



PAN AMERICAN HEALTH ORGANIZATION
WORLD HEALTH ORGANIZATION



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RESOLUTIONS AND OTHER ACTIONS OF INTERGOVERNMENTAL ORGANIZATIONS OF INTEREST TO PAHO: 64th WORLD HEALTH ASSEMBLY

1. The 64th World Health Assembly opened in Geneva on 16 May 2011, with representatives and delegates from 193 Member States in attendance. In her address to the Assembly, Dr. Margaret Chan, Director-General, noted the importance of remembering the people and pointed out that all the debates and discussions have meaning only when they improve the health of people and relieve their suffering. In this regard, she highlighted the advances in areas such as tuberculosis, HIV/AIDS, the improvement in child health thanks to vaccines, preparations for pandemic influenza, the progress made in the ministerial conferences preparatory to the High-Level Meeting on Noncommunicable Diseases to be held in the United Nations General Assembly, and the agreements reached by the Commission on Information and Accountability for Women's and Children's Health, among other issues. She also stressed the challenges that we face in an increasingly complex world, such as the financial crisis, climate change, natural disasters, and violence. Furthermore, given the financial crisis and the challenges that continue to arise in the field of health, she noted that the World Health Organization (WHO) has launched an administrative, financial, and management reform process and invited everyone to contribute to the effort.

2. The keynote speakers were Her Excellency Sheikh Hasina, Prime Minister of the Government of Bangladesh, who pointed to great strides made in her country, especially with respect to maternal mortality, which has fallen by 66% in 10 years, and Bill Gates, Co-Chair of the Bill and Melinda Gates Foundation, who thanked WHO and its Member States for their continuing leadership, recognized their work, and called for making this the Decade of Vaccines. He underscored that with greater investment in vaccines and immunization, 10 million deaths can be prevented by the year 2020 and called on all parties to joint efforts toward this end, in the awareness that global health is the cornerstone of global prosperity.

3. As first Vice-President of the 63rd World Health Assembly, the Minister of Health of El Salvador, Dr. María Isabel Rodríguez, opened the Assembly and addressed it in the name of the countries of the Americas. She emphasized the importance of the Regional High-level Consultation of the Americas on Noncommunicable Diseases and Obesity, held preparatory to the High-level Meeting of the United Nations General Assembly, where the impact of these diseases on our countries and the world was underscored. She also mentioned the Regional Consultation on progress toward universal access to HIV prevention, treatment, care and support in the Region and noted the progress made in this regard, urging governments, multilateral organizations, and international donors not to cut back on their cooperation, as it is essential for preventing setbacks in these areas. She also called on the Assembly to approve the launch of World Vaccination Week in 2012.

4. Finally, she acknowledged the work of the Organization and its impact on the health of nations. Notwithstanding, she noted that significant changes have been taking place in international health: on the one hand, the progress made in the general call to align international cooperation with country priorities (Paris Declaration of 2005), and on the other, the scattering and fragmentation of governance in international health, with an increasing number of actors with their own priorities, and the waning of multilateralism, which is undermining national capacity for governance and the management of cooperation resources. Dr. Rodríguez issued a call for greater unity of thought and action, especially in the face of the global financial crisis, and a return to the Alma-Ata principles of equity, solidarity, and social justice. The fight for unity, mutual understanding, and solidarity among all the peoples of the world must be an integral part of the strengthening of multilateral organizations.

5. During the first plenary session, the World Health Assembly endorsed the candidacy of Dr. Christos Patsalides, Minister of Health of Cyprus, and elected him President of the 64th World Health Assembly. The five Vice-Presidents were then elected: the delegates of the Democratic People's Republic of Korea, Iran, Nigeria, Philippines, and Trinidad and Tobago. The Assembly then took up the following agenda matters:

- a) Establishment of the Committee on Credentials, comprised of nine Member States, among them the delegate of Costa Rica for the Region of the Americas.
- b) The Agenda of the 64th World Health Assembly, which contained 20 items, the majority of them on health policy matters and the rest, on administrative, budgetary, and institutional matters. As in previous Assemblies, these matters were addressed in the committees and the plenary sessions. The World Health Assembly adopted 28 resolutions. The full text of the resolutions, along with other documents from the World Health Assembly, can be accessed on the WHO website at: http://apps.who.int/gb/e/e_wha64.html.

- c) The majority of these resolutions are especially relevant to both the Member States of the Region of the Americas and the Regional Office. Of particular interest are those concerned with the strengthening of nursing and midwifery; sustainable health financing structures and universal coverage; drinking water, sanitation, and health; mechanisms for cholera control and prevention; the High-Level Meeting on Noncommunicable Diseases; and the Millennium Development Goals, among others.
6. Annex I provides a summary of the respective resolutions.

Other Matters: Executive Board

7. The 129th Session of the Executive Board was held on 25 May. The Region of the Americas was represented by the delegates of Barbados, Canada, Chile, Ecuador, Mexico, and the United States of America.

8. The agenda of the 129th Session of the Executive Board (EB) included the report on the work plan and the report on the establishment of the Consultative Expert Working Group on Research and Development: Financing and Coordination, the item “The Future of Financing for WHO, “ in addition to administrative, budgetary, and financial matters; staffing matters and other matters for information.

9. The Board adopted Decision EB129(8): WHO Reform for a Healthy Future, in which it decides to establish a transparent consultative process on the WHO reforms and requests the Director-General to prepare, by the end of June 2011, three concept papers on: governance of WHO, independent evaluation of WHO, and the World Health Forum. In reference to the Regional Committees, it requests that, based on the updated concept papers, they engage in strategic discussions regarding the WHO reform process. The Board decides to hold a special meeting in November 2011 to discuss outcomes of the consultative process and draft proposals prepared by the Secretariat or proposed by Member States. It also urges Member States to support and actively engage in the reform process.

10. Finally, the Board took note of the reports submitted and approved the date and place of the 65th World Health Assembly, among other matters for information. It was agreed that the 65th World Health Assembly would be held at the Palais des Nations in Geneva from Monday, 21 May 2012 to no later than Saturday, 26 May 2012. The Board decided, moreover, that its 130th meeting would begin on Monday, 16 January 2012, at WHO Headquarters in Geneva and conclude no later than Monday, 23 January 2012; that the 15th meeting of the Executive Board’s Committee on Program, Budget, and Administration would be held on Thursday, 12 and Friday, 13 January 2012, at WHO headquarters and that its 16th meeting would be held on Thursday, 17 and Friday, 18 May 2012, at WHO headquarters in Geneva.

11. The full text of these reports, as well as other related documentation, can be accessed on the WHO website at: http://apps.who.int/gb/e/e_wha64.html.

Action by the Executive Committee

12. The Executive Committee is requested to take note of these resolutions and consider their implications for the Region of the Americas.

Annex

TECHNICAL AND HEALTH POLICY MATTERS

| Resolution | Items (and reference documents) | Summary of resolutions adopted by the 64th World Health Assembly | PAHO resolutions and documents |
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| WHA64.1 | <p>Implementation of the International Health Regulations (2005)</p> <p>EB128/5</p> <p>EB128/5 Add.1</p> | <p>Having considered the final report of the Review Committee on the Functioning of the International Health Regulations (2005) in relation to Pandemic (H1N1) 2009, through this resolution the World Health Assembly (WHA) urges Member States: to support the implementation of the recommendations contained in the final report of the Review Committee. It requests the Director-General to present an update to the 66th World Health Assembly (WHA66), through the Executive Board, on the progress made in taking forward the recommendations of the Review Committee, and to provide technical support to Member States in implementing the recommendations of the Review Committee on the Functioning of the International Health Regulations (2005) in relation to Pandemic (H1N1) 2009.</p> | <ul style="list-style-type: none"> • International Health Regulations, CD43.R13 • Progress Report on Technical Matters: International Health Regulations (<i>includes the report on the [H1N1] Pandemic 2009</i>) CD49/INF/2, Rev. 1 • Progress Report on Technical Matters: Implementation of the International Health Regulations (2005), CD50/INF/6 • International Health Security: Implementing the International Health Regulations (2005), CSP27.R13 |
| WHA64.2 | <p>The Future of Financing for WHO</p> <p>EB128/21</p> <p>EB128/INF.DOC./2</p> <p>EB128/INF.DOC./3</p> <p>EB129(8)</p> | <p>The WHA, having considered the report of the Director-General entitled “World Health Organization: Reforms for a Healthy Future,” endorses the agenda for reform as set out in the Director-General’s report and urges Member States to support the implementation of the program.</p> | |
| WHA64.5 | <p>Pandemic influenza preparedness: sharing of influenza viruses and access to vaccines and other benefits</p> <p>EB128/4</p> | <p>The WHA, having considered the report of the Open-Ended Working Group of Member States Pandemic Influenza Preparedness: sharing of influenza viruses and access to vaccines and other benefits, adopts, in accordance with Article 23 of the WHO Constitution, the Pandemic Influenza Preparedness Framework, and urges Member States to implement this framework and consider providing adequate resources to this end. It requests the Director-General, in consultation with the Advisory Group, to implement the</p> | <ul style="list-style-type: none"> • Avian Influenza and Influenza Pandemic Preparedness, CD48/INF/3 • Progress Report on Technical Matters: International Health Regulations (<i>includes the report on the [H1N1] Pandemic 2009</i>) CD49/INF/2, Rev. 1 • Progress Report on Technical Matters: |

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| | | framework; monitor and review its operation, and report, on a biennial basis, on progress to the WHA. | <p>Implementation of the International Health Regulations (2005), CD50/INF/6</p> <ul style="list-style-type: none"> Avian Flu and Pandemic Influenza: Progress Report, CSP27/8 |
| WHA64.6 | <p>Health and workforce strengthening</p> <p>EB128.R9</p> | <p>Through this resolution the WHA urges Member States to implement the voluntary WHO Global Code of Practice on the International Recruitment of Health Personnel in order that both the source and destination countries may derive benefits from the international migration of health personnel; to prioritize spending on health to scale up and retain the health workforce; to consider developing or maintaining a national health workforce plan as an integral part of a validated national health plan; to participate in the ongoing work on the WHO policy guidelines on transformative scale-up of health professional education and strengthen their training institutions; to develop strategies and policies to increase the number of health agents in remote and rural areas and improve conditions to achieve their retention; and to strengthen health workforce information systems to improve action in this area.</p> | <ul style="list-style-type: none"> Development and Strengthening of Human Resources Management in the Health Sector, CD43.R6 Observatory of Human Resources in Health, CD45.R9 Human Resources for Health: Critical Challenges for the Region of the Americas: Roundtables, CD47/19 Strategy for Health Personnel Competency Development in Primary Health Care-based Health Systems, CD50.R7 Regional Goals for Human Resources for Health 2007-2015, CSP27.R7 |
| WHA64.7 | <p>Strengthening nursing and midwifery</p> <p>EB129.R11</p> | <p>Through this resolution, the WHA urges Member States to develop action plans for the development of nursing and midwifery as an integral part of national or subnational plans and to review them to determine if they respond to population health needs and health system priorities; to participate in the ongoing work of WHO's initiatives on scaling up of transformative education and training in nursing and midwifery in order to increase workforce numbers and skills; to collaborate in the strengthening of national or subnational legislation and regulatory processes that govern those professions; to strengthen the dataset on nurses and midwives as an integral part of national and subnational health workforce information</p> | <ul style="list-style-type: none"> Development and Strengthening of Human Resources Management in the Health Sector, CD43.R6 Observatory of Human Resources in Health, CD45.R9 Human Resources for Health: Critical Challenges for the Region of the Americas: Roundtables, CD47/19 Strategy for Health Personnel Competency |

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| | | <p>systems and using this information for evidence-based policy decisions; to engage these actors in the development of health system policy and programming; to implement strategies for enhancement of interprofessional education and collaborative practice including community health nursing services as part of people-centered care; to include these resources in the development and planning of the human resource programs; to promote incentives for the recruitment and retention of these human resources; to implement the WHO Global Code of Practice on the International Recruitment of Health Personnel, given the national impact of the loss of trained nursing staff.</p> | <p>Development in Primary Health Care-based Health Systems, CD50.R7</p> <ul style="list-style-type: none"> Regional Goals for Human Resources for Health 2007-2015, CSP27.R7 |
| <p>WHA64.8</p> | <p>Strengthening national policy dialogue to build more robust health policies, strategies, and plans</p> <p>EB128.R12</p> | <p>The WHA, having considered the report “Health system strengthening: Improving support to policy dialogue around national policies, strategies, and plans,” urges Member States to show leadership in the process establishing robust national or subnational health strategies, basing that process on broad and continuous consultation and engagement of all relevant stakeholders; to ensure that national or subnational policies, strategies, and plans are based on the overarching goals of universal coverage, people-centered primary care, and health in all policies, as well as on a comprehensive, balanced, and evidence-based assessment of the country’s health and its health system challenges; and to ensure they are integrated with the country’s development agenda; to strengthen their institutional capacity, as appropriate, in harmonizing and aligning donor programs with such policies.</p> | <ul style="list-style-type: none"> Health Systems Performance, Assessment, CD43/18 Primary Health Care in the Americas: Lessons Learned over 25 Years and Future Challenges, CD44.R6 Regional Declaration on the New Orientations for Primary Health Care, CD46/13 Panel on Primary Health Care: Addressing Health Determinants and Strengthening Health Systems. CD48/14, Rev. 1, CD48/14, Add. I, CD48/14, Add. II Integrated Health Services Delivery Networks based on Primary Health Care, CD49.R22 |
| <p>WHA64.9</p> | <p>Sustainable health financing structures and universal coverage</p> <p>EB128.R8</p> | <p>Through this resolution, the WHA urges Member States to ensure that health-financing systems evolve so as to avoid significant direct payments and include a method for prepayment of financial contributions for health care and services, as well as a mechanism to pool risks among the population in order to avoid the</p> | <ul style="list-style-type: none"> Primary Health Care in the Americas: Lessons Learned over 25 Years and Future Challenges, CD44.R6 Panel on Primary Health Care: Addressing Health Determinants and |

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| | | <p>impoverishment of individuals as a result of seeking the care needed; to aim for affordable universal coverage and access for all citizens on the basis of equity and solidarity, so as to provide an adequate scope of health care and services and level of costs covered, as well as comprehensive and affordable preventive services, through the strengthening of equitable and sustainable financial resource budgeting; to continue to invest in and strengthen the health-delivery systems and provide adequate human resources for health and health information systems; to ensure that external funds do not distort the attention given to health priorities in the country; to plan the transition of their health systems to universal coverage, while continuing to safeguard the quality of services and meet the needs of the population and, in particular, to attain internationally agreed development goals, including the, Millennium Development Goals; to take advantage, where appropriate, of opportunities that exist for collaboration between public and private providers and health-financing agencies, under strong overall government-inclusive leadership; to promote the efficiency, transparency, and accountability of health-financing governing systems; and to ensure that overall resource allocation strikes an appropriate balance between the different health priorities.</p> | <p>Strengthening Health Systems. CD48/14, Rev. 1, CD48/14, Add. I</p> <ul style="list-style-type: none"> • Integrated Health Services Delivery Networks based on Primary Health Care, CD49.R22 • Strategy for Health Personnel Competency Development in Primary Health Care-based Health Systems, CD50.R7 |
| <p>WHA64.10</p> | <p>Strengthening national health emergency and disaster management capacities and resilience of health systems</p> <p>EB128.R10</p> | <p>This resolution urges Member States to strengthen and integrate health-emergency and risk-management programs into national and subnational health plans; to facilitate access by concerned government and other related agencies to information on types and quantities of hazardous materials stored, used, or transported, in order to support effective health emergency and disaster risk management; to develop programs on safe and prepared hospitals and ensure that all health facilities are prepared to respond to internal and external emergencies; to promote cooperation and collaboration, as well as interregional</p> | <ul style="list-style-type: none"> • Report on Reducing the Impact of Disasters on Health Facilities, CD45/27 • Progress Report on National and Regional Health Disaster Preparedness and Response, CD47/INF/4 • Roundtable on Safe Hospitals, CD49/22 • Report on the Roundtable on Safe Hospitals: A Goal within Our Reach, CD49/22, Add. I |

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| | | cooperation with WHO, in these areas; and to strengthen the capacities of the local health workforce in emergency and disaster management. | <ul style="list-style-type: none"> • Plan of Action on Safe Hospitals, CD50.R15 • Safe Hospitals: Regional Initiative on Disaster-resilient Health Facilities, CSP27.R14 |
| WHA64.11 | <p>Preparations for the High-level Meeting of the United Nations General Assembly on the Prevention and Control of Noncommunicable diseases, following the Moscow Conference</p> <p>EB128/17</p> | <p>The WHA endorses the Moscow Declaration as a key input for the preparations for the high-level meeting and urges Member States to continue to support the preparations for the meeting in the different areas; to include where feasible, situation analysis of noncommunicable diseases and their risk factors, as well as an assessment of national capacity and health system response to these diseases; to be represented at the level of Heads of State and Government at the high-level meeting; to call for action through a concise action-oriented outcome document; and to include, insofar as possible, in their delegations parliamentarians and representatives of civil society.</p> | <ul style="list-style-type: none"> • Cardiovascular Disease, especially Hypertension, CD42.R9 • Framework Convention on Tobacco Control, CD43.R12 • Disability: Prevention and Rehabilitation in the Context of the Right to the Enjoyment of the Highest Possible Standard of Physical and Mental Health and Other Related Rights, CD47.R1 • Regional Strategy and Plan of Action on an Integrated Approach to the Prevention and Control of Chronic Diseases, including Diet and Physical Activity, CD47.R9 • Public Health Response to Chronic Diseases, CSP26.R15 • Population-based and Individual Approaches to the Prevention and Management of Diabetes and Obesity, CD48.R9 |
| WHA64.12 | <p>WHO's role in the follow-up to the United Nations High-level Plenary Meeting of the General Assembly on the Millennium Development Goals (New York, September 2010)</p> <p>EB128.R1</p> | <p>The WHA, expressing concern at the slow pace of progress in achieving Millennium Development Goals 4 and 5 on reducing child mortality and improving maternal health and acknowledging that much more needs to be done in achieving the Millennium Development Goals, as progress has been uneven among regions and within countries, despite the fact that developing countries have made significant efforts, urges Member States to implement</p> | <ul style="list-style-type: none"> • Millennium Development Goals and Health Targets, CD45.R3 • Malaria and the Internationally Agreed-upon Development Goals, including those Contained in the Millennium Declaration, CD46.R13 • Strategic Alliance for |

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| | | <p>the recommendations formulated by the Commission on the Information and Accountability for Women's and Children's Health to improve the accountability of results and resources; it requests the Executive Board to review progress on the implementation of the recommendations of the Commission starting at its 130th session in January 2012.</p> | <p>Attainment of the Millennium Development Goals, CD47/INF/2</p> <ul style="list-style-type: none"> • Faces, Voices, and Places: A Community-based Response to the Millennium Development Goals, CSP27/14 • Panel Discussion on the Pan American Alliance for Nutrition and Development for the Achievement of the Millennium Development Goals, CD49/23, Rev. 1 • Report of the Panel on the Pan American Alliance for Nutrition and Development for the Achievement of the Millennium Development Goals, CD49/23, Add. I |
| WHA64.13 | Working towards the reduction of perinatal and neonatal mortality | <p>The WHA, aware that meeting the targets of Millennium Development Goals 4 and 5 will require intense health and intersectoral efforts with a high level of political commitment, urges Member States to ensure that health authorities in countries with high perinatal and neonatal mortality rates use their stewardship and leadership to involve other institutions and sectors to strengthen capacity to address the problem; to further promote political commitment for effective implementation of the existing national, regional, and/or global with the application of evidence-based strategies and interventions, including the Baby-Friendly Hospital Initiative, to improve perinatal and neonatal health and increase access to maternal, newborn, and child health services; to advance perinatal and neonatal care as a priority and develop, as appropriate, plans and programs for universal access to cost-effective interventions; and to strengthen the surveillance system of perinatal and neonatal mortality.</p> | <ul style="list-style-type: none"> • Vaccines and Immunization, CD42.R8 • Child Health, CD48.R12 • Vaccines and Immunization, CD43.R1 • Sustaining Immunization Programs - Elimination of Rubella and Congenital Rubella Syndrome (CRS), CD44.R1 • The Contribution of Integrated Management of Childhood Illness (IMCI) to the Attainment of the Millennium Development Goals, CD44/12 • Millennium Development Goals and Health Targets, CD45.R3 • Regional Strategy for Sustaining National Immunization Programs in the Americas, CD47.R10 • Neonatal Health in the Context of Maternal, Newborn, and Child |

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| | | | <p>Health for the Attainment of the Development Goals of the United Nations Millennium Declaration, CD47.R19</p> <ul style="list-style-type: none"> • Regional Strategy and Plan of Action for Neonatal Health within the Continuum of Maternal, Newborn, and Child Care, CD48.R4, Rev. 1 • Vaccines and Immunization, CSP26.R9 • Integrated Management of Childhood Illness (IMCI), CSP26.R10 • Regional Strategy for Maternal Mortality and Morbidity Reduction, CSP26.R13 |
| <p>WHA64.14</p> | <p>Global strategy of the health sector for HIV/AIDS, 2011-2015</p> <p>EB128/10</p> | <p>The WHA endorses the global health sector strategy on HIV/AIDS 2011-2015 and affirms the vision, aim, and strategic directions of the global health sector strategy on HIV/AIDS 2011-2015, including the recommended actions at country and global levels, as well as the contributions to be made by WHO. It welcomes the alignment of the global health sector strategy on HIV/AIDS, 2011-2015 with other strategies addressing related public health issues, including the UNAIDS strategy for 2011-2015 and urges Member States to adopt the global health sector strategy on HIV/AIDS, 2011-2015; and implement the strategy according to the four strategic directions to guide national responses as described in the strategy.</p> | <ul style="list-style-type: none"> • Acquired Immunodeficiency Syndrome (AIDS) in the Americas, CD42.R13 • Acquired Immunodeficiency Syndrome (AIDS) in the Americas, CD43.R16 • Scaling up Treatment within a Comprehensive Response to HIV/AIDS, CD45.R10 • Regional Strategy for Tuberculosis Control for 2005-2015, CD46.R12 • Regional Strategic Plan for HIV/AIDS/STI, 2006-2015, of the Pan American Health Organization, CD46.R15 • Acquired Immunodeficiency Syndrome (AIDS) in the Americas, CSP26.R12 • Strategy and Plan of Action for the Elimination of |

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| | | | Mother-to-Child Transmission of HIV and Congenital Syphilis, CD50.R12 |
| WHA64.15 | Cholera: mechanism for control and prevention EB128.R7 | Through this resolution, the WHA urges Member States to consider health, hygiene, water, sanitation, and environmental issues as integral and interrelated parts of development policies and plans and to allocate resources and undertake action to prevent or diminish the risk of cholera epidemics, giving due attention to the situation and needs of the population groups most at risk; to strengthen surveillance and reporting of cholera in accordance with the International Health Regulations (2005), and effectively integrate surveillance of cholera into overall surveillance systems; to work towards mobilizing sufficient technical and financial resources for coordinated and multisectoral measures to fight cholera, as well as other diarrheal diseases; to scale up advocacy measures in view of the intersectoral nature of the disease; to refrain from imposing on affected or at-risk countries any trade or travel restrictions that cannot be justified on the grounds of public health concerns, in line with article 43 of the International Health Regulations (2005); to undertake planning and give consideration to the administration of administering vaccines, where appropriate, in conjunction with other recommended prevention and control methods, and not as a substitute for such methods. | <ul style="list-style-type: none"> • XII Inter-American Meeting, at the Ministerial Level, on Health and Agriculture, CD43.R5 • Health, Drinking Water, and Sanitation in Sustainable Human Development, CD43.R15 • 13th Inter-American Meeting, at the Ministerial Level, on Health and Agriculture (RIMSA 13), CD44.R7 • Report on the 14th Inter-American Meeting, at the Ministerial Level, on Health and Agriculture, CD46/14 • 15th Inter-American Meeting, at the Ministerial Level, on Health and Agriculture (RIMSA): Agriculture and Health: Alliance for Equity and Rural Development in the Americas, CD48.R13 • Food Protection, CD42.R3 |
| WHA64.17 | Malaria EB128/14 | The WHA urges Member States: to keep the problem of malaria high on the political and development agendas, to advocate strongly for adequate and predictable long-term financing and to sustain national financial commitments for the effort in order to accelerate implementation of the policies and strategies recommended by WHO and achieve the targets set in the MDGs and by the Health Assembly in resolution WHA58.2; to review malaria programs as a step in developing strategic and | <ul style="list-style-type: none"> • <i>Roll Back Malaria</i> in the Region of the Americas, CD42.R15 • Malaria and the Internationally Agreed-upon Development Goals, including Those Contained in the Millennium Declaration, CD46.R13 • Integrated Vector Management: A Comprehensive Response |

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| | | <p>operational plans for achieving and maintaining universal access and coverage of malaria interventions; to sustain the advances and take immediate action to combat the major threats; to use the expansion of the interventions for malaria prevention and control as an entry point for strengthening health systems; to comply with existing commitments and international regulations on the use of pesticides, in particular the Stockholm Convention on Persistent Organic Pollutants (Stockholm, 2004); to increase funding for research and development in malaria prevention, control, and treatment; to promote scaling up of Artemisinin-based, Combination Therapy, where appropriate, with a system to ensure a high level of adherence to treatment.</p> | <p>to Vector-borne diseases, CD48.R8</p> <ul style="list-style-type: none"> • Malaria in the Americas, CSP27.R11 |
| <p>WHA64.24</p> | <p>Drinking-water, sanitation, and health</p> <p>EB128.R7 and EB128.R6</p> | <p>Through this resolution, the WHA urges Member States: to develop and strengthen, with all stakeholders, national public health strategies, so that they highlight the importance of safe drinking-water, sanitation, and hygiene as the basis for primary prevention, based on an integrated and interministerial approach; to promote the participation of all the sectors involved, promoting strategies and good practices that contribute to the achievement of Millennium Development Goals and the progressive realization of the human right to water and sanitation; to strengthen the intersectoral policy frameworks and institutional mechanisms for integrated management of risks and health hazards and to mobilize their efforts to prioritize and implement the reduction of disparities between urban, periurban, and rural areas as regards access to drinking-water at home and as well as from other improved sources, improved sanitation facilities, and hygiene; to offer appropriate facilities for access to drinking-water, sanitation, and hand washing with soap in health-care establishments, schools, and other public buildings and settings, as well as advocacy and training tools in this area; to</p> | <ul style="list-style-type: none"> • Health, Drinking Water, and Sanitation in Sustainable Human Development, CD43.R15 • Meeting of the Ministers of Health and the Environment of the Americas, CSP26.R17 |

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| | | <p>ensure the water and sanitation-related monitoring systems and early warning tools to prevent water- and sanitation-related diseases; to develop emergency preparedness and action plans, particularly in the case of natural disasters and humanitarian emergencies; to strengthen, as necessary, the establishment, implementation, and quality control of water safety plans and contribute to the development of sanitation safety plans, in collaboration with the WHO Collaborating Centers, WHO-hosted networks, and associations in official relations with WHO.</p> | |
| <p>WHA64.27</p> | <p>Child injury prevention EB128.R15</p> | <p>The WHA, recognizing that child injuries are a major threat to child health and are a neglected public health problem with significant consequences in terms of mortality, morbidity, quality of life and social and economic costs, and that they will hamper attainment of the Millennium Development Goals, urges Member States: to prioritize this issue and ensure that intersectoral coordination mechanisms to prevent child injury are established or strengthened; to strengthen the fulfillment of their obligations under the Convention on the Rights of the Child (1989) to respect, protect, and fulfill the rights of children to the highest attainable standard of health and to take all appropriate legislative, administrative, social, and educational measures to protect children from injury; to ensure funding mechanisms for relevant programs; to implement, as appropriate, the recommendations of the <i>WHO/UNICEF World Report on Child Injury Prevention</i>; to integrate child injury prevention in national child development programs and in other relevant programs; to ensure that national data collection across all relevant sectors or surveillance systems quantifies the problem and costs of child injury and to assure that the resources available are commensurate with the extent of the problem; to develop and implement a</p> | <ul style="list-style-type: none"> • Preventing Violence and Injuries and Promoting Safety: A Call for Action in the Region, CD48.R11 |

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| | | <p>multisectoral policy and plan of action, where necessary; to strengthen, if necessary, the existing laws and regulations in this area; to strengthen emergency and rehabilitation services; to define priorities for research, taking into consideration the WHO/UNICEF <i>World Report</i> on this issue; and to raise awareness and health literacy among all members of society about risk factors for child injury.</p> | |
| <p>WHA64.28</p> | <p>Youth and health risks</p> | <p>Through this resolution, the WHA reaffirms WHO's strategies that address the major health facing youth and urges Member States, in accordance with their national laws and regulations, to accelerate action and develop policies and plans to address the main determinants of health affecting young people.</p> | <ul style="list-style-type: none"> • Regional Strategy for Improving Adolescent and Youth Health, CD48.R5 • Plan of Action on Adolescent and Youth Health, CD49.R14 |

ADMINISTRATIVE AND BUDGETARY ITEMS

| Resolution | Items (and reference documents) | Summary of resolutions adopted by the 64th World Health Assembly | PAHO resolutions and documents |
|--------------------------|---|--|--------------------------------|
| WHA64.3 | Appropriation resolution for the financial period 2012-2013 | <p>The total effective budget under all sources of funds, that is, assessed and voluntary contributions of US\$3,958,979,000,¹ presented in three segments: base programs, special programs and collaboration agreements, and outbreak and crisis response. The appropriations for the financial period 2012-2013 will be in the amount of \$1,038,840,000, financed by net assessments on Members of \$928,840,000, estimated Member States' non-assessed estimated income of \$15,000,000, if available, and transfer to Tax Equalization Fund of \$95,000,000, and to assign the appropriations to different health priorities.</p> <p>Finally, it decides that the Working Capital Fund shall be maintained at its existing level of \$31,000,000, and it recognizes that the voluntary contributions required to meet the portion of the effective working budget not financed through net assessments on Members are \$3,015,139,000.</p> | |
| WHA64.19 | Status of collection of assessed contributions, including Member States in arrears in the payment of their contributions to an extent that would justify invoking Article 7 of the Constitution | The fifth report of the Program, Budget, and Administration Committee of the Executive Board to the WHA64 on the Status of the collection of assessed contributions included the Member States in arrears in the payment of their contributions to an extent that would justify invoking Article 7 of the Constitution; they were the Central African Republic, Comoros, Dominica, Guinea-Bissau, Somalia, and Tajikistan and it was decided that their voting rights would be suspended as of the opening of WHA64. | |
| WHA64.21 | Scale of assessments for 2012-2013 | The scale of assessments of Members and Associate Members for the biennium 2012-2013 is adopted. | |

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¹ Unless otherwise indicated, all currency figures in this document are expressed in United States dollars.