



PAN AMERICAN HEALTH ORGANIZATION
WORLD HEALTH ORGANIZATION



51st DIRECTING COUNCIL

63rd SESSION OF THE REGIONAL COMMITTEE

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CD51.R14 (Eng.)
ORIGINAL: ENGLISH

RESOLUTION

CD51.R14

PLAN OF ACTION TO REDUCE THE HARMFUL USE OF ALCOHOL

THE 51st DIRECTING COUNCIL,

Having reviewed the *Plan of Action to Reduce the Harmful Use of Alcohol* (Document CD51/8, Rev.1);

Recognizing the burden of morbidity, mortality, and disability associated with the harmful use of alcohol in the world and in the Region of the Americas, as well as the existing gap in treatment and care for persons affected by harmful alcohol consumption;

Considering the context and framework for action offered by the Health Agenda for the Americas, the PAHO Strategic Plan 2008–2012, and the World Health Assembly's Resolution WHA63.13 (2010) on a global strategy to reduce the harmful use of alcohol, which reflect the importance of the issue of harmful alcohol use and establish objectives for addressing it;

Observing that the *WHO Global Strategy to Reduce the Harmful Use of Alcohol* sets out the principal areas of work to be addressed and identifies areas for technical cooperation to address the varying needs of Member States with regard to harmful alcohol consumption;

Considering the recommendations from the WHO meeting of national counterparts for the implementation of the *Global Strategy to Reduce the Harmful Use of Alcohol* and the consultation meeting on the draft regional plan of action;

Recognizing the need for regional coordination and leadership in support of national efforts to reduce the harmful use of alcohol,

RESOLVES:

1. To approve the Plan of Action to Reduce the Harmful Use of Alcohol.
2. To implement the *WHO Global Strategy to Reduce the Harmful Use of Alcohol* through the Plan of Action, within the context of each country's specific conditions, in order to respond appropriately to current and future needs in relation to underage and harmful use of alcohol.
3. To urge Member States to:
 - (a) identify underage and harmful alcohol consumption as a public health priority and develop plans and/or introduce measures to reduce its public health impact;
 - (b) recognize that harmful alcohol consumption occurs among non-dependent and dependent individuals alike, and that reducing alcohol-related problems requires a mix of population-wide policies and targeted interventions, as well as access to quality health services;
 - (c) promote public policies that protect and preserve public health interests;
 - (d) promote policies and interventions that are evidence-based, equitable, and supported by sustainable implementation mechanisms involving different stakeholders;
 - (e) promote prevention programs that educate children, young people, and those who choose not to drink alcohol about how to resist social pressure to drink, protect them from such pressure, and support their choice not to drink;
 - (f) ensure that effective prevention, treatment, and care services are available, accessible, and affordable to those affected, including families, by the harmful use of alcohol;
 - (g) allocate financial, technical, and human resources towards the implementation of national activities outlined in the Plan of Action.

4. To request the Director to:
 - (a) monitor and evaluate the implementation of the Plan of Action at year five and at the end of the implementation period;
 - (b) support Member States in the implementation of national and subnational plans and/or interventions to reduce the harmful use of alcohol, within the framework of their public health and social policies, taking into account the *WHO Global Strategy to Reduce the Harmful Use of Alcohol*;
 - (c) collaborate in the assessment of alcohol policies and services in the national context of countries, with a view to ensuring that appropriate, evidence-based, corrective measures are adopted;
 - (d) facilitate the dissemination of information and the sharing of positive, innovative experiences, and promote technical cooperation among Member States;
 - (e) promote partnerships with international organizations and WHO, governmental and nongovernmental organizations, and civil society, taking into consideration any conflicts of interest that some nongovernmental organizations may have;
 - (f) establish a dialogue with the private sector on how it can best contribute to the reduction of alcohol-related harm, with appropriate consideration of the commercial interests involved and their potential conflict with public health objectives.

(Eighth meeting, 29 September 2011)