

WORLD HEALTH
ORGANIZATION

REGIONAL OFFICE FOR THE
EASTERN MEDITERRANEAN

الهيئة الصحية العالمية

المكتب الإقليمي لشرق البحر الأبيض المتوسط

ORGANISATION MONDIALE
DE LA SANTÉ

BUREAU REGIONAL DE LA
MEDITERRANÉE ORIENTALE

REGIONAL COMMITTEE FOR THE
EASTERN MEDITERRANEAN

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RESOLUTIONS OF REGIONAL INTEREST
ADOPTED BY THE TWENTY-SECOND WORLD HEALTH ASSEMBLY
AND BY THE EXECUTIVE BOARD AT ITS FORTY-THIRD AND FORTY-FOURTH SESSIONS

INTRODUCTION

The Regional Director has the honour to bring to the attention of the Regional Committee the following resolutions which were adopted by the Twenty-second World Health Assembly and by the Executive Board at its Forty-third and Forty-fourth Sessions:

AGREEMENT BETWEEN THE WORLD HEALTH ORGANIZATION AND THE ORGANIZATION OF
AFRICAN UNITY, WHA22.16

The Twenty-second World Health Assembly,

Considering Articles 50 (d) and 70 of the Constitution of WHO,

APPROVES the proposed agreement to be concluded between WHO and the Organization of African Unity.

INCLUSION OF AFGHANISTAN IN THE EASTERN MEDITERRANEAN REGION, WHA22.19

The Twenty-second World Health Assembly,

Having considered the request from the Government of Afghanistan for the inclusion of that country in the Eastern Mediterranean Region¹,

DECIDES that Afghanistan shall form part of the Eastern Mediterranean Region

EXTENSION OF THE AGREEMENT WITH UNRWA, WHA22.25

The Twenty-second World Health Assembly,

Considering that, on 29 September 1950, an agreement was concluded between the Director-General of the World Health Organization and the Director of the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) on the basis of principles established by the Third World Health Assembly;

Considering that the Nineteenth World Health Assembly in resolution WHA19.25² extended the duration of this agreement until 30 June 1969 and that, subsequently, the General Assembly of the United Nations, at its Twenty-third session, extended the mandate of UNRWA until 30 June 1972;

Considering that, on numerous occasions, the World Health Assembly had extended the duration of this agreement to coincide with the respective periods of extension of the mandate of UNRWA;

Considering that the World Health Organization should continue the technical direction of the health programme administered by UNRWA,

1. AUTHORIZES the Director-General to extend the agreement with UNRWA from time to time for such periods as UNRWA continues to have a mandate from the United Nations; and

2. REQUESTS the Director-General to report to the Health Assembly in case he should feel that the necessity for continuing this agreement on the same basis no longer prevails.

IMPLEMENTATION OF RESOLUTION WHA7.33, WHA22.28

The Twenty-second World Health Assembly,

Having noted the report of the Director-General included in Annex 13 of Official Records No. 175 in connexion with Implementation of Resolution WHA7.33;

¹Document A22/AFL/20

²Handbook of Resolutions and Decisions, 10th ed., p. 457.

Bearing in mind that the considerations, discussions, and the circumstances which led the Sixth and Seventh World Health Assemblies to adopt resolutions WHA6.47 and WHA7.33 remain unchanged;

Reiterating that it is highly desirable that the task conferred upon the World Health Organization be accomplished fully in order to satisfy the legitimate health needs of the Member States in the Eastern Mediterranean Region,

1. REAFFIRMS resolutions WHA6.47 and WHA7.33; and
2. REQUESTS the Director-General and the Regional Director to take necessary measures to ensure implementation of these resolutions.

SMALLPOX ERADICATION PROGRAMME, WHA22.34

The Twenty-second World Health Assembly,

Having considered the report of the Director-General on the smallpox eradication programme;¹

Noting that while very significant progress is being made in the eradication effort, not all endemic countries are proceeding at the pace necessary to assure the success of the eradication programme; and

Recognizing the need for full and active participation by all endemic countries, for the maximum of co-ordination, and for more complete and prompt reporting and improved surveillance techniques,

1. REITERATES the need for all countries to give the highest possible priority to the provision of funds and personnel to achieve eradication;
2. EXPRESSES appreciation to Member States for continuing support to the programme including the supply of vaccine and bilateral aid to the endemic countries;
3. REQUESTS
 - (1) all countries with endemic smallpox, particularly those having nomadic and mobile population, to strengthen their programmes, surveillance, case investigations, active containment measures in each outbreak, and assessment activities; and
 - (2) all countries, especially those neighbouring endemic countries, to continue their vaccination programmes and surveillance especially along their common borders;

¹Document A22/P&B/2.

4. REQUESTS the Director-General:

- (1) to continue to take all necessary steps to assure the maximum co-ordination of national efforts as well as support provided through international and bilateral agencies with the objective of achieving smallpox eradication as quickly as possible; and
- (2) to report further on the progress of the smallpox eradication programme to the forty-fifth session of the Executive Board and to the Twenty-third World Health Assembly.

RE-EXAMINATION OF THE GLOBAL STRATEGY OF MALARIA ERADICATION, WHA22.39

The Twenty-second World Health Assembly,

Having considered the report of the Director-General on the re-examination of the global strategy of malaria eradication;¹

Noting with satisfaction the steps taken by the Director-General in pursuance of resolution WHA21.22 and the successes achieved by the malaria eradication campaign in a certain number of countries;

Recognizing the part played by socio-economic, financial, administrative and operational factors, as also by the inadequacy of the basic health services, in the failures recorded during the implementation of the global malaria eradication programme;

Reaffirming that complete eradication of malaria from the world remains a primary task of national public health organizations, and that even in the regions where eradication does not yet seem feasible, control of malaria with the means available should be encouraged and may be regarded as a necessary and valid step towards the ultimate goal of eradication;

Bearing in mind that it is imperative to adapt the strategy to local epidemiological situations as well as to the available administrative and economic resources of the countries concerned, and that the observance of this condition is equally essential both for the achievement of eradication and for its maintenance;

Recognizing, moreover, that, in order to confront the financial difficulties which are a major hindrance to the implementation of malaria eradication programmes and to secure adequate priority for these programmes in the allocation of funds, it is necessary to justify them on economic as well as health grounds, by demonstrating the reality of the rapid and lasting advantages accruing from the pursuit of eradication, which now seems to be possible; and

¹Document A22/P&B/8.

Realizing the importance of the whole body of research undertaken on all aspects of the malaria problem for devising methods of interrupting transmission suited to various ecological conditions and for developing more effective methods for the prevention, diagnosis and treatment of malaria;

1. ENDORSES the proposals contained in the Report of the Director-General with regard to the strategy contemplated in countries where eradication programmes are already in operation and in those where areas have reached the maintenance phase, as well as in countries which have not yet commenced their eradication programme;
2. URGES the governments of countries with eradication programmes and the assisting agencies to give them the necessary priority in the allocation of their resources to ensure the successful implementation of the programmes;
3. INVITES the Director-General to undertake the necessary consultations with the international and bilateral assistance bodies concerned with a view to harmonizing antimalaria activities in accordance with the revised global strategy;
4. RECOMMENDS
 - (a) that in order to ensure the best prospects of success the Organization continue to aid the countries concerned in drawing up long-term plans for malaria eradication taking into account not only the technical, financial and administrative requirements of the attack and consolidation phases, but also the long-term needs for the implementation of the maintenance phase, and that in preparing budgets it indicate as far as possible, firstly, the sums allocated to the development of the general health services and, secondly, those earmarked for the eradication programme itself;
 - (b) that the Organization continue to provide assistance for the study of the socio-economic impact of malaria and of its eradication and develop a methodology for the socio-economic evaluation of the programme under way;
 - (c) that the Organization stimulate and intensify multi-disciplinary research on malaria involving the biological, epidemiological, economic, social and operational sciences with a view to simplifying and improving methods of malaria eradication as well as programme implementation; and
 - (d) that the governments of the countries with programmes under way revise them in co-operation with the Organization and the other assisting agencies with a view to adapting them to a strategy calculated to give optimum results; and
5. REQUESTS the Director-General to report to the Twenty-third World Health Assembly on the measures taken in pursuance of this revised global strategy of malaria eradication.

STUDY OF THE CRITERIA FOR ASSESSING THE EQUIVALENCE OF MEDICAL DEGREES IN DIFFERENT COUNTRIES, WHA22.42

The twenty-second World Health Assembly,

After having noted the report of the Director-General¹ submitted for its consideration in accordance with the resolution WHA21.35;

Conscious of the importance of continuing the study of the criteria for assessing the equivalence of medical degrees in different countries as well as of supplementary post-graduate diplomas or qualifications;

Noting the conclusions of the consultants' report, particularly in regard to the need for an inter-country agreement on certain basic medical qualifications,

1. CONGRATULATES the Director-General on his report and the various activities undertaken by WHO in order to find a solution to this problem;
2. REAFFIRMS the principles set out in the preambular part of resolution WHA21.35, and more especially the need to encourage the physicians of the developing countries to return to their country;
3. CONSIDERS that a definition for the term "physician" should be worked out using the methods which in the opinion of the Director-General are most appropriate for that purpose;
4. REQUESTS the Director-General, taking into account the relevant recommendations of the Expert Consultation on International Equivalence of Medical Degrees, to collect and make available to members information on medical education practices and standards through co-operation with appropriate existing national and regional organizations, and, where not existent, to assist in the development of appropriate sources; and
5. REQUESTS the Director-General to report to the Executive Board and to the Health Assembly on the progress of work in this field as soon as practicable.

HEALTH ASSISTANCE TO REFUGEES AND DISPLACED PERSONS IN THE MIDDLE EAST, WHA22.43

The Twenty-second World Health Assembly,

Having considered the Director-General's report² of 17 June 1969 on health assistance to refugees and displaced persons, as well as the Annual Report of the Director of Health Department of UNRWA;

¹Document A22/P&B/10.

²Documents A22/P&B/3 and Corr.1.

Considering that the World Health Organization should continue its efforts to provide effective health assistance for refugees and displaced persons in order to ensure their health protection and care;

Recalling the numerous humanitarian resolutions of the United Nations which called upon Israel inter alia to ensure the safety, welfare and security of the inhabitants of the areas where military operations took place and to facilitate the return of those inhabitants who have fled from these areas since the outbreak of hostilities;

Further recalling its resolution WHA21.38 on health assistance to refugees and displaced persons,

1. REAFFIRMS its resolution WHA21.38;
2. DEPLORES the deficiency of the health conditions in the occupied territories in the Middle East;
3. TAKES CAREFUL NOTE of the Director-General's report and of the statement by the distinguished representative of UNRWA;
4. CALLS UPON Member States to exert all efforts towards ensuring the social well-being of displaced persons, refugees and inhabitants of the occupied territories in the Middle East and enabling them to enjoy a normal standard of health; and
5. REQUESTS the Director-General of the World Health Organization to take all the effective measures in his power to safeguard health conditions amongst refugees and displaced persons in the Middle East and to report thereon to the Twenty-third World Health Assembly.

AWARD OF THE DR A.T. SHOUSHA FOUNDATION MEDAL AND PRIZE, WHA22.45

The Twenty-second World Health Assembly,

1. NOTES the reports of the Dr A.T. Shousha Foundation Committee;¹
2. ENDORSES the unanimous proposal of the Committee for the award of the Dr A.T. Shousha Foundation Medal and Prize for 1969;
3. AWARDS the Medal and Prize to the late Dr M.K. Afridi; and
4. PAYS TRIBUTE to the late Dr M.K. Afridi for his most significant contribution to public health in the geographical area in which Dr A.T. Shousha served the World Health Organization.

¹Documents A22/2 and A22/3.

LONG-TERM PLANNING IN THE FIELD OF HEALTH, BIENNIAL PROGRAMMING, AND
IMPROVEMENT OF THE EVALUATION PROCESS, WHA22.53

The Twenty-second World Health Assembly,

Having considered the reports by the Director-General¹ on long-term planning in the field of health and biennial programming and on the improvement and strengthening of the evaluation process, and the recommendations of the Executive Board thereon;

Having considered the proposals of the Director-General for taking the first steps towards a future presentation of a projection of the Organization's programme for a further year; and

Taking account of the long-term results that can be expected of the new programme and budget information system

I

1. NOTES with satisfaction the proposals made for further strengthening the planning and evaluation processes of the World Health Organization; and
2. STRESSES that realistic long-term planning of WHO's programme is dependent in large measure upon methodical health planning, the formulation of a budget based on programmes, and evaluation at the national level, and that the Director-General should continue to respond to requests for assistance in national health planning;
3. BELIEVES that the long-term planning of the Organization's programme can be achieved in successive stages;
4. REITERATES the importance of evaluation in guiding the formulation of programme policies and the planning and execution of the health programmes;
5. REQUESTS the Director-General to take the necessary steps to implement the proposals concerning long-term planning and the improvement and strengthening of the evaluation process; and to ensure dissemination to a member of the Executive Board of such available evaluation data on projects as currently exist and that member may request;
6. REQUESTS the Director-General to evaluate the most appropriate approaches for the integration of health planning studies with the educational programmes in medical schools.
7. REQUESTS the Director-General to continue to collaborate actively in the development of the health sector of the broad international strategy for the Second United Nations Development Decade.

¹Annexes 11 and 12 of Official Records No. 173

8. REQUESTS the Director-General to explore further the feasibility of providing appropriate long-term financial indicators and report thereon to the forty-fifth session of the Executive Board; and
9. REQUESTS the Director-General to ask the Member States to send to WHO their observations and recommendations on questions of long-term planning in the field of health and the establishment of a new general programme of work of WHO for 1972-1976;

II

1. DECIDES that, in principle, the World Health Organization should adopt a system of biennial programming;
2. CONSIDERS that, as a first step, the Director-General should:
 - 2.1 Provide in his annually proposed programme and budget estimates additional information which would, for example, include for 1971;
 - i. an appendix containing a summary by major programme heading for 1969, 1970 and 1971 with a projection for 1972 based on the indication of the governments' priorities for future programmes of WHO assistance as known at the time of the preparation of the programme and budget estimates, and on other factors such as the trends in the requirements for the major programmes of the Organization; and
 - ii. an appendix containing a summary by appropriation section identifying the operating programme by individual regions and headquarters, regional offices, administrative services, etc., for 1969, 1970 and 1971, with a projection of the estimates for 1972;
 - 2.2 Provide in each annual financial report information relating to budget performance, and showing in summary tables similar to those for paragraph 2.1 above:
 - i. budget estimates, both original and revised, and
 - ii. actual obligations incurred;
3. RECOGNIZES the necessity of preserving flexibility to adjust programmes in the light of changes affecting the needs of the Organization and its Members;
4. REQUESTS the Director-General to continue to co-operate in inter-agency consultations on standardization of budget presentation and to keep the Executive Board informed of developments; and, further.

5. REQUESTS the Director-General to study the additional steps which might be taken towards a future more detailed projection of the Organization's programme and budget and to report thereon to the forty-seventh session of the Executive Board.

VOLUNTARY FUND FOR HEALTH PROMOTION, EB44.R17

The Executive Board,

Noting the report of the Director-General on the Voluntary Fund for Health Promotion¹;

Considering the opportunities which the Fund provides to promote health projects over and above the regular budget of the Organization; and

Welcoming the developments which took place during the period under review with regard to voluntary support in the field of health;

1. APPRECIATES the contributions made to the Fund, for which the Director-General has already expressed the thanks of the Organization to the individual donors;
2. EXPRESSES the hope that the voluntary support in the field of health will continue to increase and that all Members in a position to do so will endeavour to make contributions to the Voluntary Fund for Health Promotion;
3. REQUESTS the Director-General to transmit this resolution together with the report, which 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.

¹Document EB44/8.