of such research;
- (2) intensify technical cooperation among themselves for their mutual benefit in matters of biomedical and health services research of common interest;
- (3) make even greater use of WHO's research development and promotion initiatives and its regional and global research coordination mechanisms;
- (4) facilitate a continuing expansion of the participation and collaboration of national experts and institutions in WHO-coordinated research activities;
- 2. CALLS UPON Member States and bilateral, multilateral and voluntary agencies, to support these initiatives by making contributions to WHO-coordinated research as an important part of the strategies for attaining "Health for all by the year 2000";

Documents EB63/48, page 40, and EB63/49, Appendix 2.

3. REQUESTS the Director-General to accelerate the further development and application of activities which will:

. . . .

- (1) enhance national research capability through institutional strengthening and training of national scientists, including the important area of health services research;
- (2) support national research centres in developing methodologies for conducting health services research and in establishing principles and methods for research management, including planning, programming, coordination, evaluation and practical application;
- (3) maximize the utilization of national research centres, particularly in developing countries, for collaborative research activities with WHO, in order to guarantee a just geographical distribution of collaborating centres and cooperating experts;
- (4) facilitate collaborative research on health problems which transcend national and regional boundaries;
- (5) result in the finalization of a comprehensive medium-term programme with respect to the Organization's research promotion and development efforts;
- (6) strengthen the coordinating role of the global ACMR and its administrative support; and
- (7) ensure that research-related policies of the Regional Committees, Executive Board and the World Health Assembly are effectively translated into national, regional and global research strategies for the attainment of "Health for all by the year 2000";
- 4. FURTHER REQUESTS the Director-General to ensure the active participation of WHO in the United Nations Conference on Science and Technology for Development to be held in Vienna in 1979 in order to ensure the inclusion of health in priorities for scientific and technological development.

Twelfth plenary meeting, 22 May 1979 A32/VR/12

HEALTH LABORATORY TECHNOLOGY

The Thirty-second World Health Assembly,

Recalling the International Conference on Primary Health Care held in Alma-Ata in 1978;

Recalling resolution WHA29.74, on promotion of health technology for rural development and primary health care, resolutions WHA27.51, WHA27.58, WHA28.58, WHA31.44 and others, as well as the Chapter on Control of Communicable Diseases in the Sixth General Programme of Work, all of which require health laboratory support for their effective implementation;

Emphasizing the need for an integrated health laboratory service;

Bearing in mind the low priority given to health laboratory services in many countries and their frequent under-development in relation to other components of national health services, and the fact that laboratory workers with basic training and equipment could provide the minimal clinical and public health service required,

- 1. URGES Member States, which have not already done so, to give due consideration to the development of health laboratory services;
- 2. REQUESTS the Director-General to:
 - (1) intensify the technical cooperation with and among Member States for the establishment and development of simple laboratory services for clinical and public health purposes to assist in the clinical management, control and prevention of diseases, and to include the monitoring of environmental hazards, particularly in water;
 - (2) develop appropriate technology for the use of health laboratories in developing countries, particularly in support of primary health care;
 - (3) intensify the dialogue with the manufacturers of laboratory equipment and reagents for this purpose, in order to make these available at low price and guaranteed quality to the countries in need; and
 - (4) reflect more adequately the importance of health laboratory services in the Programme Budget of WHO.

Twelfth plenary meeting, 22 May 1979 A32/VR/12

COLLABORATION WITH THE UNITED NATIONS SYSTEM - GENERAL MATTERS

Coordination of activities with other United Nations agencies and attainment of health for all by the year 2000

The Thirty-second World Health Assembly,

Recalling resolution WHA30.43, in which it is proclaimed that the attainment by all the peoples of the world by the year 2000 of a level of health that will permit them to lead a socially and economically productive life is the main social target of governments and of WHO:

Reaffirming the statement in the Declaration of Alma-Ata to the effect that an acceptable level of health for all the peoples of the world by the year 2000 can be attained through fuller and better use of the world's resources, a considerable part of which is now spent on armaments and military conflicts, and that a genuine policy of independence, peace, détente and disarmament could and should release additional resources that could well be devoted to peaceful aims and in particular to the acceleration of social and economic development, of which primary health care is an essential part;

Noting resolutions 33/72 A, 33/91 E, 33/71 H and 33/66 B and other resolutions adopted in recent years by the United Nations General Assembly on maintenance and strengthening of peace, extension of détente, averting the threat of nuclear war, prohibition of the development of new types of weapons of mass destruction, banning of aggressive military conflicts, and attainment of the objectives of true disarmament;

Recalling also the contribution that WHO has already made to the strengthening of peace and cooperation between nations, notably resolution WHA15.51 on the role of the physician in the preservation and promotion of peace, resolution WHA20.54 on weapons of mass destruction, and resolutions WHA22.58 and WHA23.53 on prohibition of the production and stockpiling of chemical and bacteriological (biological) weapons,

- 1. CALLS UPON Member States to redouble their efforts towards the establishing, maintaining and strengthening of peace throughout the world, the consolidation of international détente and the attainment of disarmament, with a view to creating the conditions for a large-scale release of resources which could be used for the development of public health in the world;
- 2. REQUESTS the Director-General to:
 - (1) prepare a report on the further steps which WHO, as a United Nations specialized agency, would be able to take in the interests of international socioeconomic development, and also with the aim of assisting in the implementation of the United Nations resolutions on strengthening of peace, détente and disarmament;
 - (2) conduct a study for consideration by the Executive Board on the subject of strengthening the cooperation of the World Health Organization with other organizations within the United Nations system in order to achieve the objective of health for all by the year 2000.

COLLABORATION WITH THE UNITED NATIONS SYSTEM - GENERAL MATTERS

Health Care of the Elderly

The Thirty-second World Health Assembly,

Having noted the resolution adopted by the Thirty-third Session of the United Nations General Assembly (Resolution 33/52), deciding to organize a World Assembly on the Elderly in 1982;

Recognizing the leadership role of WHO in the health care of the elderly, and in the hope that the United Nations will invite WHO to take a prominent role in organizing the Assembly;

Knowing that both the absolute number and proportion of older people are increasing in all regions of the world, while at the same time health and social support services are either lacking or deficient and need to be developed further;

Believing that by the year 2000 the populations of the developing nations and developed nations of the world will have increased significantly and thus will have to envisage critical problems in the promotion of health, economic and social policy;

Considering that attention must be given to prevention in the social, economic and health spheres, starting with young people, to develop lifelong patterns that will help avoid debilitating conditions of old age;

Considering that in addition to family care alternatives must go beyond institutional care, such as home care, day care and ambulatory care to greatly improve the quality of life of the elderly;

Noting also that the World Health Assembly on the Elderly will focus attention on the health, social and economic needs of the elderly;

1. REQUESTS the Director-General to:

- (1) continue to support the important efforts in this area already under way by WHO, and to mobilize the extra resources, both budgetary and extrabudgetary, which will be required;
- (2) undertake activities in collaboration with the United Nations and other agencies for appropriate participation in the Assembly;
- (3) consider the selection of "Health of the Aged" as the theme for World Health Day, 1982;
- (4) take appropriate measures to maximize the activity of the Global Programme, which is aimed at improving the health care and health status of the older populations of all nations;
- (5) make use of present information systems to obtain and disseminate information on health problems and care of the aged;

- (6) promote activities for determining effective approaches for providing health care to the elderly, including integration into primary health care;
- (7) encourage comparative studies which provide a better understanding of the ways in which the elderly differ in physiological and pathological functions, as, for example, in absorption, effectiveness and metabolism or excretion of drugs;
- (8) encourage studies of the life histories of healthy elderly to promote understanding of the factors able to prevent sickness and disability in later life;
- (9) encourage participation by WHO in workshops and conferences composed of representatives of national government and international organizations for the purpose of discussing alternatives to institutional care for providing social security and minimum incomes, housing, health care, including maintenance of physical activity, meals, homemaker services, transportation and other needed services;
- (10) transmit to the Secretary-General of the United Nations the text of the present resolution, with a view to ensuring that WHO assumes an appropriate role in the preparations for the World Assembly;
- (11) report to the sixty-fifth session of the Executive Board and the Thirty-third World Health Assembly on the status of the preparations undertaken for the World Assembly;
- 2. URGES Member States to:
 - (1) undertake similar actions in their nations;
 - (2) explore alternative services and systems of health care for the elderly including arrangements for optimum coordination between them;
 - (3) promote activities and programmes that may help individuals to get prepared in time for later life;
 - (4) encourage efforts directed at retaining or changing attitudes and behaviour among some segments of the population toward the elderly, particularly education of families and communities with a view to accepting the elderly as an integrated part of the community;
 - (5) promote the development of informational materials including a glossary of terms about the elderly that can be widely disseminated;
 - (6) emphasize through local medical and health-related groups the importance of diagnosis of problems that if not treated can contribute to long-term debilitating problems in the elderly:
 - (7) take measures to have health professional schools include appropriate content on aging in basic clinical and social science courses that integrate knowledge about aging and the problems of the elderly, thus helping to assure an early commitment in the areas of prevention and gerontology.

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APPROPRIATION RESOLUTION FOR THE FINANCIAL PERIOD 1980-1981

The Thirty-second World Health Assembly

RESOLVES to appropriate for the financial period 1980-1981 an amount of US\$ 477 378 400 as follows:

Α.

Appropriation section	Purpose of appropriation	Amount US \$
1.	Policy organs	10 128 600
2.	General programme development, management and	
	coordination	56 025 900
3.	Development of comprehensive health services	77 994 100
4.	Disease prevention and control	76 806 600
5.	Promotion of environmental health	26 157 000
6.	Health manpower development	52 362 500
7.	Health information	42 881 000
8.	General services and support programmes	84 934 300
	Effective working budget	427 290 000
9.	Transfer to Tax Equalization Fund	40 000 000
10.	Undistributed reserve	10 088 400
	Total	477 378 400

- B. Amounts not exceeding the appropriations voted under paragraph A shall be available for the payment of obligations incurred during the financial period 1 January 1980 31 December 1981 in accordance with the provisions of the Financial Regulations. Notwithstanding the provisions of the present paragraph, the Director-General shall limit the obligations to be incurred during the financial period 1980-1981 to sections 1-9.
- C. Notwithstanding the provisions of Financial Regulation 4.5, the Director-General is authorized to make transfers between those appropriation sections that constitute the effective working budget up to an amount not exceeding 10% of the amount appropriated for the section from which the transfer is made, this percentage being established in respect of section 2 exclusive of the provision made for the Director-General's and Regional Directors' Development Programmes (US\$ 7 543 600). The Director-General is also authorized to apply amounts not exceeding the provision for the Director-General's and Regional Directors' Development Programmes to those sections of the effective working budget under which the programme expenditure will be incurred. All such transfers shall be reported in the financial report for the financial period 1980-1981. Any other transfers required shall be made and reported in accordance with the provisions of Financial Regulation 4.5.

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D. The appropriations voted under paragraph A shall be financed by assessments on Members after deduction of the following:

thus resulting in assessments on Members of US\$ 472 978 400. In establishing the amounts of contributions to be paid by individual Members, their assessments shall be reduced further by the amount standing to their credit in the Tax Equalization Fund, except that the credits of those Members that require staff members of WHO to pay taxes on their WHO emoluments shall be reduced by the estimated amounts of such tax reimbursements to be made by the Organization.

Thirteenth plenary meeting, 24 May 1979 A32/VR/13

TENTATIVE BUDGETARY PROJECTIONS FOR THE FINANCIAL PERIOD 1982-1983

The Thirty-second World Health Assembly,

Having considered the recommendations of the Executive Board on the appropriate rate of growth for the WHO regular programme budget in 1982-1983;

Stressing the central importance of the WHO regular budget in enabling the Organization to carry out its worldwide functions;

DECIDES that the regular programme budget for 1982-1983 should be developed within a budgetary level that will provide for a real increase of up to 4% for the biennium, in addition to reasonably estimated cost increases, the underlying factors and assumptions of which should be made explicit.

Thirteenth plenary meeting, 24 May 1979 A32/VR/13

FORMULATING STRATEGIES FOR HEALTH FOR ALL BY THE YEAR 2000

The Thirty-second World Health Assembly,

Recalling resolution WHA30.43 by which the Thirtieth World Health Assembly decided that the main social target of governments and of WHO in the coming decades should be the attainment by all the citizens of the world by the year 2000 of a level of health that will permit them to lead a socially and economically productive life;

Having considered the report of the International Conference on Primary Health Care;

Noting with appreciation the preliminary document of the Executive Board entitled "Formulating strategies for health for all by the year 2000", 1

- 1. DECIDES that the development of the Organization's programmes and allocations of its resources at global, regional and country levels should reflect the commitment of WHO to the overriding priority of the achievement of Health for all by the year 2000;
- 2. ENDORSES the report of the International Conference on Primary Health Care including the Declaration of Alma-Ata, which:
 - (1) states that primary health care, forming as it does an integral part both of countries' health systems, of which it is the central function and main focus, and of overall social and economic development, is the key to attaining an acceptable level of health for all;
 - (2) calls upon all governments to formulate national policies, strategies and plans of action to launch and sustain primary health care as part of a comprehensive national health system and in coordination with other sectors;
 - (3) calls for urgent and effective national and international action to develop and implement primary health care throughout the world, and particularly in developing countries, in a spirit of technical cooperation and in keeping with a New International Economic Order;
 - (4) recommends that WHO and the United Nations Children's Fund should continue to encourage and support national strategies and plans for primary health care as part of overall development, and should also formulate as soon as possible appropriate plans of action at the regional and global levels to promote and facilitate the mutual support of countries for accelerated development of primary health care;
- 3. THANKS the Government of the Union of Soviet Socialist Republics once again for its invitation and for the excellent facilities provided for the International Conference on Primary Health Care, which contributed greatly to its success, as well as for the opportunity afforded to participants in the Conference to acquaint themselves with examples of the health care system for the population;

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- 4. BELIEVES that the exchange of experience between participants from various countries at the Alma-Ata Conference through the discussions in plenary and in the committees, as well as through national and regional reports, international exhibitions, and visits to health establishments in the course of field trips, should serve as an encouragement, particularly to developing countries, that it is possible to organize effective primary health care as part of the national health system within a period of time that is short in a historical perspective;
- 5. CONSIDERS that, in accordance with the basic policy of adapting international activities to the real needs of countries, strategies and plans of action for attaining health for all by the year 2000 should be formulated first and foremost by the countries themselves, and that the regional and global strategies formulated on the basis of these national strategies, as well as on the basis of the strategies of regional groups formed by countries for practical reasons, should promote and facilitate accelerated development of primary health care in the Member States of WHO, as well as the attraction of substantial and continuing additional international resources for these purposes;
- 6. CONSIDERS that the proposals of the Executive Board contained in its preliminary document entitled "Formulating strategies for health for all by the year 2000" concerning guiding principles for the formulation of effective strategies at the national, regional and global levels are a sound basis for the development and refinement of these strategies;
- 7. PROPOSES to the governments of Member States and to the regional committees and Executive Board of WHO that, in accordance with their constitutional functions, they should study these proposals in the light of the timetable contained in the document and present their further proposals concerning the coordinated development of strategies to the Thirty-third World Health Assembly;
- 8. INVITES Member States to consider the immediate use of the document entitled "Formulating strategies for health for all by the year 2000", individually as a basis for formulating national policies, strategies and plans of action, and collectively as a basis for formulating regional and global strategies;

9. REQUESTS the Executive Board:

- (1) to submit proposals for the global strategy to the Thirty-fourth World Health Assembly and to support the Health Assembly in developing, implementing, monitoring and evaluating this strategy;
- (2) to make sure that the global strategy is taken fully into account in preparing the Seventh General Programme of Work covering a specific period;
- (3) to ensure that the global strategy is fully reflected in WHO's contribution to the preparation of the new international development strategy of the United Nations;
- 10. APPEALS to all agencies and organizations within the United Nations system, and in particular the United Nations Children's Fund and the United Nations Development Programme, as well as to all bilateral agencies and nongovernmental organizations concerned, to give full support to the formulation and implementation of national, regional and global strategies for achieving an acceptable level of health for all, and pledges WHO's full cooperation with these bodies in such joint endeavours;
- 11. RECOGNIZES the necessity of careful planning, management and effective use of available resources, including those from national, bilateral, and international sources, for achievement of Health for All;

12. REQUESTS the Director-General:

- (1) to devote a predominant proportion of the Director-General's and Regional Directors' Development Programme funds to ensuring the development and implementation of strategies for Health for All;
- (2) to develop a preliminary plan to ensure the appropriate allocation of funds for this purpose in the implementation of the approved 1980-1981 budget and in the formulation of the projected 1982-1983 budget, and submit this plan to the sixty-fifth session of the Executive Board;
- (3) to take all the technical and administrative measures required to promote, coordinate, and support the formulation and implementation of national policies, strategies and plans of action and of regional and global strategies;
- (4) to support the establishment of national health development centres of the type proposed in the above-mentioned document, and to consider organizing them in regional and global networks as suggested in this document;
- (5) to facilitate the full exchange of information among Member States concerning the formulation and implementation of strategies and plans of action;
- (6) to foster the intensification of research and training in primary health care at national, regional and global levels, making use in particular of appropriate collaborating centres;
- (7) to propose measures, in agreement with the United Nations and related organizations, such as the United Nations Children's Fund, the United Nations Development Programme, the Food and Agriculture Organization of the United Nations, the United Nations Educational, Scientific and Cultural Organization, and the World Bank, as well as with other interested international agencies, for joint action to accelerate the development of primary health care in the developing, and especially the least developed, countries;
- (8) to submit a report on the strategies formulated for attaining health for all by the year 2000 to the United Nations Preparatory Committee for inclusion in the New International Development Strategy, which is to be considered by the General Assembly of the United Nations at its thirty-fourth session in 1980;
- (9) to make sure that the Secretariat at all operational levels provides the necessary support to countries, regional committees, the Executive Board and the Health Assembly for the formulation of national, regional and global strategies;
- (10) to ensure that the Secretariat acts as an efficient instrument to give effect to the resolutions and decisions of the regional committees, the Executive Board, and the Health Assembly concerning strategies for health for all by the year 2000 and in carrying out those aspects of the national, regional and global strategies that are assigned to it by these bodies;
- (11) to prepare and present to a future Health Assembly a progress report on the implementation of this resolution.

REVIEW OF THE MEDIUM-TERM PROGRAMME FOR THE PROMOTION OF ENVIRONMENTAL HEALTH

The Thirty-second World Health Assembly,

Having noted the global medium-term programme for the promotion of environmental health, the comments of the Executive Board thereon, and resolution EB63.R18;

- 1. COMMENDS the Director-General on his report;
- 2. ENDORSES the programme as presented;
- 3. URGES Member States:
 - (1) to continue close collaboration with WHO in achieving the objectives and targets set out in the medium-term programme;
 - (2) to give particular consideration to the programming of WHO resources at the country level for implementing this programme, ensuring in this process that the priorities established collectively by the Health Assembly are fully taken into account;
 - (3) to further ensure that in the planning and implementing of environmental health programmes full advantage is taken of multisector and multiagency participation;
- 4. INVITES the WHO regional committees to give appropriate attention to this matter;
- 5. REQUESTS the Director-General:
 - (1) to continue to give due attention to the relationship between health and environmental factors as a basis for the future development of this programme;
 - (2) to implement the programme, giving particular attention to:
 - (a) directing available resources at all levels within the Organization towards the targets set forth in the medium-term programme;
 - (b) taking the necessary steps to translate the medium-term programme into subsequent programme budgets, including the mobilizing of additional resources;
 - (c) coordinating activities in this field with other priorities of the Organization with a view to meeting needs of both the developing and the developed countries, and attaining the goal of health for all by the year 2000;
 - (d) coordination with other international intergovernmental and nongovernmental organizations involved.

RESPIRATORY DISEASES

The Thirty-second World Health Assembly,

Concerned about the high morbidity and mortality from respiratory diseases in particular because acute respiratory infections are among the most important causes of death in infants and young children;

Recognizing that respiratory diseases constitute a serious socioeconomic and public health problem in both developing and developed countries since they cause excessive absence from work and premature invalidity, draw substantially on medical care services, and, therefore, call heavily upon social and health insurances and cause considerable losses to national economies;

Recalling the effect of both active and passive smoking on the development of respiratory diseases, especially on their chronic form;

Endorsing the priority given to these problems in WHO's Sixth General Programme of Work;

Noting with satisfaction the action already taken by the Organization at the national, regional and global levels in preparing for a major control programme of respiratory diseases;

Conscious that the application of innovative, simple and effective measures for the prevention and control of respiratory diseases would constitute an important element in increasing the effectiveness and acceptability of primary health services,

1. REQUESTS the Director-General

- (1) to stimulate and to intensify the involvement of Member States in the control of respiratory diseases, and to promote technical cooperation with them as well as among them, in respect of the formulation of national control programmes, with particular reference to their integration into current and future development activities in health and other fields;
- (2) to accord high priority to research activities for the development of simple and effective methods for the prevention of acute and chronic respiratory diseases, their timely detection and diagnosis, and appropriate curative services, e.g. optimal package treatment;
- (3) to keep the Executive Board and the World Health Assembly informed of the progress made in the development and implementation of the programme on respiratory diseases;
- 2. CALLS UPON the United Nations Development Programme, the World Bank, UNICEF, the United Nations Fund of Population Activities, and other international organizations and funds to actively support this new programme, as a major element of primary health care;
- 3. URGES Member States to give a high priority to the control of respiratory diseases and to establish national targets in terms of reduction of morbidity and mortality.

EMERGENCIES CAUSED BY YELLOW FEVER AND OTHER COMMUNICABLE DISEASES

The Thirty-second World Health Assembly,

Noting with deep concern the recent epidemics of yellow fever in a number of West African countries and in the Region of the Americas;

Recognizing the need for urgent intensified action to control the disease in those countries where it is still endemic, and for the prevention of a deterioration of the epidemiological situation in other countries;

Noting with satisfaction the action taken by the Director-General in accordance with resolution WHA23.34;

Noting the Organization's activities in the field of surveillance and control of communicable diseases;

Taking cognizance of the World Health Organization's Emergency Scheme for Epidemics being prepared in collaboration with Member States and the valuable supporting role of the WHO Collaborating Centres and other advisory services as technical resources;

Realizing the need for close international cooperation and collaboration in communicable disease surveillance and control; and

Considering that emergencies caused by communicable diseases may require resources beyond those currently available to national health authorities,

- 1. THANKS the Director-General for the prompt action and collaboration with the affected countries to bring the epidemics under control;
- 2. URGES all Member States where the disease is endemic to pursue the anti-yellow fever surveillance and control efforts on a more realistic basis and provide the national priority required on a continuing basis, and to make use of WHO emergency services whenever conditions call for: .
- 3. REQUESTS the Director-General to:
 - (1) develop further the recommendations contained in resolution WHA23.34, and in particular the support of advisory services and the provision of yellow fever vaccine approved by WHO, and
 - (2) cooperate with countries in developing realistic approaches to the surveillance and control of yellow fever and other communicable diseases with epidemic potential.

LEPROSY

The Thirty-second World Health Assembly,

Recalling resolutions WHA29.70 and WHA30.36 and previous other resolutions both of the World Health Assembly and the Executive Board;

Noting:

- (a) the progress made throughout the world since the adoption of the above resolutions particularly in studies of ultra-structure, histochemistry, bacteriology, immunology, chemotherapy and prophylaxis;
- (b) that leprosy, in spite of such advances, is still a major public health and social problem in some countries of Africa, Asia, Latin America and Pacific Islands;
- (c) that urgent and resolute steps will be necessary to control leprosy if the concept of Health for all by the year 2000 is to become a practical possibility, since the periods of incubation and infectivity of leprosy may extend up to a considerable number of years;
- 1. URGES Member States with endemic leprosy to:
 - (1) allocate adequate resources to carry out effective leprosy programmes, including training of their own personnel;
 - (2) support treatment, physical and social rehabilitation and vocational programmes for leprosy patients to make them self-reliant and self-supporting;
 - (3) review the current practices of isolation of leprosy patients in specialized institutions, where this exists, in order to achieve their progressive integration as active and fully accepted members of society:
- 2. REQUESTS the Director-General to:
 - (1) intensify the Organization's activities for leprosy control in the next decade, in contribution to the attainment of the objective: Health for all by the year 2000:
 - (2) cooperate with Member States with endemic leprosy to develop effective programmes for prevention and treatment of leprosy;
 - (3) continue to mobilize resources from extrabudgetary sources both for the leprosy control programme and for the Special Programme of Research and Training in Tropical Diseases, particularly for epidemiological surveys and chemotherapeutic trials, and to promote relevant research for the development of new drugs as well as in the field of immunology with the objective of producing a vaccine for prophylaxis; and
 - (4) report to the Thirty-fifth World Health Assembly on the steps taken.

ACTION PROGRAMME ON ESSENTIAL DRUGS

The Thirty-second World Health Assembly,

Recalling resolutions WHA31.32 and EB63.R20;

Programme and the state of the

Convinced that an adequate supply of essential drugs is indispensable for attaining "health for all by the year 2000";

- ENDORSES resolution EB63.R20;
- 2. REITERATES the validity of the guiding principles embodied in resolution WHA31.32;
- 3. THANKS the Director-General for his report; 1
- 4. URGES Member States to take action in accordance with resolution WHA31.32 and to participate in the Action Programme on Essential Drugs, concentrating on ways and means of rational procurement; on more suitable training; and on fuller and more objective information of all health workers involved in the utilization of drugs;
- 5. REQUESTS the Director-General to establish a special programme on essential drugs, including its administrative structure, ² and to make provision for the initial financing from the Director-General's and/or Regional Directors' Development Programmes, if necessary.

 $[\]frac{1}{1}$ Document A32/10.

Resolution EB63.R20, para. 3.

WHO LONG-TERM PROGRAMME FOR MATERNAL AND CHILD HEALTH

The Thirty-second World Health Assembly,

Recalling resolutions WHA27.43, WHA31.47 and WHA31.55;

Referring to the social target of health for all by the year 2000 and to the principles regarding primary health care adopted in 1978 at the conference in Alma-Ata;

Recognizing that maternal and child health care including nutrition, family planning and immunization are essential aspects of primary health care;

Convinced that a rapid development and determined strengthening of maternal and child health care are of paramount importance for attaining the goal of health for all by the year 2000:

Realizing that more than one-third of the world's population in the year 2000 is not yet born;

Recognizing also that maternal and child health is the health priority, firmly interrelated with the social and economic development of every country;

Recognizing that definite improvements in the health of mothers and children have been achieved where special efforts and resources have been committed to this area of health development;

Convinced that it is important to ensure continuation of the emphasis on the welfare of children started during the International Year of the Child;

Thanking the Director-General for his comprehensive and informative report providing the background for action now,

1. URGES Member States:

- (1) to further develop their overall health and socioeconomic planning giving due and explicit attention to meeting health and other needs of mothers, children and the family, and to ensure appropriate distribution of national resources to this end;
- (2) to promote specific governmental regulations and laws to provide free health services at least during periods of high risk: pregnancy, delivery and the first years of life when breastfeeding, immunization and treatment of infectious and parasitic diseases are crucial for survival;
- (3) to promote the development of primary health care programmes with concrete plans for maternal and child health care as its essential component that includes care during pregnancy and childbirth, family planning, infant and child care with appropriate focus on improvement of nutrition, prevention of infections, promotion of physicial and psychological development of the child, and education for family life;
- (4) to ensure the development of appropriate supportive, referral and training services in paediatrics, obstetrics and other related subjects in line with principles of primary health care;

- (5) to ensure active participation of individuals, families and communities in the development and utilization of maternal and child health care;
- (6) to develop, as appropriate, health and related social services such as day-care services, school health, adolescent services and relevant social legislation in support of mothers and children;
- (7) to encourage new approaches for simpler, more direct and massive actions to bring to those families, mothers and children most in need those essential health and educational services which are still unavailable to them and review when appropriate present utilization of all health personnel including traditional health workers in order to ensure a better use of existing resources for maternal and child health;
- (8) to develop and strengthen the information support necessary for the planning and implementation of maternal and child care at different levels of the health care system;
- (9) to include in the planned efforts for maternal and child health specific attempts to reach high-risk and underprivileged groups of mothers and children and their families, and to specifically support all efforts at improving the nutrition of pregnant and lactating mothers and children;
- (10) to support research and development as well as evaluation in the area of maternal and child health as part of health services research;

2. REQUESTS the Director-General:

- (1) to support, in collaboration with UNICEF and UNFPA, and competent nongovernmental organizations in official relations with the World Health Organization and with Member States formulation and implementation of long-term maternal and child health programmes as part of the development of their strategies to reach the goal of health for all by the year 2000;
- (2) to support Member States in setting quantifiable targets and in the utilization of suitable indicators for monitoring the effectiveness of their activities in maternal and child health;
- (3) to assist Member States in implementing the Expanded Programme on Immunization as an integral part of MCH services;
- (4) to assist Member States in implementing systematic and planned chloroquine chemoprophylaxis of malaria for children and pregnant mothers in highly malarious areas;
- (5) to further support Member States in curricular revisions in teaching medical and health sciences to give wider coverage to family health and maternal and child health and in development of training programmes for all categories of workers in the health sector as well as other sectors aiming at the increase of their awareness of the relationship between health and socioeconomic factors with particular reference to the development of children;
- (6) to further develop the Organization's activities for the development of appropriate technology in maternal and child health care and promote health services research in this field;
- (7) to intensify efforts for providing additional support for the Organization's programme in maternal and child health and to mobilize scientific and financial resources in this field;
- (8) to report progress of this work to a future World Health Assembly.

CONFIRMATION OF AMENDMENTS TO THE STAFF RULES

The Executive Board

CONFIRMS in accordance with Staff Regulation 12.2¹ the amendments to the Staff Rules which have been made by the Director-General and which implement changes decided by the United Nations General Assembly and by the International Civil Service Commission concerning the education grant, the repatriation grant, a special provision for the education of disabled children, and the assignment allowance.

Third meeting, 29 May 1979 EB64/SR/3

WHO Basic Documents, 29th ed., 1979, p. 88.