



FIFTY-SIXTH WORLD HEALTH ASSEMBLY

WHA56.21

Agenda item 14.7

28 May 2003

Strategy for child and adolescent health and development

The Fifty-sixth World Health Assembly,

Having considered the report on the strategy for child and adolescent health and development;¹

Recognizing the right of children and adolescents to the highest attainable standard of health and access to health care as set forth in internationally agreed human rights instruments;

Recalling and recognizing the outcomes of the World Summit for Children (New York, 1990), the Declaration on the Elimination of Violence against Women (1993),² the International Conference on Population and Development (Cairo, 1994), the World Summit for Social Development (Copenhagen, 1995), the Fourth World Conference on Women (Beijing, 1995), the World Food Summit (Rome, 1996), the Millennium Summit (New York, 2000), the United Nations General Assembly special session on HIV/AIDS (2001), and the United Nations General Assembly special session on children (2002), their recommendations and respective follow-ups and reports;

Welcoming formulation of the Strategic directions for improving the health and development of children and adolescents;³

Concerned that the specific needs of neonates and adolescents have not been adequately addressed and that additional efforts will be needed to achieve international goals for maternal, child and adolescent health and development;

Recognizing that children and adolescents are the basic fundamental resources for human, social and economic development;

Further recognizing the right of children, including adolescents, to freedom of expression, and to having their views taken into account in all matters affecting them, in accordance with the age and maturity of the child;

¹ Document A56/15.

² United Nations General Assembly resolution 48/104.

³ Document WHO/FCH/CAH/02.21.

Also recognizing that parents, families, legal guardians and other caregivers have the primary role and responsibility for the well-being of children, and must be supported in the performance of their child-rearing responsibilities;

Mindful that interventions exist to meet the health needs of pregnant women, mothers, neonates, children and adolescents, and concerned that in developing countries these population groups have limited access to such interventions;

Acknowledging that the Convention on the Rights of the Child contains a comprehensive set of international legal standards for the protection and well-being of children, and also that it is an important framework for addressing child and adolescent health and development,

1. URGES Member States:

(1) to strengthen and expand efforts to meet international targets for the reduction of maternal and child mortality, and malnutrition;

(2) to make improvements in neonatal health, child survival and adolescent health and development a priority through advocacy at the highest level, scaling up programmes, increasing allocation of national resources, creating partnerships, and assuring sustained political commitment;

(3) to strive for full coverage of their maternal, neonate, child and adolescent populations with interventions known to be effective, especially interventions that help parents, other caregivers, families and communities to care for their young and that improve the quality of health services and health systems;

(4) to promote access by children and adolescents, parents, families, legal guardians, and other caregivers to a full range of information and services to promote child health and survival, development, including psychological development, protection and participation, recognizing that many children live without parental support and that special measures should be taken to support such children and to build and strengthen their own abilities;

2. REQUESTS the Director-General:

(1) to give the fullest possible support to achievement of the internationally agreed child-health and development goals;

(2) to continue to advocate a public-health approach to reduction of common diseases, including the simple and effective strategies of immunization, Integrated Management of Childhood Illnesses, improved maternal, adolescent and child nutrition, and supply of water and sanitation;

(3) to promote needed research, including on the determinants of behaviour, and to prepare guidelines and best practices for use by Member States in the full implementation of cost-effective approaches to achieving international goals for neonate, child and adolescent health;

(4) to maintain the Organization's commitment to, and support for, achieving and sustaining high levels of coverage with proven interventions, through efficient, integrated or combined delivery mechanisms;

- (5) to advocate higher priority for maternal and neonatal health and adolescent health and development;
- (6) to provide support for further research into determinants of adolescents' life styles and efficient interventions leading to better health for adolescents;
- (7) to report to the Fifty-ninth World Health Assembly in 2006, through the Executive Board, on WHO's contribution to implementation of the strategy for child and adolescent health and development, with particular emphasis on actions related to poverty reduction and the attainment of internationally agreed child-health and development goals.

Tenth plenary meeting, 28 May 2003
A56/VR/10

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