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RESOLUTIONS OF REGIONAL AND GENERAL INTEREST  
ADOPTED BY THE THIRTIETH WORLD HEALTH ASSEMBLY AND BY  
THE EXECUTIVE BOARD AT ITS FIFTY-NINTH AND SIXTIETH SESSIONS

CONTENTS

	<u>Page</u>
I OF REGIONAL INTEREST . . . . .	1
1. INTRODUCTION . . . . .	1
2. WORLD HEALTH ASSEMBLY . . . . .	1
WHA30.20 BIENNIAL PROGRAMME BUDGET - INTRODUCTION OF BIENNIAL BUDGET CYCLE . . . . .	1
WHA30.23 DEVELOPMENT OF PROGRAMME BUDGETING AND MANAGEMENT OF WHO'S RESOURCES AT COUNTRY LEVEL . . . . .	1
WHA30.26 COORDINATION WITHIN THE UNITED NATIONS SYSTEM HEALTH ASSISTANCE TO REFUGEES AND DISPLACED PERSONS IN CYPRUS . . . . .	3
WHA30.27 COORDINATION WITHIN THE UNITED NATIONS SYSTEM HEALTH AND MEDICAL ASSISTANCE TO LEBANON . . . . .	3
WHA30.35 ASSIGNMENT OF ETHIOPIA TO THE AFRICAN REGION . . . . .	4
WHA30.37 HEALTH ASSISTANCE TO REFUGEES AND DISPLACED PERSONS IN THE MIDDLE EAST . . . . .	4
WHA30.43 TECHNICAL COOPERATION . . . . .	6
WHA30.52 SMALLPOX ERADICATION . . . . .	6
3. EXECUTIVE BOARD . . . . .	8
3.1 <u>FIFTY-NINTH SESSION</u>	
EB59.R13 REVIEW OF THE PROPOSED PROGRAMME BUDGET FOR 1978 AND 1979 (FINANCIAL YEAR 1978) DEVELOPMENT OF THE ANTIMALARIA PROGRAMME . . . . .	8

	<u>Page</u>
3.2 <u>SIXTIETH SESSION</u>	
EB60.R4 TECHNICAL COOPERATION AMONG DEVELOPING COUNTRIES . . .	8
EB60.R5 VOLUNTARY FUND FOR HEALTH PROMOTION . . . . .	9
II OF GENERAL INTEREST . . . . .	10

## I RESOLUTIONS OF REGIONAL INTEREST

## 1. INTRODUCTION

The Regional Director has the honour to bring to the attention of the Regional Committee the following resolutions which were adopted by the Thirtieth World Health Assembly and by the Executive Board during its Fifty-ninth and Sixtieth Sessions.

## 2. WORLD HEALTH ASSEMBLY

BIENNIAL PROGRAMME BUDGET - INTRODUCTION OF BIENNIAL BUDGET CYCLE, WHA 30.20

The Thirtieth World Health Assembly,

Having considered the report of the Director-General on the introduction of a biennial budget cycle as well as the recommendation of the Executive Board in resolution EB51.R51 that a programme and budget for a biennial period be introduced as soon as possible;

Noting that the necessary enabling amendments of Articles 34 and 55 of the Constitution, which were adopted by the Twenty-sixth World Health Assembly in resolution WHA26.37, came into force on 3 February 1977 upon acceptance by two-thirds of the Member States;

Confirming the desirability of introducing biennial budgeting as an integral part of biennial programming in WHO;

Considering that the first biennium for which biennial budgeting could become effective is the 1980-1981 biennium, until which time the transitional measures introduced in resolution WHA26.38 should remain in force;

1. DECIDES that the programme budget of WHO shall cover a two-year period beginning with the biennium 1980-1981 and shall be reviewed and approved by the Health Assembly on a two-year basis;
2. DECIDES that all prior resolutions and decisions of the Health Assembly shall be construed as conforming to this resolution.

DEVELOPMENT OF PROGRAMME BUDGETING AND MANAGEMENT OF WHO'S RESOURCES  
AT COUNTRY LEVEL, WHA 30.23

The Thirtieth World Health Assembly,

Recalling resolution WHA25.23, which adopted for WHO a form of programme budget presentation based on the principles of a programme-oriented approach to planning, budgeting and management;

Recognizing the desirability of extending the principles of such programme budgeting to the planning, development and presentation of technical cooperation programmes with governments and to the management of WHO's resources at country level;

Emphasizing the need for close collaboration between WHO and Member States in the development of well-defined country health programmes within which individual projects and activities can subsequently be planned in detail and implemented in relation to overall programme objectives and in close harmony with national health programme processes;

Recognizing the importance of effective planning, implementation, reporting, accounting and evaluation of individual projects which form the basis of programmes of the World Health Organization in accordance with the principles of programme budgeting;

Realizing also the problems of preparing in advance an accurate and realistic list of projects supported by the Organization during the biennial budget cycle, by the time that programme budget is approved;

Having considered the report of the Director-General on development of programme budgeting and management of WHO's resources at country level, along with the relevant resolutions of the regional committees, and the recommendations of the Executive Board thereon;

1. ADOPTS the programme budgeting procedures and the form of budget presentation outlined in the report, whereby:

- (1) in the early stages of the programme budget process, WHO and national authorities will collaborate in identifying and developing priority programmes for cooperation, directed towards attaining national health goals defined in country health programmes, and expressed in terms of a general programme rather than in the form of individual projects or detailed activities;
- (2) technical cooperation programme proposals will be presented in regional programme budgets in the form of narrative country programme statements, supported by budgetary tables in which the country planning figures are broken down by programme so as to facilitate a programme-oriented review by the respective regional committees; this information on country programmes will no longer be republished as an information annex to the Director-General's proposed programme budget, provided that such regional material is available to delegates to the Health Assembly and members of the Board in connexion with review and approval of the WHO programme budget;
- (3) detailed plans of operation or work, and budgetary estimates for individual projects and activities planned within defined health programmes, will be developed at a later stage, closer to and as a part of programme implementation at country level;
- (4) adequate information on the implementation and completion of programmes and projects as well as information on their progress, efficiency, and effectiveness, will be made available to the delegates to the Health Assembly and members of the Executive Board in the context of the evaluation system under incremental development in WHO;

2. REQUESTS the Director-General to put the new programme budgeting procedure into effect for the forthcoming programme budget cycle, and to introduce the corresponding form of budget presentation in the proposed programme budget for 1980 and 1981.

COORDINATION WITHIN THE UNITED NATIONS SYSTEM

HEALTH ASSISTANCE TO REFUGEES AND DISPLACED PERSONS IN CYPRUS, WHA30.26

The Thirtieth World Health Assembly,

Mindful of the principle that the health of all peoples is fundamental to the attainment of peace and security;

Recalling resolutions WHA28.47 and WHA29.44;

Noting all relevant United Nations General Assembly and Security Council resolutions on Cyprus;

Considering that the continuing health problems of the refugees and displaced persons in Cyprus call for further assistance;

1. NOTES with satisfaction the information provided by the Director-General on health assistance to refugees and displaced persons in Cyprus;
2. EXPRESSES its appreciation for all the efforts of the Coordinator of the United Nations Humanitarian Assistance in Cyprus to obtain the funds necessary for the Organization's action to meet the health needs of the population of Cyprus;
3. REQUESTS the Director-General to continue and intensify health assistance to refugees and displaced persons in Cyprus in addition to any assistance made available within the framework of the efforts of the Coordinator of the United Nations Humanitarian Assistance in Cyprus and to report to the Thirty-first World Health Assembly on such assistance.

COORDINATION WITHIN THE UNITED NATIONS SYSTEM

HEALTH AND MEDICAL ASSISTANCE TO LEBANON, WHA30.27

The Thirtieth World Health Assembly,

Mindful of the principle that the health of all peoples is fundamental to the attainment of peace and security;

Recalling resolution WHA29.40;

Having regard to the aftermath of the tragedy in Lebanon, with its thousands of injured, crippled and handicapped persons and the serious damage suffered by health and medical establishments and facilities in town and country;

1. NOTES with satisfaction the information supplied by the Director-General regarding the health and medical assistance which has already been provided to the categories of the victims mentioned above;

2. EXPRESSES its gratitude to the Secretary-General of the United Nations and the Member States that have responded generously to his appeal, thus helping to alleviate the distressing consequences of the conflict in Lebanon;
3. THANKS the International Committee of the Red Cross, the UNHCR and UNICEF for the help they have given WHO in fulfilling its responsibilities for the provision of Lebanon with health and medical assistance; and
4. REQUESTS the Director-General to continue and intensify the Organization's health and medical assistance to Lebanon, allocating for this purpose, and to the extent possible, funds from the regular budget and other WHO financial resources, in addition to any sums received from the United Nations Trust Fund for Lebanon, and to report to the Thirty-first World Health Assembly on such assistance.

ASSIGNMENT OF ETHIOPIA TO THE AFRICAN REGION, WHA30.35

The Thirtieth World Health Assembly,

Having considered the request from the Government of Ethiopia for the inclusion of that country in the African Region,

RESOLVES that Ethiopia shall form part of the African Region.

HEALTH ASSISTANCE TO REFUGEES AND DISPLACED PERSONS IN THE MIDDLE EAST, WHA30.37

The Thirtieth World Health Assembly,

Recalling resolution WHA29.69 and the previous resolutions of the World Health Assembly concerning the health conditions of refugees and displaced persons on the one hand, and on the other hand the relevant resolutions adopted by the General Assembly of the United Nations and the Commission on Human Rights;

Taking note of the report of the Director-General on "Health assistance to refugees and displaced persons in the Middle East", concerning the assistance provided to the Palestinian population;<sup>1</sup>

Having examined the report of the Special Committee of Experts set up to study the health conditions of the inhabitants of the occupied territories in the Middle East, and noted that the Special Committee of Experts has not, up till now, been able to carry out its mandate owing to the refusal of the occupying authorities to grant it permission to visit the occupied Arab territories;

Convinced that the occupation of territories by force gravely affects the physical, mental and social health conditions of the population under occupation, and that this can be rectified only by the cessation of such occupation;

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<sup>1</sup>Document A30/27

Bearing in mind, that the liberation of all peoples is fundamental to the attainment of a just peace;

Deeply concerned at the forms of pressure practised by the occupying authorities, such as the eviction and deportation of medical and auxiliary staff from the occupied territories, with resulting deterioration of health conditions and services within the occupied territories;

Deeply concerned at the continuation in the occupied Arab territories of Israeli practices such as:

- (a) the eviction and deportation of Arab populations and the resettlement in their homes of non-Arab inhabitants;
- (b) the destruction and demolition of Arab houses and the confiscation and expropriation of Arab lands and properties;
- (c) detention and ill-treatment of persons, resulting in numerous deaths;

Considering that proper adherence to the mandate conferred on the Special Committee of Experts by the World Health Assembly is essential for the implementation of the Committee's mission;

1. DENOUNCES the procrastination and obstinacy of the Israeli occupying authorities and their obstruction of the mission of the Special Committee of Experts, and considers unacceptable all the excuses to which the authorities have resorted for refusing to grant the Committee permission to visit the occupied Arab territories;
2. CONSIDERS that the data which the Israeli occupying authorities have submitted to the Committee concerning the health conditions of the Arab population in the occupied Arab territories, without permitting the Committee to visit those territories, are inconsistent with resolution WHA26.56 and hence irrelevant;
3. CONDEMNNS Israel for ignoring the previous resolutions adopted by the World Health Assembly;
4. DEMANDS that the Israeli occupying authorities permit the Special Committee of Experts as such to visit all the occupied Arab territories and guarantee the Special Committee freedom of movement so that it can directly contact the Arab population under Israeli occupation, Arab institutions and specific target groups within the population, and in the event of failure on the part of Israel to comply with the Assembly's request, that consideration be given by Member States to appropriate action to be taken under the Constitution of the World Health Organization, after a report has been presented by the Director-General;
5. REQUESTS the Special Committee of Experts to carry out its mandate as set forth in section B of resolution WHA26.56, and to take into consideration the deteriorating health conditions of the detainees which are resulting in many deaths, bearing also in mind the resolution of the thirty-third session of the Commission on Human Rights;
6. NOTES with appreciation the role played by the Director-General in implementing resolution WHA29.69, and requests him to continue collaborating with the Palestine Liberation Organization in providing technical and material assistance to raise the level of health of the Palestinian population;

7. REQUESTS the Director-General to continue to allocate the necessary funds for the improvement of the health conditions of the population in the occupied Arab territories and to ensure that such funds are used under the direct supervision of WHO through its representative in the occupied Arab territories;
8. REQUESTS the Director-General to report to the Thirty-first World Health Assembly on the execution of the mandate of the Special Committee of Experts;
9. DECIDES that the title of the relevant item be amended to read "Health conditions of the Arab population in the occupied Arab territories including Palestine" in the provisional agenda for the Thirty-first World Health Assembly.

TECHNICAL COOPERATION, WHA30.43

The Thirtieth World Health Assembly,

Faced with the magnitude of health problems and the inadequate and intolerably inequitable distribution of health resources throughout the world today;

Considering that health is a basic human right and a world-wide social goal, and that it is essential to the satisfaction of basic human needs and the quality of life;

Reaffirming that the ultimate constitutional objective of the World Health Organization is the attainment by all peoples of the highest possible level of health; and

Recalling resolutions WHA28.75, WHA28.76 and WHA29.48 on the principles governing technical cooperation with developing countries;

1. DECIDES that the main social target of governments and 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;
2. CALLS UPON all countries urgently to collaborate in the achievement of this goal through the development of corresponding health policies and programmes at the national, regional and inter-regional level and the generation, mobilization and transfer of resources for health, so that they become more equitably distributed particularly among developing countries; and
3. REQUESTS the Executive Board and the Director-General to pursue the re-orientation of the work of WHO for the development of technical cooperation and transfer of resources for health in accordance with one of the Organization's most important functions as the directing and coordinating authority in international health work.

SMALLPOX ERADICATION, WHA30.52

The Thirtieth World Health Assembly,

Having considered the Director-General's report on the smallpox eradication programme;<sup>1</sup>

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<sup>1</sup> Document A30/12



Recognizing that, while smallpox is now reported from only a single country in north-eastern Africa, continuing smallpox transmission in that area represents a considerable danger for adjacent countries owing to nomadic population movements;

Stressing the importance of establishing data in respect of previously endemic areas, for review by an independent group of experts, in order to document the absence of smallpox transmission for a period of two years or more;

Noting that 18 laboratories are currently registered as retaining stocks of variola virus or specimens from smallpox cases;

Noting also that the Organization's vaccine reserves for use in an unforeseen emergency are not yet at a level sufficient to permit the vaccination of 200-300 million persons as envisaged in resolution WHA29.54;

1. CONGRATULATES Afghanistan, Bhutan, India, Nepal and Pakistan, where smallpox eradication has been certified during the last six months;
2. REQUESTS governments and laboratories to continue to cooperate in preparing the international register of laboratories retaining stocks of variola virus or specimens from smallpox cases, and to ensure that, in accordance with the recommendation of the Committee on International Surveillance of Communicable Diseases endorsed by the Executive Board in resolution EB59.R28, these stocks and specimens be retained only by WHO collaborating centres under conditions ensuring maximum safety;
3. REQUESTS all Member States to continue to give financial support to the smallpox eradication programme, either through the Special Account for Smallpox Eradication of the Voluntary Fund for Health Promotion or on a bilateral basis, in order that the last known smallpox foci can be eliminated as rapidly as possible;
4. REQUESTS all Member States to consider their vaccination programme and requirements and whether any unnecessary vaccination requirements can be reduced;
5. URGES all governments to make full use of the expertise of international and national personnel with experience in smallpox surveillance and in containment measures as may be required effectively to interrupt transmission of the disease and to prepare for independent assessment in those countries where the eradication of smallpox has not yet been certified;
6. INVITES Member States to continue to donate smallpox vaccine to the Voluntary Fund for Health Promotion until reserves sufficient to vaccinate 200-300 million persons have been built up;
7. REQUESTS the Director-General to report to the Thirty-first World Health Assembly on the progress made in this programme during the next 12 months.

3. EXECUTIVE BOARD

3.1 FIFTY-NINTH SESSION

REVIEW OF THE PROPOSED PROGRAMME BUDGET FOR 1978 AND 1979 (FINANCIAL YEAR 1978)  
DEVELOPMENT OF THE ANTIMALARIA PROGRAMME, EB59.R13

The Executive Board,

Being aware of the rapidly deteriorating situation with regard to malaria, and the lack of material, financial and technical resources to cope with this most serious health problem;

1. REQUESTS the Director-General:

(1) To assert the leading role of the World Health Organization in promoting and coordinating the global antimalarial efforts through:

(a) Intensifying the drive to increase the financial resources available to country programmes from bilateral and multilateral sources.

(b) Enhancing and strengthening training activities in practical malariology in order to develop the required expertise.

(c) Providing sustained technical guidance on the organization and structure of antimalaria programmes that can deal with the problem within the socio-economic and epidemiological set-up in individual countries and on the methodology to be adopted in various situations.

(2) To keep the World Health Assembly and the Executive Board fully informed about the world malaria situation, and the development of the global anti-malaria programme.

2. URGES governments of countries where malaria constitutes a major public health problem to take a firm decision to pursue with determination antimalaria activities based on a realistic assessment of the situation and to give the highest appropriate national priority to these activities on a continuing basis.

3.2 SIXTIETH SESSION

TECHNICAL COOPERATION AMONG DEVELOPING COUNTRIES, EB60.R4

The Executive Board,

Having considered the report on technical cooperation among developing countries (TCDC)<sup>1</sup> submitted by the Director-General in accordance with resolution EB59.R52;

Noting with satisfaction the action taken by WHO to collaborate with UNDP and other organs in furthering the concept of TCDC in compliance with the resolutions of the United Nations General Assembly and the Economic and Social Council and with resolution WHA29.41;

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<sup>1</sup> Document EB60/7

Recalling resolutions WHA28.75, WHA28.76, WHA29.48 and WHA30.43 on the principles governing technical cooperation with developing countries;

Welcoming the progress already made by developing countries in achieving self-reliance in health matters through cooperation for health development in the spirit of resolution EB57.R50;

Reiterating the importance for WHO to establish adequate methods and arrangements to facilitate cooperation among developing countries for the attainment by all their citizens by the year 2000 of a level of health that will permit them to lead a socially and economically productive life;

1. NOTES with satisfaction the report of the Director-General and the action already taken to promote TCDC in WHO;
2. ENDORSES the proposals contained in this report for future action by WHO to promote and implement TCDC;
3. REQUESTS the Director-General to promote the implementation of these proposals in WHO's activities and programmes in the light of the discussion on them in the Board and to ensure that they are brought to the attention of the Regional Committees at their next sessions;
4. REQUESTS the Regional Committees to study these proposals and to examine further ways of promoting TCDC for health development as appropriate to the region;
5. RECOMMENDS active WHO participation in the preparatory activities for and in the deliberations of the World Conference on TCDC being organized by the United Nations in Buenos Aires in 1978;
6. URGES all Member States and particularly governments of the developing countries to give priority attention to TCDC principles and approaches in their health and related programmes, making use, as necessary, of the support of the Organization in its coordinating role in furthering technical cooperation among the developing countries; and
7. INVITES all Member States to participate actively in the Technical Discussions on technical cooperation in the field of health among developing countries to be held at the Thirty-second World Health Assembly.

VOLUNTARY FUND FOR HEALTH PROMOTION, EB60.R5

The Executive Board,

Having considered the report of the Director-General on the Voluntary Fund for Health Promotion;<sup>1</sup>

Recognizing the importance of extrabudgetary resources for WHO's work and the provision of assistance to the developing countries;

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<sup>1</sup>Document EB60/9

Appreciating the role which the Voluntary Fund for Health Promotion is playing in the promotion of health activities;

1. NOTES with appreciation the contributions made to the Voluntary Fund for Health Promotion, for which the Director-General has already expressed the thanks of the Organization to the donors;
2. URGES all Members in a position to do so to contribute to the Voluntary Fund for Health Promotion;
3. CALLS particular attention to the recently established Special Account for Research and Training in Tropical Diseases and expresses the hope that substantial contributions will be forthcoming; and,
4. REQUESTS the Director-General to transmit this resolution, together with the report that he has submitted to the Executive Board, to the Members of the Organization, calling particular attention to the Executive Board's expression of appreciation of the contributions made.

## II RESOLUTIONS OF GENERAL INTEREST

The attention of the delegations is also drawn to some other resolutions which are of general importance in our health programme:

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| WHA30.17 | Future Organizational Study by the Executive Board   |
| WHA30.42 | Special Programme for Research and Training in Tropical Diseases                               |
| WHA30.53 | Expanded Programme on Immunization   |
| WHA30.54 | Regional Production of Vaccines for Expanded Programme on Immunization                         |
| EB59.R12 | Development and Coordination of Biomedical and Health Services Research                        |
| EB59.R27 | Review of the Sixth General Programme of Work covering a Specific Period (1978-1983 inclusive) |
| EB59.R28 | Smallpox Eradication   |