FIFTH REPORT OF COMMITTEE A

During the course of its twelfth and thirteenth meetings held on 18 May 1971, Committee A decided to recommend to the Twenty-fourth World Health Assembly the adoption of the following resolutions:

- Programme and Budget Estimates for 1972: Voluntary Fund for Health Promotion
- Programme and Budget Estimates for 1972: Special Account for Servicing Costs
- Smallpox Eradication
- Financial participation by Governments in the costs of implementation of WHO-assisted projects
- Problems of the Human Environment
- Health Consequences of Smoking
PROGRAMME AND BUDGET ESTIMATES FOR 1972:
VOLUNTARY FUND FOR HEALTH PROMOTION

The Twenty-fourth World Health Assembly,

Having considered the programmes planned to be financed in 1972 from the Voluntary Fund for Health Promotion, as shown in Annex 3 to Official Records No. 187,

1. NOTES that the programmes are complementary to the programmes included in the regular budget of the Organization;

2. NOTES further that the programmes conform to the general programme of work for the period 1967-1972\(^1\) and that the research programmes are in accordance with advice received by the Director-General from the Advisory Committee on Medical Research; and

3. REQUESTS the Director-General to implement the programmes planned for 1972 to the extent to which funds become available.

PROGRAMME AND BUDGET ESTIMATES FOR 1972:
SPECIAL ACCOUNT FOR SERVICING COSTS

The Twenty-fourth World Health Assembly,

Having considered the estimates included in Official Records No. 187, Annex 4, for personnel and other services to be financed from the Special Account for Servicing Costs, and the report of the Executive Board thereon; and

Recalling resolution EB37.R26 noting the establishment of the Special Account for Servicing Costs and its uses in accordance with the report submitted to the Board at its thirty-seventh session,\(^1\) which enables the Director-General, as needs arise, to use the funds at his discretion,

1. NOTES that the provision for the support services required for programmes to be carried out from sources other than the regular budget and the Technical Assistance component of the United Nations Development Programme will need to be adjusted to take account of the nature and scope of such programmes; and

2. RECOGNIZES that the Director-General is responsible for providing the support services to be financed from the Special Account for Servicing Costs essential for the effective implementation of the programmes to be carried out from sources other than the regular budget and the Technical Assistance component of the United Nations Development Programme.

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SMALLPOX ERADICATION

The Twenty-fourth World Health Assembly,

Having considered the Director-General's report on the Smallpox Eradication Programme; 1

Having noted that significant progress is being made in the eradication effort throughout the world to the extent that endemic smallpox is now present in less than 10 countries;

Believing that a renewed and intensified effort is now required in order to reach the objective of global eradication in the shortest possible period of time; and

Noting that improved reporting, as well as surveillance and containment measures have been of vital importance in the interruption of smallpox transmission;

1. REQUESTS all countries to give priority attention to the further improvement of case reporting and the immediate investigation and effective containment of all outbreaks of smallpox; and

2. URGES Member governments to provide the requisite additional assistance to those countries where the disease is still endemic to permit them to intensify current programmes;

3. REQUESTS the Director-General to report to the Twenty-fifth World Health Assembly on the development of the smallpox eradication programme.

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1 Document A24/A/12.
FINANCIAL PARTICIPATION BY GOVERNMENTS IN THE
COSTS OF IMPLEMENTATION OF WHO-ASSISTED PROJECTS

The Twenty-fourth World Health Assembly,

Recalling resolution WHA22,27,

Having reconsidered the usefulness of obtaining from governments information on their estimated contributions towards the implementation of WHO-assisted projects in their own countries and territories for inclusion in the annual proposed programme and budget estimates, and in the light of the observations on this matter of the Executive Board at its forty-seventh session;¹ and

Recognizing that many governments are unable to provide such information,

DECIDEDS to discontinue the practice of collecting and presenting in the budget document the information on the financial participation by Governments in the costs of implementation of WHO-assisted projects.

The Twenty-fourth World Health Assembly,

Recalling resolution WHA23.60 that requested the Director-General to develop and submit to the Twenty-fourth World Health Assembly a long-term programme for environmental health,

Taking into account the discussions at the forty-seventh session of the Executive Board on this subject, and the resultant resolution EB47.R30,

Having examined document A24/A/3 prepared in implementation of resolutions WHA23.60 and EB47.R30,

Emphasizing WHO's concern and responsibility with respect to adverse effects of the environment on human health, a problem which should be of central importance in the United Nations Conference on the Human Environment to be held in Stockholm in June 1972,

Taking note of the loss of life and health imposed on hundreds of millions of people by preventable diseases that originate in the environment in which they live,

Stressing the need for the World Health Organization to maintain and strengthen its leading constitutional role in securing the protection of human health from adverse environmental factors of the present as well as the future,

Noting that one major difficulty encountered by many Member States in their efforts to control pollution of the environment is the lack of internationally agreed qualitative and quantitative criteria and guides to be embodied in codes of practice for environmental quality that must be taken into account in measures for the protection of people's health,

Recognizing that such criteria, guides and codes of practice must be flexible according to local conditions and be subject to review and adjustment as scientific information accumulates,

Believing nonetheless that a degree of harmonization is needed in order to avoid discrepancies which may arise from decisions, bearing on similar conditions, that give too much weight to short-term economic factors and too little to considerations of health,

Believing further that agreement could be reached amongst experts on codes of practice which would include some provisional criteria and guides,

1. THANKS the Director-General, and endorses the report and proposals submitted for a long-term programme by WHO on the human environment, with particular emphasis on the following needs:

(a) to improve basic environmental health and sanitation in all countries, and notably developing countries, with special emphasis on the provision of adequate quantities of potable water and the sanitary disposal of wastes;

(b) to establish and to promote international agreement on criteria, guides and codes of practice with respect to known environmental influences on health, with particular emphasis on occupational exposure, and water, food, air and waste, and to obtain further information on levels and trends on these;

(c) to stimulate the development and co-ordination of epidemiological health surveillance by methods including environmental monitoring systems, in collaboration with other national and international efforts, in order to provide basic information on actual and suspected adverse effects on human health attributable to the environment;
(d) to extend the knowledge of effects of environmental factors on human health by collection and dissemination of information, stimulation, support and co-ordination of research, and assisting in the training of personnel;

2. Recommends to Member States that health considerations be a major concern of governments in preparing their contributions for the Conference on the Human Environment in Stockholm in 1972;

3. Requests the Director-General to

   (a) implement this programme as fully as possible within the regular programme of the Organization;

   (b) submit to the United Nations Conference on the Human Environment to be held in Stockholm in 1972 the programme capabilities of WHO in the field of the environment on the lines of Annex 9 of document A24/A/3 so that any funds made available as a result of the Conference and allocated to WHO would enable the Organization to carry out the work required;

   (c) report to the forty-ninth session of the Executive Board and to the Twenty-fifth World Health Assembly on progress achieved, and any further financial implications;

   (d) invite voluntary contributions from governments and other sources to accelerate the pace of effort and to extend the scope of activities now being limited by lack of sufficient funds, for example with respect to criteria and guides for air and water quality.
HEALTH CONSEQUENCES OF SMOKING

The Twenty-fourth World Health Assembly,

Having considered the report of the Director-General,¹

Recalling the resolutions on this subject adopted by the Twenty-third World Health Assembly,² the Executive Board, ³,⁴,⁵ and the respective Regional Committees;

Recognizing the relationship between smoking and the development of pulmonary and cardiac disease, including lung cancer, ischaemic heart disease, chronic bronchitis, and emphysema;

Believing that a sustained effort by health and education authorities and others is needed to reduce tobacco smoking and to prevent the extension of the habit, with special attention to young people and pregnant women;

1. THANKS the Director-General for his report;
2. ENDORSES the recommendations contained therein;
3. CALLS UPON all Member and Associate Member States to give all possible consideration to putting these recommendations into effect; and
4. REQUESTS the Director-General:
   (i) to continue to assemble information on the health effects of tobacco smoking and the action being taken by countries to reduce the habit;
   (ii) to place emphasis on the control and prevention of smoking as an integral part of operating programmes as and when feasible;
   (iii) to continue in co-operation with the United Nations, the specialized agencies and the appropriate non-governmental organizations to foster a greater awareness of the health hazards of smoking and to take whatever action is deemed necessary to reduce them, and particularly to draw the attention of the Food and Agriculture Organization to the necessity of undertaking a study on crop diversification in tobacco growing areas in view of the expected decrease in tobacco consumption;
   (iv) to stimulate the strengthening of health education activities, including the production, dissemination and exchange of educational materials to discourage the habit of smoking;
   (v) to produce a code of practice that can guide governments in the formulation of legislative action relevant to health consequences of smoking.

¹ Document A24/A/2.
⁵ Annexed to document A24/A/2.