

PART IV

DISCUSSION ON OTHER MATTERS1 Consideration of Resolutions of Regional Interest Adopted by the World Health Assembly and the Executive Board

Fifteen resolutions of regional interest adopted by the Thirty-fourth World Health Assembly, and one by the sixty-seventh session of the Executive Board, were brought to the attention of the Regional Committee.

The following resolutions were considered along with the relevant sections of the Regional Director's Annual Report for 1980-81:

- (1) Amendment of the International Health Regulations (1969) (WHA34.13).
- (2) Organizational Study on the Role of WHO in Training in Public Health and Health Programme Management, including the Use of Country Health Programming (WHA34.14).
- (3) Recruitment of International Staff in WHO (WHA34.15).
- (4) Collaboration with the United Nations System - International Year of Disabled Persons, 1981: WHO's Cooperative Activities within the United Nations System for Disability Prevention and Rehabilitation (WHA34.30).

The following resolutions were considered while discussing appropriate items of the agenda:

- (1) International Code of Marketing of Breastmilk Substitutes (WHA34.22).
- (2) Nutritional Value and Safety of Products Specially Intended for Infant and Young Child Feeding (WHA34.23).
- (3) Periodicity and Duration of Health Assemblies: Periodicity of Health Assemblies (WHA34.28).
- (4) Method of Work and Duration of Health Assemblies (WHA34.29).
- (5) Global Strategy for Health for All by the Year 2000 (WHA34.37).
- (6) Resources for Strategies for Health for All by the Year 2000 (WHA34.36).
- (7) Health for All by the Year 2000 - the Contribution of Health to Socio-Economic Development and Peace - Implementation of Resolution 34/58 of the United Nations General Assembly and of Resolutions WHA32.24 and WHA33.24 (WHA34.38).
- (8) International Drinking Water Supply and Sanitation (IDWSS) Decade (WHA34.25).

The Committee's observations on three others, which were taken up separately for consideration, were as follows:

- (1) Reimbursement of Travel Costs of Representatives to Regional Committees (WHA34.4).

The Committee felt that, after an appropriate lapse of time, the matter of reimbursement of travel costs of representatives to sessions of the Regional Committee should be taken up at a future session.

- (2) The Meaning of WHO's International Health Work through Coordination and Technical Cooperation (WHA34.24).

The Committee noted that WHO's coordination with other United Nations, bilateral and multilateral agencies was being strengthened in the Region.

- (3) Implementation of Recommendations of the Organizational Study on "The Role of WHO Expert Advisory Panels and Committees and Collaborating Centres in Meeting the Needs of WHO Regarding Expert Advice and in Carrying Out Technical Activities of WHO" (EB67.R15).

The Committee noted that suitable study groups would be set up by the Regional Director to deal with special matters, including that of WHO collaborating centres in the Region.

2 Technical Discussions

During the thirty-fourth session of the Regional Committee, technical discussions were held on the subject of "Role of Ministries of Health as Directing and Coordinating Authority on National Health Work" (document SEA/RC34/16). Major problems and some of the more significant issues were discussed in detail, and a report was prepared (Annex 4) outlining some recommendations along with related actions which could be taken in countries and by WHO. The Regional Committee noted the report of the technical discussions, some of the recommendations in which were the following:

- (1) The planning divisions of ministries of health should be reorganized to include multidisciplinary technical capabilities to deal with health and health-related sector planning.
- (2) Effective linkages should be established between planning at the central level and the successive levels to secure meaningful involvement of the plan implementors and coordinated planning.
- (3) Mechanisms and methods for continuous monitoring and evaluation of on-going plans and programmes need to be improved so that reliable and timely information is used for their efficient implementation and for measuring their relevance and effectiveness.
- (4) Existing administrative and financial procedures should be reviewed with an eye to decentralization and closer involvement of health managers, the communities and private organizations in the management of health development.

- (5) Ministries of health should identify, estimate and make reliable projections of supportive actions required from the health-related sectors, e.g., water and sanitation, with the help of technical working groups set up for the health-related sectors either within the ministries or, better still, in the national planning commissions/organizations.
- (6) Subject to the organizational pattern and practice in countries, standing intersectoral coordination committees should also be set up in the planning commissions/organizations.
- (7) The work of the existing coordinating bodies, e.g., national health councils, national health development committees or equivalent bodies, should be reviewed from time to time as to their efficacy, particularly to ensure that the policy and directives for coordination are, in fact, implemented at the various operational levels.
- (8) Member countries of the Region should increase technical cooperation among themselves and with WHO, in support of national and inter-country efforts. Because of the paucity of technical expertise, it was felt that WHO should formulate suitable inter-country programmes of technical cooperation with the object of eventually attaining national and regional self-reliance.

3 Strategies for Health for All by the Year 2000

Attention was drawn to (a) the draft Plan of Action to implement the Global Strategy prepared by the Executive Board which would be submitted to the Thirty-fifth World Health Assembly in the light of observations by the regional committees, (b) a progress report, and (c) the regional draft plan of action.

The progress reported by Member countries in the implementation of national strategies, with the establishment of high-level national councils and committees for coordinated implementation of strategies, and the specific objectives and targets that had been included in country-wide health programmes were noted with satisfaction.

Although there was increasing evidence of intersectoral coordination within the countries, which were keeping the national strategies under constant review, the national plans of action to implement the strategies with internal and international support required to be vigorously pursued.

The Committee noted the problems being faced with regard to trained and motivated health manpower and to the organization of health systems and other material resources, and it was felt that, while concerted efforts to reduce or resolve the problems were already being made, support from WHO and mutual cooperation among countries would also be necessary.

The Regional Director assured the Committee that the regional strategies and actions would be updated on the basis of feedback from the countries

and that progress would be reported annually to the Committee. Although he agreed that external resources would be required in some countries to implement the strategy and strengthen the health infrastructure, the main efforts and initiative to mobilize and coordinate such resources remained with the countries themselves, and WHO would cooperate in such efforts, as necessary.

A resolution on this subject was adopted (SEA/RC34/R4).

4 Progress Report on the Seventh General Programme of Work

The Committee noted with satisfaction the shift towards full support of various elements of primary health care but thought that the family planning programme should have been included in this component. A suggestion was also made for the collection and dissemination of information on the progress made so far in the Sixth General Programme to become a benchmark for assessing future progress and efforts to be made through the Seventh General Programme.

It was also observed that, in any future review, a clarification on, and specification of, the linkages and priorities among the programmes on the health system infrastructure and health science and technology would be helpful.

The Committee stressed the need for ensuring that the programme was relevant to the particular needs and priorities of countries in this region. A resolution (SEA/RC34/R7) on the subject of the Seventh General Programme of Work was adopted.

5 WHO's Structures in the Light of Its Functions

The Committee noted with satisfaction the progress of the study as reported by the Regional Director (SEA/RC34/7), particularly the recommendations that the level of country operations should be increased and that more comprehensive information be provided to the Regional Committee for reviewing programme planning and programme performance. Two of the main comments made by the Committee were:

- (1) The progress of the study and implementation of its results should be reported to the Regional Committee (to this end, the Committee adopted resolution SEA/RC34/R6).
- (2) The importance of country-level operations in WHO needed further emphasis and there was a need to strengthen these country operations, including strengthening of the role of the WHO Programme Coordinators.

In considering the role of the Regional Committee in the organization and overall functioning of WHO, the Regional Committee discussed the means by which the nominees of the Committee to the Joint Coordinating Board/ WHO/UNDP/World Bank Special Programme for Research and Training in Tropical Diseases (JCB/TDR) and Health Resources Group (HRG) should report back to the Committee. It was decided, after detailed examination, that those Member States who were nominated by the Committee to send

representatives to these bodies should be responsible for reporting back to the Committee on the meetings through their respective representatives to the Regional Committee.

6 Infant and Young Child Feeding - Draft International Code of Marketing of Breastmilk Substitutes

The Regional Committee considered this subject along with two World Health Assembly resolutions (WHA34.22 and WHA34.23).

It was noted that all countries in the Region were interested in this subject, and the Committee felt that improvements in the nutrition of infants, young children and pregnant and lactating mothers were of paramount importance to the attainment of the goal of health for all by the year 2000.

The Committee endorsed the draft plan of action outlined in the background document (SEA/RC34/13), urged Member States to implement the recommendations made in the Assembly resolutions and requested the Regional Director to provide the necessary support to governments.

It adopted a resolution on this subject (SEA/RC34/R8).

7 Selection of a Subject for the Technical Discussions To Be Held During the Thirty-fifth Session

The Regional Committee decided to hold technical discussions on the "Control and Prevention of Leprosy in the Context of Primary Health Care" during its thirty-fifth session in 1982 (see resolution SEA/RC34/R10).

8 Time and Place of the Thirty-fifth and Thirty-sixth Sessions of the Regional Committee

The Regional Committee confirmed its earlier decision to hold the thirty-fifth session in Dacca, Bangladesh, and requested the Regional Director to decide on the dates, in consultation with the Government of Bangladesh, in September 1982.

The Committee also noted the invitation of the Government of Nepal to hold the thirty-sixth session in Nepal in 1983.

A resolution on this subject was adopted (SEA/RC34/R9).

9 National Health Programmes with Synchronized Foreign Assistance in the Context of WHO Technical Cooperation
(item proposed by the Government of Indonesia)

The Committee noted that, with the increase in the financial requirements of health development programmes, their management and administration had become increasingly complex and required coordination. There was also a need for effective coordination of external assistance and national resources. Hence it was necessary to identify the interface of national policies and objectives with those of foreign assistance in

order to facilitate coordinated resource use for implementing, monitoring and evaluating national health programmes. The systematic management and coordination of all foreign assistance in the backdrop of national priorities and needs would very greatly benefit the countries concerned. The Committee requested the Regional Director to initiate specific collaborative activities to this end, for the programme budget for the biennium 1984-1985.

10 Goitre Control Programme Within the Context of
Health for All by the Year 2000 (item proposed
by the Government of India)

In the discussion on this subject, attention was drawn to the grave consequences of goitre, including irreversible changes, especially in the younger age-group. Goitre had become a major public health problem in many countries of the Region, calling for a coordinated control programme. The Committee adopted a resolution in this regard (SEA/RC34/R1).