FIFTY-FIRST WORLD HEALTH ASSEMBLY

A51/44 16 May 1998

Fifth report of Committee A

Committee A held its sixth meeting on 16 May 1998 under the chairmanship of Dr G. Durham (New Zealand).

It was decided to recommend to the Fifty-first World Health Assembly the adoption of the attached resolutions relating to the following agenda items:

20. Implementation of resolutions and decisions (progress reports by the Director-General)

One resolution entitled:

- Promotion of horizontal technical cooperation in health sector reform in developing countries
- 21. Disease prevention and control
 - 21.3 Emerging and other communicable diseases: antimicrobial resistance

One resolution

21.4 Noncommunicable disease prevention and control

One resolution

Agenda item 20

Promotion of horizontal technical cooperation in health sector reform in developing countries

The Fifty-first World Health Assembly,

Mindful of the principles of, and obvious need for technical cooperation among developing countries (TCDC) and of the interest shown by the Health Assembly by virtue of its resolutions WHA31.41, WHA31.54, WHA32.27, WHA35.24, WHA36.34, WHA37.15, WHA37.16, WHA38.23, WHA39.23, WHA40.17, WHA40.30 and WHA50.27, in strengthening this type of cooperation with a view to improving the health situation in the developing countries;

Underlining the principles and purposes of the United Nations, as set out in the United Nations Charter, including the sovereign equality of States and the development of friendly relations among nations based on respect for equal rights and the self-determination of peoples, which have been consistently reaffirmed by Members of the Non-Aligned Movement;

Conscious that poverty is the main cause of ill-health, and recalling United Nations General Assembly resolutions 48/183 of 21 December 1993, 40/110 of 19 December 1994, 50/107 of 20 December 1995 and 51/178 of 1 December 1996 related to observance of the International Year for the Eradication of Poverty (1996) and to the First United Nations Decade for the Eradication of Poverty (1997-2006), and all its other relevant resolutions relating to international cooperation for the eradication of poverty in developing countries;

Recognizing that the progressive globalization of economies has resulted in the adoption of unregulated market approaches to the delivery of health services which, in certain circumstances, has been to the detriment of public health and has interfered with the ability of developing countries to adopt the appropriate corrective action;

Acknowledging the valued services that the World Health Organization has provided during its 50 years of existence to all peoples of its Member States, particularly those of developing countries;

Welcoming the overall directions and initiatives announced by the Director-General elect in the reform process of the World Health Organization,

- 1. REAFFIRMS its commitment to continue its efforts towards the achievement of equitable, affordable, accessible and sustainable health care systems in all Member States;
- 2. URGES Member States to continue the development of health systems in accordance with the principles of self-reliance, self-determination and the sovereign right of each country to adopt appropriate national health policies in response to the specific needs of their people;
- 3. CALLS UPON developed countries:
 - (1) to continue to facilitate the transfer of technology and resources to developing countries in the health sector, taking into account priority needs, and to support application of the principles of technical cooperation among developing countries;
 - (2) to continue to provide WHO with the necessary financial resources to enhance implementation of health programmes in the developing countries with a view to attaining the objective of health for all;

4. REQUESTS the Director-General:

- (1) to support Member States, especially the least developed countries, in giving greater attention, at the highest political level, to the health needs of their poorest people and to strengthen the capacity of ministries of health to play a key role in intersectoral efforts to eradicate poverty;
- (2) to place renewed emphasis on the capacity of the Organization to advocate and promote a central role for health development in national and international efforts to eradicate poverty;
- (3) to maintain the support provided to countries of the Non-Aligned Movement and other developing countries for the activities of the recently established network of institutions related to health sector reform, and for technical cooperation among developing countries, including allocation of increased resources;
- (4) to ensure wide consultation with countries of the Non-Aligned Movement and other developing countries in order to take account of their views and concerns in consideration of all aspects of organizational reform of the World Health Organization and formulation of its policies;
- (5) to report to the Fifty-second World Health Assembly on the steps taken and progress made to implement this resolution.

¹ See resolution WHA50.27.

Agenda item 21.3

Emerging and other communicable diseases: antimicrobial resistance

The Fifty-first World Health Assembly,

Having considered the report of the Director-General on emerging and other communicable diseases: antimicrobial resistance;

Concerned about the rapid emergence and spread of human pathogens resistant to available antibiotics;

Aware that antimicrobial resistance is increasingly hampering treatment of infectious diseases as a result either of totally ineffective currently available antibiotics or of the high cost of "new generation" agents;

Concerned about the extensive use of antibiotics in food production, which may further accelerate the development of such resistance,

1. URGES Member States:

- (1) to encourage the development of sustainable systems to detect antimicrobial-resistant pathogens, thereby increasing the awareness of antimicrobial resistance, and to monitor volumes and patterns of use of antimicrobial agents and the impact of control measures;
- (2) to develop educational programmes for professional staff and the lay public to encourage the appropriate and cost-effective use of antimicrobial agents;
- (3) to improve practices to prevent the spread of infection and thereby the spread of resistant pathogens, and to promote appropriate antibiotic use in health care facilities and in the community, and to reduce the use of antimicrobials in food-animal production;
- (4) to develop measures to protect health workers from the hazards of resistant pathogens;
- (5) to develop measures to prohibit the dispensing of antimicrobials without the prescription of a qualified health care professional;
- (6) to strengthen legislation to prevent the manufacture, sale and distribution of counterfeit antimicrobial agents and the sale of antibiotics on the informal market;
- (7) to take measures to encourage the reduced use of antimicrobials in food-animal production;

2. REQUESTS the Director-General:

- (1) to support countries in their efforts to control antimicrobial resistance through the strengthening of laboratory capacity for the detection of resistant pathogens;
- (2) to assist in the development of sustainable national policies for rational antimicrobial use, not only in human medicine, but also in food-animal production;

- (3) to collaborate with the public health sector, the pharmaceutical industry, universities and institutions concerned with research, laboratory testing, marketing, prescription and consumption of antimicrobial agents, in order to encourage the sharing of knowledge and resources to combat antimicrobial resistance;
- (4) to devise means for the gathering and sharing of information by countries and regions concerning resistance in certain pathogens and to promote international cooperation among Member States;
- (5) to develop programmes of information and education for prescribers and users of antimicrobial agents;
- (6) to encourage promotion of research and development of new antimicrobial agents.

Agenda item 21.4

Noncommunicable disease prevention and control

The Fifty-first World Health Assembly,

Having considered the report by the Director-General on noncommunicable disease prevention and control;

Recalling *The world health report 1997*, which describes the high rates of mortality, morbidity and disability from major noncommunicable diseases, which account for nearly half of all deaths, a considerable proportion of them premature;

Noting that noncommunicable diseases already represent a significant burden on the public health services of Member States and that the problem is growing;

Alarmed by the rising trend and the bleak forecast for the twenty-first century as a consequence of the demographic and epidemiological transition, and the globalization of economic processes;

Recognizing that they cause enormous human suffering and threaten the economies of Member States, where costly treatment will further deprive the poor and powerless and increase the inequities in health between population groups and countries;

Mindful of common major behavioural and environmental risk factors that are more amenable to modification through the implementation of concerted essential public health action, as has been demonstrated recently in several Member States;

Aware that, as resources diminish, health professionals, particularly those in the forefront of health care delivery, often become the major source of health information as well as the providers of care and support to individuals and communities;

Recognizing the importance of, and continued need for, broad international action and cooperation in the development and promotion of policies and strategies to assist Member States in meeting the growing challenge of chronic noncommunicable diseases in the most cost-effective way,

- 1. ENDORSES the proposed framework for the integrated prevention and control of noncommunicable diseases, including the support of healthy lifestyles, the provision of public health services and the major involvement of health, nutrition and other relevant professions in improving the lifestyles and health of individuals and communities;
- 2. URGES Member States to collaborate with WHO in developing a global strategy for the prevention and control of noncommunicable diseases based on best practices and operational research, as part of their health sector reforms, in order:
 - (a) to promote health and reduce major common risk factors for chronic noncommunicable diseases through essential public health action and the integration of preventive measures within the functions of health services, and particularly in primary health care;
 - (b) to collate information and set standards in order to ensure appropriate case detection and management;

- (c) to monitor scientific data and support research in a broad spectrum of related areas, including human genetics, nutrition and diet, matters of particular concern to women, and development of human resources for health;
- (d) to exert a concerted effort against the use of tobacco, throughout the world and especially in order to protect the world's young people;

3. REQUESTS the Director-General:

- (1) to develop a global strategy for prevention and control of noncommunicable diseases within the framework of the renewed WHO health-for-all policy for the twenty-first century and, in consultation with Member States and the agencies and professional organizations concerned, to give priority to such activities to help Member States develop corresponding national policies and programmes;
- (2) to ensure, while developing the strategy, an effective managerial mechanism for collaboration and technical support involving all programmes concerned at different levels of the Organization, as well as WHO collaborating centres, emphasizing the development and strengthening of global and regional demonstration projects;
- (3) to solicit the support of nongovernmental organizations and other international agencies by creating a forum for the exchange of experience and results of research;
- (4) to encourage cooperation with the private sector, within the current guidelines of WHO, so as to mobilize extrabudgetary resources for the implementation of plans at the global and interregional level and to promote capacity-building at the national level;
- (5) to submit the proposed global strategy and a plan, with a timetable for its implementation, to the Executive Board and the Health Assembly in 1999.

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