



THIRTIETH WORLD HEALTH ASSEMBLY

EXED

THIRD REPORT OF COMMITTEE A
(Draft)

During its seventeenth and eighteenth meetings held on 18 May 1977, Committee A decided to recommend to the Thirtieth World Health Assembly the adoption of the attached resolutions relating to the following agenda items:

- 2.4.3 Special programme for research and training in tropical diseases
- 2.4.10 Technical cooperation
- 2.4.10 Health legislation
- 2.4.10 Special programme of technical cooperation in mental health
- 2.4.10 Information systems and services
- 2.4.10 Evaluation of the effects of chemicals on health
- 2.4.10 The role of nursing/midwifery personnel in primary health care teams
- 2.4.10 Promotion and development of training and research in traditional medicine
- 1.4 Method of work of the Health Assembly and of the Executive Board



SPECIAL PROGRAMME FOR RESEARCH AND TRAINING IN
TROPICAL DISEASES

The Thirtieth World Health Assembly,

Having considered the progress report¹ submitted by the Director-General, pursuant to resolution WHA29.71, on the Special Programme for Research and Training in Tropical Diseases;

Having further taken cognizance of the views expressed by the Executive Board on this Programme and of the recommendations made in resolution EB59.R31.

Considering that the most appropriate environment to conduct research and training activities is in the countries affected by the diseases in question;

Emphasizing again the need for national research and training institutions in every region to participate fully in the global networks of the collaborating centres of the Special Programme;

1. NOTES with satisfaction the progress made towards the establishment of the programme and in the development of its initial activities in cooperation with UNDP, the World Bank and the Member States;

2. EXPRESSES its appreciation of the generous contributions to the Special Programme made so far or pledged for the future;

3. URGES the Governments of Member States to (a) maximize their contributions and (b) on the other hand develop to the fullest possible extent national research and training institutions and facilities in support of the Programme;

4. REQUESTS the Director-General to identify and develop such institutions and facilities in countries of each region;

5. INVITES the Director-General:

(1) to use the budgetary provisions made for the 1978-1979 biennium according to priorities approved within the Special Programme;

(2) to use in the same way any budgetary provisions for the Special Programme which may be included in future programme budgets, starting with the 1980-1981 biennium;

(3) to endeavour to ensure that contributions to the Special Programme originating from (a) a Tropical Diseases Research Fund which the World Bank has been requested to consider establishing and managing; (b) the WHO Voluntary Fund for Health Promotion; and (c) other agency funds such as the contributions made by the United Nations Development Programme, be made to the greatest extent possible without restrictions on the uses to which they may be put among the activities approved within the Programme;

6. FURTHER REQUESTS the Director-General to continue to report on the development of the Programme to the Executive Board and the World Health Assembly.

¹ Document A30/11.

TECHNICAL COOPERATION

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 reorientation 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.

HEALTH LEGISLATION

The Thirtieth World Health Assembly,

Considering that appropriate health legislation is of paramount importance in the strengthening of health services, and in particular in assuring primary health care for rural and otherwise underserved populations;

Recognizing that health legislation adapted to national requirements can serve to protect and improve the health of the individual and of the community;

Noting that many Member States still have limited health legislation that may date back to the colonial era or no legislation at all and that this situation needs to be remedied by adapting legislation to present needs in these countries and developing new health laws to deal with new requirements;

Bearing in mind the need for Member States to be informed of the health legislation of other countries, particularly that concerning drugs, foodstuffs, and toxic chemicals crossing national frontiers;

Recognizing the fact that national health services require appropriate health legislation to ensure adequate implementation of these services;

Noting further the recommendations on legislation adopted by various United Nations Conferences, notably the Stockholm Conference on the Human Environment, the Habitat Conference, and the recent United Nations Water Conference;

Bearing in mind that no country can solve its health problems in isolation and a sharing of experiences in the health legislation field is of considerable value, notably for the developing countries;

Recalling resolutions by previous World Health Assemblies and Executive Boards concerning the Organization's overall programme in health legislation;

1. URGES Member States to fulfil their obligations under Article 63 of the Constitution to forward their important health laws and regulations to the Organization;
2. REQUESTS the Director-General:
 - (a) to strengthen WHO's Programme in the field of health legislation, with a view to assisting Member States, upon their request, in the development of appropriate health legislation adapted to their needs and enhance technical cooperation in health legislation and its administration particularly in developing countries;
 - (b) to strengthen collaboration with other specialized agencies concerned in the development of guidelines on health legislation on the various subjects of health policies;
 - (c) to study and implement the optimum means for the dissemination of legislative information in Member countries to serve as guides to the development of new or revised health laws;
 - (d) to submit a report on developments in this sphere to the World Health Assembly as soon as possible;
3. REQUESTS the Executive Board to re-examine the criteria for the International Digest of Health Legislation approved by the sixth session of the Board, with a view to updating them to meet the present needs of technical cooperation designed to serve developing countries.

SPECIAL PROGRAMME OF TECHNICAL COOPERATION
IN MENTAL HEALTH

The Thirtieth World Health Assembly,

Noting with concern the magnitude and severity of psychosocial stresses currently facing many populations of the developing countries and especially the high-risk populations in Southern Africa;

Recognizing that existing services are unable to provide necessary preventive and curative care for the broad range of mental health problems exacerbated by such stresses;

Further recognizing that in some cases there are no relevant infrastructures on which a viable programme could be built;

Affirming the need to take immediate preventive, curative and rehabilitative measures if irreversible damage to social and productive aspects of individuals and communities is to be prevented;

1. URGES Member States to support action coordinated by the World Health Organization to solve these problems through increased cooperative efforts and by voluntary contributions; and

2. REQUESTS the Director-General to combat these problems

(a) by working with countries concerned in the development of plans for relevant mental health action within general health and other social services;

(b) by facilitating cooperation between countries that will strengthen human resources and ensure the application of appropriate technologies from the field of mental health and behavioural sciences;

(c) by making activities which deal with these problems a special focus of the WHO Mental Health programme.

INFORMATION SYSTEMS AND SERVICES

The Thirtieth World Health Assembly,

Recalling resolutions WHA27.32, and EB55.R56,

Recognising the necessity for rationalisation and re-allocation of the Organization's resources, and,

Bearing in mind the emphasis of WHO policy on improved planning of health services and the dependence of such progress on information systems and services,

1. EMPHASIZES the importance of adequate systems and services for the generation, collection and dissemination of statistical and other relevant information on health and socioeconomic matters, as the basis of better planned and effective health services,
2. URGES Member States to develop appropriate national health information systems and services to support the development, implementation and evaluation of their health services,
3. REQUESTS the Director-General:
 1. To ensure that the activities of WHO in the fields of statistical and other information systems and services will continue to have the necessary priority at headquarters and in the regions;
 2. To collaborate with Member States in the development of national health information systems and services; and
 3. To report in his annual report on progress in this field to a future Assembly.

EVALUATION OF THE EFFECTS OF CHEMICALS ON HEALTH

The Thirtieth World Health Assembly,

Recalling resolutions WHA26.58, WHA27.49, WHA28.63, WHA29.45 and WHA29.57;

Considering that the growing use of chemicals in public health, industry, agriculture, food production and in the home, together with environmental pollution resulting from rapid industrialization and new technologies, will need recognition in the health policies and strategies of all countries, as has already been the case in several Member States that have introduced new legislation in this field;

Concerned at the acute and especially the chronic or combined toxic effects, not only on present but on future generations, that may result from exposure to chemicals in air, water, food, consumer products and at the place of work, particularly if combined with exposure to other chemicals, infectious agents and physical factors;

Disturbed by the increasing number of accidental releases of chemicals into the environment, resulting in adverse effects on health of epidemic proportions;

Aware of the progress made by WHO and its International Agency for Research on Cancer, with the active cooperation of Member States, in evaluating health hazards from exposure to chemicals; and bearing in mind the activities being carried out by other organizations, particularly the UNEP Register of Potentially Toxic Chemicals;

Recognizing, however, that so far existing national or international programmes have not been able to deal adequately with the long-term aspects of human exposure to chemicals;

REQUESTS the Director-General:

(1) to study the problem and long-term strategies in this field; and, in collaboration with appropriate national institutions and international organizations, to examine the possible options for international cooperation, including the financial and organizational implications, with a view to:

(a) accelerating and making more effective the evaluation of health risks from exposure to chemicals, and promoting the use of experimental and epidemiological methods that will produce internationally comparable results;

(b) exchanging information on new chemical hazards to public health;

(c) providing rapid and effective response in emergencies and developing arrangements for mutual assistance between Member States;

(d) developing manpower in this field;

(2) to report the results of this study, together with his recommendations, to the Executive Board and the Health Assembly as soon as possible.

THE ROLE OF NURSING/MIDWIFERY PERSONNEL IN
PRIMARY HEALTH CARE TEAMS

The Thirtieth World Health Assembly,

Bearing in mind resolution WHA28.88 on the development of primary health care;

Reaffirming the main principles contained in resolution WHA29.72 on health manpower development;

Having examined the Report of the Director-General on the Work of WHO in 1976, and noting particularly the expressed priority to be given to the rapid balanced increase in the numbers of health personnel and to the strengthening of facilities for this purpose;

Considering that comprehensive primary health care services involve not only treatment of the ill but also and more so the prevention of disease as well as the promotion and maintenance of health;

Considering that nursing/midwifery personnel as part of the health team have provided and continue to provide the greater part of health care in most health systems;

Considering that many Member States already have a sizeable pool of nursing/midwifery personnel possessing the necessary managerial, supervisory and teaching skills from which may be drawn teachers and supervisors of primary health care workers;

Considering that most of the primary health services particularly in developing countries are in the field of maternal and child health care and family planning in which different categories of nursing/midwifery personnel have traditionally been the primary sources of such services, under the general supervision of qualified physicians;

Considering that, within the range of nursing/midwifery skills and knowledge should be the ability to plan and organize with individuals and communities health care including vaccination programmes as well as aspects of self-care enabling them to become self-reliant; and

Recognizing that there are many alternatives that may be considered in the development of primary health care workers; one cost-effective alternative would be the redefinition and restructuring of nursing/midwifery roles and functions in relation to those of other members of the health team, in order to optimize their contribution to primary health care, including the implementation of programmes for immunization of babies and infants;

1. RECOMMENDS that Member States:

(a) undertake a comprehensive review of the roles and functions of the different types of personnel including nursing/midwifery personnel within the context of national health programmes, particularly the aspects relating to health teams in primary health care to achieve a satisfactory balance;

(b) redress the imbalance in the production and utilization of different types of health manpower in such a way that a more rational increase is effected in the supply of the different types of nursing/midwifery personnel to be developed in harmony with that of the other categories of health manpower to respond to the pressing needs of primary health care including vaccinations programmes;

(c) utilize more effectively existing nursing/midwifery personnel by involving them, together with the representatives of other categories of health manpower, in the planning and management of primary health care and vaccination programmes and as teachers and supervisors of primary health care workers.

2. REQUESTS the Director-General:

(a) to cooperate with Member States in redefining and restructuring the roles and functions of the different categories of nursing/midwifery personnel in the health teams so that they can meet, in an interdisciplinary approach, the needs of communities for primary health care as part of total community development;

(b) to intensify efforts to develop retraining and continuing education programmes for nursing/midwifery personnel consistent with the redefined and restructured roles and functions of the different members of the health teams;

(c) to provide nursing/midwifery personnel with the opportunities to develop the skills required to participate effectively in a multidisciplinary approach to the planning, management and execution of primary health care and vaccination programmes;

(d) to promote the further development of appropriate technologies, studies, research and experimentation;

(e) to re-examine and if necessary, develop within the structure of WHO the mechanisms through which the planning and implementation of such technical cooperation may be effected with Member States; and

(f) to report on the progress made to a future World Health Assembly.

PROMOTION AND DEVELOPMENT OF TRAINING AND
RESEARCH IN TRADITIONAL MEDICINE

The Thirtieth World Health Assembly,

Noting that the Primary Health Care in developing countries has not reached the bulk of populations;

Realizing that in developing countries it is important to make use of available health resources;

Recognizing that traditional systems of medicine in developing countries have a heritage of community acceptance, and have played and continue to play an important part in providing health care;

Noting that there are institutions of traditional systems of medicine in some developing countries engaged in providing health care, training and research;

Noting that WHO has already initiated studies on the use of traditional systems of medicine in its efforts to find alternative approaches to meet the basic health needs of the people in developing countries;

Considering that immediate, practical and effective measures to utilize traditional systems of medicine fully are necessary and highly desirable;

1. RECORDS with appreciation the efforts of WHO to initiate studies on the use of traditional systems of medicine in conjunction with modern medicine;
2. URGES interested Governments to give adequate importance to the utilization of their traditional systems of medicine with appropriate regulations as suited to their national health systems;
3. REQUESTS the Director-General to assist Member States to organize educational and research activities and to award fellowships for training in research techniques, for studies of health care systems and for investigating the technological procedures related to traditional/indigenous systems of medicine; and
4. FURTHER REQUESTS the Director-General and the Regional Directors to give high priority to technical cooperation for these activities and to consider the appropriate financing of these activities.

METHOD OF WORK OF THE HEALTH ASSEMBLY AND OF THE EXECUTIVE BOARD

The Thirtieth World Health Assembly,

Having considered the recommendations of the Executive Board¹ concerning the method of work of the Health Assembly;

Noting with satisfaction the conclusions and decisions of the Board on the method of work of the Executive Board and related matters;

Believing that the proposals made for changes in respect of the proceedings of the Health Assembly would contribute towards further rationalizing and improving the work of the Assembly;

1. DECIDES that

(1) the subitem of Committee A's agenda dealing with the review of the proposed programme budget and of the Executive Board's report thereon should be entitled "Review of the proposed programme budget and of the report of the Executive Board thereon";

(2) Committee A, in its review of the proposed programme budget, should concentrate its attention on this programme budget and on the report containing the Executive Board's comments and recommendations on the programme budget proposals of the Director-General;

(3) Committee A should consider simultaneously the subitems on its agenda that relate to the effective working budget and to the Appropriation Resolution under a single subitem named "Consideration of the budget level and Appropriation Resolution for the financial year . . .", and should adopt a single draft resolution on this subject;

(4) the Board's representatives in Committee A should play a more active role in the discussion of matters relating to the proposed programme budget and to the views of the Executive Board thereon; and that this approach to the participation of the Board's representatives in the Health Assembly should apply to other items on which there are recommendations by the Board to the Health Assembly;

2. DECIDES further that

(1) the adoption by the Health Assembly and the Executive Board of resolutions relating to certain reports, elections, appointments and procedural decisions should be discontinued and replaced by "decisions" recorded in the Official Records under a collective heading.

(2) when the Director-General is requested by the Health Assembly to submit new reports on subjects under discussion, the Assembly should in each case specify whether the response should be included in the Director-General's report on the work of WHO or in a separate document;

¹ Resolution EB59.R8.

(3) chairmen of the main committees of the Health Assembly should be requested to bear in mind the need to guide the proceedings of their respective committees in such a way as to prevent the discussion on a particular agenda item straying from the substance of the matter under consideration, as provided for in the Rules of Procedure;

3. DECIDES also that this resolution supersedes those provisions of previous resolutions on the method of work of the Health Assembly which may be inconsistent with the terms of this resolution.

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THIRTIETH WORLD HEALTH ASSEMBLY

INDEXED

THIRD REPORT OF COMMITTEE A

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- 2.4.3 Special programme for research and training in tropical diseases
- 2.4.10 Technical cooperation
- 2.4.10 Health legislation
- 2.4.10 Special programme of technical cooperation in mental health
- 2.4.10 Information systems and services
- 2.4.10 Evaluation of the effects of chemicals on health
- 2.4.10 The role of nursing/midwifery personnel in primary health care teams
- 2.4.10 Promotion and development of training and research in traditional medicine
- 1.4 Method of work of the Health Assembly and of the Executive Board



SPECIAL PROGRAMME FOR RESEARCH AND TRAINING IN
TROPICAL DISEASES

The Thirtieth World Health Assembly,

Having considered the progress report¹ submitted by the Director-General, pursuant to resolution WHA29.71, on the Special Programme for Research and Training in Tropical Diseases;

Having further taken cognizance of the views expressed by the Executive Board on this Programme and of the recommendations made in resolution EB59.R31.

Considering that the most appropriate environment to conduct research and training activities is in the countries affected by the diseases in question;

Emphasizing again the need for national research and training institutions in every region to participate fully in the global networks of the collaborating centres of the Special Programme;

1. NOTES with satisfaction the progress made towards the establishment of the programme and in the development of its initial activities in cooperation with UNDP, the World Bank and the Member States;
2. EXPRESSES its appreciation of the generous contributions to the Special Programme made so far or pledged for the future;
3. URGES the Governments of Member States to (a) maximize their contributions and (b) on the other hand develop to the fullest possible extent national research and training institutions and facilities in support of the Programme;
4. REQUESTS the Director-General to identify and develop such institutions and facilities in countries of each region;
5. INVITES the Director-General:
 - (1) to use the budgetary provisions made for the 1978-1979 biennium according to priorities approved within the Special Programme;
 - (2) to use in the same way any budgetary provisions for the Special Programme which may be included in future programme budgets, starting with the 1980-1981 biennium;
 - (3) to endeavour to ensure that contributions to the Special Programme originating from (a) a Tropical Diseases Research Fund which the World Bank has been requested to consider establishing and managing; (b) the WHO Voluntary Fund for Health Promotion; and (c) other agency funds such as the contributions made by the United Nations Development Programme, be made to the greatest extent possible without restrictions on the uses to which they may be put among the activities approved within the Programme;
6. FURTHER REQUESTS the Director-General to continue to report on the development of the Programme to the Executive Board and the World Health Assembly.

¹ Document A30/11.

TECHNICAL COOPERATION

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 reorientation 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.

HEALTH LEGISLATION

The Thirtieth World Health Assembly,

Considering that appropriate health legislation is of paramount importance in the strengthening of health services, and in particular in assuring primary health care for rural and otherwise underserved populations;

Recognizing that health legislation adapted to national requirements can serve to protect and improve the health of the individual and of the community;

Noting that many Member States still have limited health legislation that may date back to the colonial era or no legislation at all and that this situation needs to be remedied by adapting legislation to present needs in these countries and developing new health laws to deal with new requirements;

Bearing in mind the need for Member States to be informed of the health legislation of other countries, particularly that concerning drugs, foodstuffs, and toxic chemicals crossing national frontiers;

Recognizing the fact that national health services require appropriate health legislation to ensure adequate implementation of these services;

Noting further the recommendations on legislation adopted by various United Nations Conferences, notably the Stockholm Conference on the Human Environment, the Habitat Conference, and the recent United Nations Water Conference;

Bearing in mind that no country can solve its health problems in isolation and a sharing of experiences in the health legislation field is of considerable value, notably for the developing countries;

Recalling resolutions by previous World Health Assemblies and Executive Boards concerning the Organization's overall programme in health legislation;

1. URGES Member States to fulfil their obligations under Article 63 of the Constitution to forward their important health laws and regulations to the Organization;

2. REQUESTS the Director-General:

(a) to strengthen WHO's Programme in the field of health legislation, with a view to assisting Member States, upon their request, in the development of appropriate health legislation adapted to their needs and enhance technical cooperation in health legislation and its administration particularly in developing countries;

(b) to strengthen collaboration with other specialized agencies concerned in the development of guidelines on health legislation on the various subjects of health policies;

(c) to study and implement the optimum means for the dissemination of legislative information in Member countries to serve as guides to the development of new or revised health laws;

(d) to submit a report on developments in this sphere to the World Health Assembly as soon as possible;

3. REQUESTS the Executive Board to re-examine the criteria for the International Digest of Health Legislation approved by the sixth session of the Board, with a view to updating them to meet the present needs of technical cooperation designed to serve developing countries.

SPECIAL PROGRAMME OF TECHNICAL COOPERATION
IN MENTAL HEALTH

The Thirtieth World Health Assembly,

Noting with concern the magnitude and severity of psychosocial stresses currently facing many populations of the developing countries and especially the high-risk populations in Southern Africa;

Recognizing that existing services are unable to provide necessary preventive and curative care for the broad range of mental health problems exacerbated by such stresses;

Further recognizing that in some cases there are no relevant infrastructures on which a viable programme could be built;

Affirming the need to take immediate preventive, curative and rehabilitative measures if irreversible damage to social and productive aspects of individuals and communities is to be prevented;

1. URGES Member States to support action coordinated by the World Health Organization to solve these problems through increased cooperative efforts and by voluntary contributions; and

2. REQUESTS the Director-General to combat these problems

(a) by working with countries concerned in the development of plans for relevant mental health action within general health and other social services;

(b) by facilitating cooperation between countries that will strengthen human resources and ensure the application of appropriate technologies from the field of mental health and behavioural sciences;

(c) by making activities which deal with these problems a special focus of the WHO Mental Health programme.

INFORMATION SYSTEMS AND SERVICES

The Thirtieth World Health Assembly,

Recalling resolutions WHA27.32, and EB55.R56,

Recognising the necessity for rationalisation and re-allocation of the Organization's resources, and,

Bearing in mind the emphasis of WHO policy on improved planning of health services and the dependence of such progress on information systems and services,

1. EMPHASIZES the importance of adequate systems and services for the generation, collection and dissemination of statistical and other relevant information on health and socioeconomic matters, as the basis of better planned and effective health services,
2. URGES Member States to develop appropriate national health information systems and services to support the development, implementation and evaluation of their health services,
3. REQUESTS the Director-General:
 1. To ensure that the activities of WHO in the fields of statistical and other information systems and services will continue to have the necessary priority at headquarters and in the regions;
 2. To collaborate with Member States in the development of national health information systems and services; and
 3. To report in his annual report on progress in this field to a future Assembly.

EVALUATION OF THE EFFECTS OF CHEMICALS ON HEALTH

The Thirtieth World Health Assembly,

Recalling resolutions WHA26.58, WHA27.49, WHA28.63, WHA29.45 and WHA29.57;

Considering that the growing use of chemicals in public health, industry, agriculture, food production and in the home, together with environmental pollution resulting from rapid industrialization and new technologies, will need recognition in the health policies and strategies of all countries, as has already been the case in several Member States that have introduced new legislation in this field;

Concerned at the acute and especially the chronic or combined toxic effects, not only on present but on future generations, that may result from exposure to chemicals in air, water, food, consumer products and at the place of work, particularly if combined with exposure to other chemicals, infectious agents and physical factors;

Disturbed by the increasing number of accidental releases of chemicals into the environment, resulting in adverse effects on health of epidemic proportions;

Aware of the progress made by WHO and its International Agency for Research on Cancer, with the active cooperation of Member States, in evaluating health hazards from exposure to chemicals; and bearing in mind the activities being carried out by other organizations, particularly the UNEP Register of Potentially Toxic Chemicals;

Recognizing, however, that so far existing national or international programmes have not been able to deal adequately with the long-term aspects of human exposure to chemicals;

REQUESTS the Director-General:

(1) to study the problem and long-term strategies in this field; and, in collaboration with appropriate national institutions and international organizations, to examine the possible options for international cooperation, including the financial and organizational implications, with a view to:

(a) accelerating and making more effective the evaluation of health risks from exposure to chemicals, and promoting the use of experimental and epidemiological methods that will produce internationally comparable results;

(b) exchanging information on new chemical hazards to public health;

(c) providing rapid and effective response in emergencies and developing arrangements for mutual assistance between Member States;

(d) developing manpower in this field;

(2) to report the results of this study, together with his recommendations, to the Executive Board and the Health Assembly as soon as possible.

THE ROLE OF NURSING/MIDWIFERY PERSONNEL IN
PRIMARY HEALTH CARE TEAMS

The Thirtieth World Health Assembly,

Bearing in mind resolution WHA28.88 on the development of primary health care;

Reaffirming the main principles contained in resolution WHA29.72 on health manpower development;

Having examined the Report of the Director-General on the Work of WHO in 1976, and noting particularly the expressed priority to be given to the rapid balanced increase in the numbers of health personnel and to the strengthening of facilities for this purpose;

Considering that comprehensive primary health care services involve not only treatment of the ill but also and more so the prevention of disease as well as the promotion and maintenance of health;

Considering that nursing/midwifery personnel as part of the health team have provided and continue to provide the greater part of health care in most health systems;

Considering that many Member States already have a sizeable pool of nursing/midwifery personnel possessing the necessary managerial, supervisory and teaching skills from which may be drawn teachers and supervisors of primary health care workers;

Considering that most of the primary health services particularly in developing countries are in the field of maternal and child health care and family planning in which different categories of nursing/midwifery personnel have traditionally been the primary sources of such services, under the general supervision of qualified physicians;

Considering that, within the range of nursing/midwifery skills and knowledge should be the ability to plan and organize with individuals and communities health care including vaccination programmes as well as aspects of self-care enabling them to become self-reliant; and

Recognizing that there are many alternatives that may be considered in the development of primary health care workers; one cost-effective alternative would be the redefinition and restructuring of nursing/midwifery roles and functions in relation to those of other members of the health team, in order to optimize their contribution to primary health care, including the implementation of programmes for immunization of babies and infants;

1. RECOMMENDS that Member States:

(a) undertake a comprehensive review of the roles and functions of the different types of personnel including nursing/midwifery personnel within the context of national health programmes, particularly the aspects relating to health teams in primary health care to achieve a satisfactory balance;

(b) redress the imbalance in the production and utilization of different types of health manpower in such a way that a more rational increase is effected in the supply of the different types of nursing/midwifery personnel to be developed in harmony with that of the other categories of health manpower to respond to the pressing needs of primary health care including vaccinations programmes;

(c) utilize more effectively existing nursing/midwifery personnel by involving them, together with the representatives of other categories of health manpower, in the planning and management of primary health care and vaccination programmes and as teachers and supervisors of primary health care workers.

2. REQUESTS the Director-General:

(a) to cooperate with Member States in redefining and restructuring the roles and functions of the different categories of nursing/midwifery personnel in the health teams so that they can meet, in an interdisciplinary approach, the needs of communities for primary health care as part of total community development;

(b) to intensify efforts to develop retraining and continuing education programmes for nursing/midwifery personnel consistent with the redefined and restructured roles and functions of the different members of the health teams;

(c) to provide nursing/midwifery personnel with the opportunities to develop the skills required to participate effectively in a multidisciplinary approach to the planning, management and execution of primary health care and vaccination programmes;

(d) to promote the further development of appropriate technologies, studies, research and experimentation;

(e) to re-examine and if necessary, develop within the structure of WHO the mechanisms through which the planning and implementation of such technical cooperation may be effected with Member States; and

(f) to report on the progress made to a future World Health Assembly.

PROMOTION AND DEVELOPMENT OF TRAINING AND
RESEARCH IN TRADITIONAL MEDICINE

The Thirtieth World Health Assembly,

Noting that the Primary Health Care in developing countries has not reached the bulk of populations;

Realizing that in developing countries it is important to make use of available health resources;

Recognizing that traditional systems of medicine in developing countries have a heritage of community acceptance, and have played and continue to play an important part in providing health care;

Noting that there are institutions of traditional systems of medicine in some developing countries engaged in providing health care, training and research;

Noting that WHO has already initiated studies on the use of traditional systems of medicine in its efforts to find alternative approaches to meet the basic health needs of the people in developing countries;

Considering that immediate, practical and effective measures to utilize traditional systems of medicine fully are necessary and highly desirable;

1. RECORDS with appreciation the efforts of WHO to initiate studies on the use of traditional systems of medicine in conjunction with modern medicine;
2. URGES interested Governments to give adequate importance to the utilization of their traditional systems of medicine with appropriate regulations as suited to their national health systems;
3. REQUESTS the Director-General to assist Member States to organize educational and research activities and to award fellowships for training in research techniques, for studies of health care systems and for investigating the technological procedures related to traditional/
indigenous systems of medicine; and
4. FURTHER REQUESTS the Director-General and the Regional Directors to give high priority to technical cooperation for these activities and to consider the appropriate financing of these activities.

METHOD OF WORK OF THE HEALTH ASSEMBLY AND OF THE EXECUTIVE BOARD

The Thirtieth World Health Assembly,

Having considered the recommendations of the Executive Board¹ concerning the method of work of the Health Assembly;

Noting with satisfaction the conclusions and decisions of the Board on the method of work of the Executive Board and related matters;

Believing that the proposals made for changes in respect of the proceedings of the Health Assembly would contribute towards further rationalizing and improving the work of the Assembly;

1. DECIDES that

(1) the subitem of Committee A's agenda dealing with the review of the proposed programme budget and of the Executive Board's report thereon should be entitled "Review of the proposed programme budget and of the report of the Executive Board thereon";

(2) Committee A, in its review of the proposed programme budget, should concentrate its attention on this programme budget and on the report containing the Executive Board's comments and recommendations on the programme budget proposals of the Director-General;

(3) Committee A should consider simultaneously the subitems on its agenda that relate to the effective working budget and to the Appropriation Resolution under a single subitem named "Consideration of the budget level and Appropriation Resolution for the financial year . . .", and should adopt a single draft resolution on this subject;

(4) the Board's representatives in Committee A should play a more active role in the discussion of matters relating to the proposed programme budget and to the views of the Executive Board thereon; and that this approach to the participation of the Board's representatives in the Health Assembly should apply to other items on which there are recommendations by the Board to the Health Assembly;

2. DECIDES further that

(1) the adoption by the Health Assembly and the Executive Board of resolutions relating to certain reports, elections, appointments and procedural decisions should be discontinued and replaced by "decisions" recorded in the Official Records under a collective heading.

(2) when the Director-General is requested by the Health Assembly to submit new reports on subjects under discussion, the Assembly should in each case specify whether the response should be included in the Director-General's report on the work of WHO or in a separate document;

¹ Resolution EB59.R8.

(3) chairmen of the main committees of the Health Assembly should be requested to bear in mind the need to guide the proceedings of their respective committees in such a way as to prevent the discussion on a particular agenda item straying from the substance of the matter under consideration, as provided for in the Rules of Procedure;

3. DECIDES also that this resolution supersedes those provisions of previous resolutions on the method of work of the Health Assembly which may be inconsistent with the terms of this resolution.

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