Fourth report of Committee A

(Draft)

Committee A held its eighth meeting on 19 May 2001, under the chairmanship of Dr M. Fikri (United Arab Emirates), Professor S.K. Ongeri (Kenya) and Dr C. Otto (Palau).

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

13. Technical and health matters

13.4 Strengthening health services delivery

One resolution entitled:

– Strengthening nursing and midwifery

One resolution entitled:

– Strengthening health systems in developing countries

13.3 Communicable diseases

One resolution entitled:

– Global health security: epidemic alert and response
Agenda item 13.4

Strengthening nursing and midwifery

The Fifty-fourth World Health Assembly,

Having reviewed the report on strengthening nursing and midwifery;

Recalling resolutions WHA42.27, WHA45.5, WHA47.9, WHA48.8 and WHA49.1 which recommended action aimed at strengthening nursing and midwifery;

Recognizing the importance of accessible health systems in efforts to improve the health of populations as highlighted in *The world health report 2000;¹*

Recognizing the importance of using appropriate resources, including human resources, in the provision of health services;

Aware that nurses and midwives play a crucial and cost-effective role in reducing excess mortality, morbidity and disability and in promoting healthy lifestyles and concerned that further action is needed to maximize their contribution;

Concerned about global shortages of nurses and midwives;

Recognizing the importance of nursing services and midwifery services being the core of any health system and in national health;

Mindful of the continuing need to work with the full range of partners whose work impacts on the health of the population, on health promotion and on health care,

1. **URGES** Member States:

   (1) to further the development of their health systems and to pursue health sector reform by involving nurses and midwives in the framing, planning and implementation of health policy at all levels;

   (2) to review or develop and implement national action plans for health and models of education, legislation, regulation and practice for nurses and midwives, and to ensure that these adequately and appropriately reflect competencies and knowledge that enable nurses and midwives to meet the needs of the population they serve;

   (3) to establish comprehensive programmes for the development of human resources which support the training, recruitment and retention of a skilled and motivated nursing and midwifery workforce within health services;

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(4) to develop and implement policies and programmes which ensure healthy workplaces and quality of the work environment for nurses and midwives;

(5) to underpin the above measures through continuing assessment of nursing and midwifery needs and by developing, reviewing regularly, and implementing national action plans for nursing and midwifery, as an integral part of national health policy;

(6) to enhance the development of nursing and midwifery services that reduce risk factors and respond to health needs, on the basis of sound scientific and clinical evidence;

(7) to prepare plans for evaluating nursing services;

2. REQUESTS the Director-General:

(1) to provide support to Member States in setting up mechanisms for inquiry into the global shortage of nursing and midwifery personnel, including the impact of migration, and in developing human resources plans and programmes, including ethical international recruitment;

(2) to provide support to Member States in their efforts to strengthen the contribution of nurses and midwives to the health of the populations and to take the necessary measures to increase the number of WHO collaborating centres for nursing and midwifery in developing countries;

(3) to ensure the involvement of nursing and midwifery experts in the integrated planning of human resources for health, including to support Member States undertaking programmes of village skilled birth attendants, by developing guidelines and training modules, as an expanded role of nurses and in particular midwives;

(4) to continue to cooperate with governments to promote effective coordination between all agencies and organizations concerned with the development of nursing and midwifery;

(5) to provide continuing support for the work of the Global Advisory Group on Nursing and Midwifery, and to take account of the interest and contribution of nursing and midwifery in wider aspects of the development and implementation of WHO’s policy and programmes;

(6) to develop and implement systems and uniform performance indicators at country, regional and global levels to monitor, measure, and report progress in achieving these goals;

(7) to prepare rapidly a plan of action for the strengthening of nursing and midwifery and to provide for external evaluation at the conclusion thereof;

(8) to keep the Health Assembly informed of progress made in the implementation of this resolution, and to report to the Fifty-sixth World Health Assembly in 2003.
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Strengthening health systems in developing countries

The Fifty-fourth World Health Assembly,

Mindful of the principles of, and obvious need for, technical cooperation among developing countries and of the interest shown by the World 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, WHA50.27, WHA51.16 and WHA52.23 in strengthening this type of cooperation with a view to improving the health situation in 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 the respect for equal rights and the self-determination of peoples, which have been consistently reaffirmed by Members of the Non-Aligned Movement;

Recognizing that in order to realize aspirations and achieve the social development and well-being of people, it is a central responsibility of governments and all sectors of society to establish measures which would facilitate the attainment of goals relating to the eradication of poverty, and to food security, health, education, employment, housing and social integration;

Reaffirming the commitments made in this regard during the twenty-fourth special session of the United Nations General Assembly entitled “World Summit for Social Development and beyond: achieving social development for all in a globalizing world”;

Recognizing that the main determinants of ill health such as poverty and lack of education are also among the critical causes of underdevelopment, and that health is both a necessary precondition to, and an outcome of, the overall development process;

Further recognizing that the health needs of women, girls, children and older persons shall be given particular attention;

Mindful of the fact that globalization presents opportunities and challenges for all countries and that developing countries, especially the poorest, are vulnerable to those adverse effects of globalization that lead to greater inequities in health and health care both within such countries and between developed and developing countries;

Recalling that the lack of access to safe and affordable essential medicines and other health technologies is a significant factor in perpetuating and extending such inequities;

Noting with concern the need for funds for development cooperation in the face of growing demands within developing countries, and recognizing that debt-relief including HIPC and other efforts could potentially free up considerable resources for use in the development of health infrastructure and services;
Recognizing the progress that has been achieved in the areas of human genetics and biotechnology, and the potential rewards that could accrue from research in this area;

Noting with concern the increase in HIV/AIDS, tuberculosis and other diseases in developing countries, especially in sub-Saharan Africa;

Welcoming the prominence accorded to HIV/AIDS on the international agenda, and noting the adoption of a resolution on the access to care by the 57th Session of the Commission on Human Rights, the decision by the Abuja Summit on HIV/AIDS, tuberculosis and related diseases, the special discussion of the TRIPS Council of the WTO on the TRIPS Agreement and access to essential medicines to be held at the request of the Africa Group in June 2001 and the forthcoming United Nations General Assembly special session on HIV/AIDS;

Endorsing the recognition of mental health as a significant challenge requiring special attention within the health systems of developing countries;

Appreciating WHO’s initiatives with regard to the promotion of horizontal cooperation among developing countries,

1. REAFFIRMS its commitment to the objectives of the health-for-all strategy, in particular the achievement of equitable, affordable, accessible and sustainable health systems based on primary health care in all Member States;

2. RECOGNIZES the sovereign right of each country to adopt national policies appropriate to the specific needs of its people;

3. URGES Member States:

   (1) to reaffirm the importance of health as an indispensable resource for sustainable development and to advance such development through actions which promote and maintain equity and equality, including between men and women;

   (2) to continue to develop health systems in accordance with the principles listed above, and to ensure that where markets exist within the health sector, they function efficiently within a suitable framework of ethical principles and in accordance with the technical regulations and standards established by the governmental authority;

   (3) to participate in the special discussion of the WTO TRIPS Council on intellectual property issues relevant to the access to essential medicines, with a view to addressing the concerns expressed by developing countries;

   (4) to adopt, as a matter of priority, measures that will serve the needs of the most vulnerable of their populations;

   (5) to make every effort to ensure that countries are not hindered in their efforts to utilize the options available to them under international agreements, acceded to protect and advance the access to life-saving and essential medicines;
(6) to continue to support research in the area of human genetics and biotechnology subject to accepted scientific and ethical standards and to the potential benefit of all, especially the poor;

(7) to refrain from all measures, that are contrary to international law, including international conventions, and which hinder health service delivery and deny care to those in greatest need;

4. CALLS upon Member States, especially developed countries:

(1) to continue to facilitate the transfer of materials, equipment, technology and resources appropriate to the health needs of developing countries;

(2) to support technical cooperation with and among developing countries;

(3) to review, with a view to increasing, their allocation of resources intended for development cooperation and the fight against HIV/AIDS and other priority diseases;

5. REQUESTS the international community and multilateral institutions:

(1) to maintain a people-centred focus in their deliberations, particularly where measures proposed in such deliberations could directly or indirectly impact negatively on the health status of the most vulnerable;

(2) where appropriate, to integrate the health dimension into their programmes and strategies, particularly in respect of HIV/AIDS and other priority diseases;

(3) according to their mandate and particular expertise, to provide support for efforts aimed at strengthening the health systems of developing countries;

(4) to identify and implement development-oriented and durable solutions to the debt servicing problems of developing countries so as to alleviate external debt;

(5) to implement the conclusions of the United Nations summits and conferences that address health problems and to make further recommendations in this regard;

(6) to support the establishment of a global HIV/AIDS and health fund;

6. REQUESTS the Director-General:

(1) to continue to support Member States in their efforts to meet the health needs of their people, especially those who are most vulnerable;

(2) to cooperate with Member States in achieving access to safe and affordable essential medicines and other appropriate health technologies;

(3) to strengthen the capacity of the health sector to participate effectively in multisectoral efforts which seek to address the root causes of ill health;

(4) to continue to provide support for the work being undertaken by institutions in developing countries in the area of health sector reform, and to validate and collate the work of these and
other institutions, in order to ensure that future policies and advice are founded on the best available evidence;

(5) to expand on the opportunities for interaction with Members of the Non-Aligned Movement and other developing countries, aimed at facilitating and enhancing the work of WHO;

(6) to report to the Fifty-sixth World Health Assembly on the steps taken and progress made in implementing this resolution.
Agenda item 13.3

Global health security: epidemic alert and response

The Fifty-fourth World Health Assembly,

Recalling resolutions WHA48.7 on the International Health Regulations, WHA48.13 on new, emerging and re-emerging infectious diseases, and WHA51.17 on antimicrobial resistance;

Recalling that public health is a priority for development and that combating communicable diseases, which are a major burden in terms of human mortality and morbidity, provides important and immediate opportunities for progress;

Mindful of the globalization of trade and of the movement of people, animals, goods and food products, as well as the speed with which these take place;

Recognizing that, as a result, any upsurge in cases of infectious disease in a given country is potentially of concern for the international community,

1. EXPRESSES its support for:

   (1) ongoing work on the revision of the International Health Regulations, including criteria to define what constitutes a health emergency of international concern;

   (2) development of a global strategy for containment and, where possible, prevention of antimicrobial drug resistance;

   (3) collaboration between WHO and all potential technical partners in the area of epidemic alert and response, including relevant public sectors, intergovernmental organizations, nongovernmental organizations and the private sector;

2. URGES Member States:

   (1) to participate actively in the verification and validation of surveillance data and information concerning health emergencies of international concern, together with WHO and other technical partners;

   (2) to develop and update national preparation and response plans;

   (3) to develop training for the staff involved and the exchange of good practice between specialists in response to alerts;

   (4) to update regularly information on the resources available for the surveillance and control of infectious diseases;

   (5) to designate a focal point for the International Health Regulations;
3. REQUESTS the Director-General:

(1) to devise relevant international tools, and to provide technical support to Member States for developing or strengthening preparedness and response activities against risks posed by biological agents, as an integral part of their emergency management programmes;

(2) to provide technical support to Member States for developing intervention programmes that prevent epidemics and respond to communicable disease threats and emergencies, particularly with regard to epidemiological investigations, laboratory diagnoses and community and clinical management of cases;

(3) to make appropriate arrangements for the development of regional preparedness and response plans;

(4) to provide support to Member States for strengthening their capacity to detect and respond rapidly to communicable disease threats and emergencies, especially by developing the laboratory skills needed for diagnosis and providing training in epidemiological methods for use in the field, particularly in the most exposed countries;

(5) to make available relevant information on public health risks to Member States, relevant intergovernmental organizations and technical partners;

(6) to provide technical support to Member States in the implementation of national efforts to contain and prevent resistance to antimicrobials.