



REGIONAL COMMITTEE

SEA/RC34/8

Thirty-fourth Session

10 July 1981

Provisional Agenda item 13

STRATEGIES FOR HEALTH FOR ALL BY THE YEAR 2000

PROGRESS REPORT

REGIONAL COMMITTEE DOCUMENT

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1 INTRODUCTION

In pursuance of the worldwide goal of health for all by the year 2000, initiated by the World Health Assembly by its resolution WHA30.43, Member States in this region, following a globally agreed timetable, formulated their strategies for the attainment of this objective. In support of these national strategies, WHO, through the collectivity of its Member States - both regionally and globally, evolved regional and global strategies in consonance with the national strategies. In this region, intensive preparatory activities, both at the national and at the regional level, preceded the formulation of these strategies. Thus, a regional meeting with high-level representation of health and related sectors of Member States discussed the concepts and connotations of health for all by the year 2000 (HFA/2000), with primary health care as the key approach. Existing and proposed national and regional mechanisms for the development of appropriate national policies and specific critical issues related to health development were discussed. This meeting was followed in June 1980, again after intensive national preparatory activities, by another high-level regional consultation meeting, which reviewed the preliminary national strategies and formulated regional action in support of these strategies. In September 1980, at its thirty-third session, the Regional Committee examined the national and proposed regional strategies (resolution SEA/RC33/R4) and urged the Member States to develop plans of action, to take further steps to update and revise their strategies periodically and to set up appropriate mechanisms at the national level to monitor and evaluate the implementation. A document, "Strategies for Health for All by the Year 2000 - Regional and National Strategies, December 1980", delineated a strategic framework besides enumerating the strategies endorsed by the Regional Committee.

2 FURTHER DEVELOPMENTS

The regional strategies were primarily derived from the Organization's perception of the collective efforts required to support action at country level as well as from a synthesis of the basic approaches and strategies adopted by the Member States. Within the framework of the timetable referred to above, they provide material for the preparation of detailed plans of action for implementing the strategies through action programmes. They cover the entire spectrum of health development, including policies and plans, technical and administrative support measures, key programme areas and mobilization of manpower, social and financial resources, research promotion, development of appropriate technologies, and information systems. Their basic thrust is towards securing intra-sectoral and inter-sectoral coordination as well as developing monitoring and evaluation mechanisms for implementation. On a regional basis, they provide for an exchange of relevant information and experience in different countries and of approaches for collective action, in the spirit of technical cooperation among developing countries. In response to these developments, the Organization has, in this region, attempted to reorient its entire collaborative programme to support the national strategies for HFA/2000. This will be a continuous

process. At the same time, following the initiative of the Director-General, WHO has been proceeding with a structure study in the light of its functions in order to improve coordination, operational efficiency and integrated functioning at all levels and to respond appropriately to the challenges of HFA/2000.

One of the significant efforts in South-East Asia has been the development of research strategies to support HFA/2000 activities. A group of scientists from Member States in this region worked out a strategic framework for mission-oriented research, in consonance with HFA/2000, for consideration by the South-East Asia Advisory Committee on Medical Research, which endorsed this framework for reorientation of research priorities.

Steps have also been taken towards creating a better climate for the mobilization of external resources for health development. In this context, it may be noted that the Director-General has been endeavouring to set up a global Health Resources Group in an attempt to develop appropriate mechanisms for attracting and coordinating an increased volume of bilateral and multilateral aid for health purposes. This is an informal mechanism to help WHO mobilize and rationalize resources for health in accordance with the international health policies determined by the World Health Assembly. This group will focus its efforts on ensuring that a greater percentage of development resources is effectively spent in the health sector. As a preliminary step, a steering committee has been set up. As a part of these activities, in this region, a mission recently undertook a review of resource utilization in one country, with a view to eliciting information for the planning and development of further activities of the Resource Group. This study and other similar ones in the Region are of significance not only for enhancing the financing of health resources for health development but also for the productive use of resources in priority areas in the implementation of strategies for HFA/2000.

3 GLOBAL STRATEGY FOR HFA/2000

Concurrent with these developments, the WHO Executive Board produced a document entitled "Global Strategy for Health for All by the Year 2000" (EB67/13, December 1980) from the point of view of a global perspective for collective support actions. This document took into account the basic approaches which had been adopted in the national and regional strategies formulated in all the countries and regions. The historic resolution of the United Nations General Assembly (34/58, November 1979), which declared health to be an integral part of development and which urged relevant bodies of the United Nations system and their Member States to support the recommendations of the Alma-Ata Conference and the health-for-all movement initiated by the World Health Assembly, provided the proper climate for the global strategy. The global strategy was aimed primarily at supporting worldwide health systems based on the primary health care approach for accelerating the pace of health development, especially for the unserved and under-served populations.

The global strategy provided for measures to be taken by individuals and families in their homes and by communities, as well as by health services and other related sectors at the primary and supportive levels, in a coordinated manner. It defines quantifiable global targets which could be achieved globally by the year 2000 on the basis of attainment of the specific appropriate national and regional targets set.

The Thirty-fourth World Health Assembly, in May 1981, resolved to adopt a global strategy considering it to be an invaluable basis for attaining the goals of HFA/2000 through concerted action of Member States, people and WHO (WHA34.36). It pledged WHO's total commitment to the fulfilment of its part in this solemn partnership of health development. It also decided to monitor the progress and periodically to evaluate the effectiveness of this strategy. It invited Member States to strengthen and implement their own strategies and requested the Executive Board to prepare a plan of action.

4 DEVELOPMENTS AT COUNTRY LEVEL

Even within the short span of time since the last session of the Regional Committee, there have been many significant developments at country level in this region. They include vigorous efforts in preparing inter-sectoral perspective plans, restructuring the health service systems, reorientating current and forthcoming medium-term plans, further strengthening key elements of primary health care programmes, decentralizing planning, efforts to secure community involvement and attention towards improving information systems. A summary of important developments in different countries of the Region is given in an information document on the subject (SEA/RC34/9).

5 PLAN OF ACTION

The stage is now set for evolving appropriate plans of action at all levels to implement the strategies formulated. To facilitate this process, a plan of action approved by the Executive Board (SEA/RC34/10, containing EB68/5 Rev.2) is presented for separate consideration by the Regional Committee, under this same item of the agenda. The deliberations of the Committee on this subject will be useful for the sixty-ninth session of the Executive Board, scheduled to be held in January 1982, and to the Thirty-fifth World Health Assembly, as a feedback from the regions.

Member States, individually as well as collectively, have shown their earnest commitment to the worldwide movement of HFA/2000. The numerous significant developments since Alma-Ata, including the adoption, in this region, of a Charter for Health Development, are eloquent manifestations of this commitment. Systematic planning and improvement of managerial capability to implement, evaluate and monitor the progress of HFA/2000 activities will be crucially needed for the successful translation of this commitment of Member States into effective action programmes for attaining the avowed objective.