The following resolutions of the World Health Assembly are submitted to the Committee:

1. **Measures Taken in Pursuance of the Revised Global Strategy of Malaria Eradication (WHA23.12)**

   Attention is drawn specifically to operative paragraphs three, four, five and six.

2. **Training of National Health Personnel (WHA23.35)**

   In order to permit the Director-General to present to the World Health Assembly a report on any concrete measure that the World Health Organization might appropriately take to assist further the training of national health personnel of all levels, including the methodology employed in such training, it is important that Member countries formulate a minimum standard of curriculum for training programmes of health personnel, taking into consideration the needs of the Region.

3. **General Programme of Work Covering a Specific Period (WHA23.59)**

   Attention is drawn to the fact that the World Health Assembly has extended by one year the fourth general programme of work of the World Health Organization and that the fifth general programme of work of the Organization will cover the period from 1973-1977, inclusive. This subject will be discussed under item 13 of the agenda.

/4. Real Estate ...
4. Real Estate Fund (WHA23.14)

5. Health Consequences of Smoking (WHA23.32)

6. Community Water Supply (WHA23.36)
RESOLUTION OF THE WORLD HEALTH ASSEMBLY

TWENTY-THIRD WORLD HEALTH ASSEMBLY

MEASURES TAKEN IN PURSUANCE OF THE REVISED
GLOBAL STRATEGY OF MALARIA ERADICATION

The Twenty-third World Health Assembly,

Having considered the report of the Director-General on measures taken in pursuance of the revised global strategy of malaria eradication adopted by the Twenty-second World Health Assembly in resolution WHA22.39;

Recognizing the importance of close collaboration between governments and the assisting agencies in reviewing malaria eradication programmes to determine the future course of action best suited to the specific requirements of each country;

Realizing that malaria constitutes a major public health problem in many tropical countries where eradication is at present impracticable, and the urgent need to reduce its ravages and to facilitate the promotion of socio-economic development;

Realizing the importance of the research for finding new weapons and for evolving rational methods of controlling malaria, as well as for improving diagnostic and treatment techniques and methods of vector control applicable to various specific epidemiological situations; and

Realizing further that safe, effective and inexpensive insecticides are essential for the effective control of malaria,

1. NOTES with satisfaction the action taken and the progress made in the implementation of the resolution WHA22.39 on the revised strategy of malaria eradication;

2. APPRECIATES the active collaboration of both multilateral and bilateral agencies in assisting governments in the reviews of their malaria eradication programmes;

1 Document A23/P&B/1.
3. EMPHASIZES the need to initiate malaria control schemes within the general health services where eradication is at present impracticable and to increase the assistance of WHO and other international agencies to such schemes;

4. REITERATES the need for intensifying both fundamental and applied research for the furtherance of the objective of malaria eradication;

5. STRESSES the need for more comprehensive training of malariologists in order to implement the new strategy of malaria eradication in the context of the socio-economic development plans of countries;

6. URGES the countries manufacturing insecticides to continue to make available to the developing countries insecticides for malaria control; and

7. REQUESTS the Director-General to continue to keep the World Health Assembly and the Executive Board informed of the development of the programme following the revised strategy of malaria eradication.

Twelfth plenary meeting, 16 May 1970
A23/VR/12
RESOLUTION OF THE WORLD HEALTH ASSEMBLY

TWENTY-THIRD WORLD HEALTH ASSEMBLY

TRAINING OF NATIONAL HEALTH PERSONNEL

The Twenty-third World Health Assembly,

Having considered resolution EB45.R29 of the forty-fifth session of the Executive Board, pursuant to resolution WHA21.20 adopted by the Twenty-first World Health Assembly,

1. THANKS the Regional Committees which have carried out the analysis of the problem of training professional and auxiliary health personnel in their own regions and urges the remaining Regional Committees to undertake this study at their next sessions;

2. REQUESTS the Director-General to prepare a report based on these regional analyses for the consideration of the Executive Board;

3. REQUESTS the Executive Board to carry out a general evaluation of the experience accumulated by the World Health Organization, taking into account the conclusions reached by the Regional Committees on the training of professional and auxiliary health personnel; and

4. REQUESTS the Director-General

(a) to present to the World Health Assembly, in the light of the discussions of the Executive Board, a report on any concrete measures that the World Health Organization might appropriately take to assist further the training of national health personnel of all levels, including the methodology employed in such training;

(b) to urge Members of each region to formulate a minimum standard of curriculum for training programmes of health personnel taking into consideration the needs of the Region.

Fourteenth plenary meeting, 19 May 1970
A23/VR/14
RESOLUTION OF THE WORLD HEALTH ASSEMBLY

TWENTY-THIRD WORLD HEALTH ASSEMBLY

WH A23.59
22 May 1970

GENERAL PROGRAMME OF WORK COVERING A SPECIFIC PERIOD

The Twenty-third World Health Assembly,

Having considered the stage reached in the preparation of the fifth general programme for a specific period and the recommendations of the forty-fifth session of the Executive Board on the subject;

Recalling the conclusions of the Technical Discussions at the Eighteenth World Health Assembly on the necessity for long-term planning of health programmes;

Confirming resolution WHA21.49 on long-term planning in the field of health, resolution EB43.R19 on the importance of the integration of national, regional and global planning in the development of the programme of the Organization on a long-term basis, and resolution WHA22.53 stressing that realistic long-term planning of WHO's programme is dependent in large measure upon methodical health planning at the national level and recognizing the necessity of preserving flexibility to adjust programmes in the light of changes affecting the needs of the Organization and its Members;

Recalling also WHA22.53, part I, operative paragraph 9, requesting the Director-General to ask 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;

and

Taking into consideration that these observations and recommendations will be considered by the regional committees in September 1970,

1. DECIDES to extend by one year the fourth general programme of work of WHO;

2. DEEMS it necessary to prepare the fifth general programme of work of the Organization covering the period 1973-1977 inclusive, taking into
account the changes of priorities in national and international health problems and possible new trends in WHO's work which have emerged in recent years;

3. DEEMS it also necessary to proceed to the extent possible to prepare long-term projections and forecasts of the work of the Organization covering a more protracted period, with due regard to the forecast of scientific, technological, social and economic development up to the end of the twentieth century being prepared by a number of countries and international organizations, also to the desirability of defining the most probable lines of development of medical research and practice and of the possible role of the Organization in resolving major world health problems in the future;

4. DRAWS special attention to the following important functions of the Organization laid down by its Constitution and in the decisions of previous health assemblies, which must be taken into account in the preparation of the fifth general programme and of long-term projections and forecasts for the work of the Organization:

(a) analysis and evaluation of information on the state of health of the world population and on environmental health (the preservation and improvement of which is vital to the health and life of the present generation and of future generations) with a view to identifying general trends in the world health situation and to evolving a strategy in regard to the most promising ways of developing health services and medical science;

(b) study of the methodology of the planning, organization and socio-economic analysis of different health systems and services of different countries and the preparation of realistic recommendations on the best ways in which they might develop, taking into account the importance of the development and use of cost effectiveness and cost benefit analyses in the field of health;

(c) preparation of international agreements, conventions and regulations on the most important health problems, including questions of
environmental health, the importance and implications of which go beyond individual countries or groups of countries and have a direct bearing on the protection and promotion of health in all the countries of the world;

(d) formulation of recommendations on the establishment of standards, norms, uniform technical specifications and nomenclatures for chemical, physical, immunological and other substances, compounds and preparations used in international and national health programmes;

(e) co-ordination of research on the most urgent and important problems of biology, medicine and public health being carried on by national and international scientific institutions, with a view to making that research as effective as possible;

(f) identification of the most rational and effective ways of helping Member States to develop their own health systems and first and foremost to train national health personnel at all levels, provision of such assistance within the organizational and financial framework of the Organization and its Constitution, and participation in the co-ordination of such assistance from all sources; and

(g) aiming at securing the greatest participation possible of the countries of the world in the work of the World Health Organization;

5. REQUESTS the Director-General, taking into account both the debates during the Twenty-third World Health Assembly and the guidance of this resolution, and drawing upon such consultant services as he may deem advisable, to prepare a report for the forty-seventh session of the Executive Board for its consideration in the preparation of the fifth programme of work and the long-term projects;

6. REQUESTS the Executive Board:

(i) in preparing the fifth general programme of work, to consider *inter alia* the desirability of devoting more attention to standards, in the light of Article 21 of the Constitution;

(ii) to consider machinery for the formulation and discussion of proposals on the establishment of long-term projections and forecasts
of the work of the Organization;

(iii) to report on these matters to the Twenty-fourth World Health Assembly.
RESOLUTION OF THE WORLD HEALTH ASSEMBLY

TWENTY-THIRD WORLD HEALTH ASSEMBLY

WHAC3.14
16 May 1970

REAL ESTATE FUND

The Twenty-third World Health Assembly,

Recalling the provisions of part II of resolution WHA15.15;

Having considered the report of the Director-General concerning the establishment of a Real Estate Fund and its financing and the disestablishment of the existing Revolving Fund for Real Estate Operations; and

Having considered the recommendations of the Executive Board,

1. DECIDES that:

(i) a new Real Estate Fund be established and the Revolving Fund for Real Estate Operations be disestablished;

(ii) the assets and liabilities of the disestablished Revolving Fund for Real Estate Operations be transferred to the Real Estate Fund;

(iii) the Real Estate Fund be credited with receipts of rentals relating to real estate operations and that additional credits in the Fund be built up gradually by the use of available casual income;

(iv) interest earned on the investments of the Fund be credited to the Fund;

(v) the Fund may be used to meet the costs of:

(a) the maintenance, repairs of and alterations to houses for staff;

(b) major repairs of and alterations to the Organization's existing office buildings;

(c) the construction of buildings or extensions to existing buildings; and

(d) the acquisition of land which may be required;
2. DECIDES that replenishments of, or increases in, the Fund shall be made by appropriations by the Health Assembly from casual income: these appropriations shall be voted separately from the appropriation for the relevant budget year;

3. AUTHORIZES further the Director-General to use the Fund to finance:
   (i) the maintenance, repairs of and alterations to houses for staff;
   (ii) major repairs of and alterations to the Organization’s existing office buildings, provided that such use of the Fund is reported to the session of the Executive Board following the transactions; and
   (iii) the acquisition of land and construction of buildings or building extensions, provided that, unless the Health Assembly has previously indicated its wishes, specific authorization from the World Health Assembly is obtained before contracts for these purposes are entered into;

4. REQUESTS the Executive Board to review the Fund at three-year intervals, the first review to be undertaken at its first session in 1973.

Twelfth plenary meeting, 16 May 1970
A23/VR/12
RESOLUTION OF THE WORLD HEALTH ASSEMBLY

TWENTY-THIRD WORLD HEALTH ASSEMBLY

HEALTH CONSEQUENCES OF SMOKING

The Twenty-third World Health Assembly,

Having considered the report of the Director-General;¹

Recalling the resolutions on this subject adopted by the Executive Board and the Regional Committees for the Americas and for Europe;

Conscious of the serious effects of smoking in promoting the development of pulmonary and cardiac disease, including broncho-pulmonary cancer, chronic bronchitis, emphysema and ischaemic heart disease;

Being aware that broncho-pulmonary cancer is at present increasing in all countries of the world where records are available in a form which permits assessment;

Holding that health agencies must now demonstrate their concern for the reduction of the main causal factor in diseases related to smoking;

Considering that smoking of tobacco during meetings may constitute a nuisance to non-smokers;

RESOLVES that:

(1) all those present at meetings of the Assembly and its committees be requested to refrain from smoking in the rooms where such meetings are held;

(2) the Director-General be requested:

   (a) to consider the desirability of making the subject for World Health Day "The Health Consequences of Smoking" on the earliest possible occasion;

¹Document A23/P&B/6.
(b) to call the attention of all Members and Associate Members to the report on limitation of smoking ¹ and to suggest that the advantages of applying the recommendations on pages 19 and 20 of that report should be considered in all countries;

c) to consider convening an expert group to recommend further action that might be taken to discourage smoking;

d) to examine to what extent and by what educational methods young people might be persuaded not to begin smoking;

e) to bring to the attention of FAO the need for studying crop substitution in tobacco-producing countries;

(f) to report to the Executive Board at its forty-seventh session and to the Twenty-fourth World Health Assembly on the action proposed and the financial consequences for the Organization.

Fourteenth plenary meeting, 19 May 1970
A23/VR/14

¹Annexed to document A23/P&B/6.
COMMUNITY WATER SUPPLY

The Twenty-third World Health Assembly,

Having considered the progress report of the Director-General on the Community Water Supply Programme;¹

Noting the progress achieved to date by Member States in various regions, particularly in the American Region;

Welcoming the increasing assistance to Member States from such sources as the United Nations Development Programme, the United Nations Children's Fund, bilateral aid programmes and international and regional financing agencies towards achieving the health objectives of the community water supply programme, particularly the support given in connexion with the rural water supply programmes;

Believing that, on a world-wide basis, the progress in implementing the community water supply programme in relation to the needs is too slow to meet these needs within the foreseeable future;

Recognizing that water supply developments, particularly in urban areas, can be placed largely on self-sustaining financial basis;

Noting that WHO has generated considerable additional external financing for community water supplies;

Understanding that external financing continues to be available to increase the rate of implementation of water supply projects, provided sound projects can be developed;

Re-emphasizing the long-range nature of the community water supply programme and its vital role in the improvement and maintenance of health;

Re-affirming the recommendations included in resolutions WHA19.50 and WHA21.36; and

¹Document A23/P&3/5.
Recognizing further that the achievement of WHO targets for the Second Development Decade, as stated in the Director-General's report to the Twenty-third World Health Assembly, may require for a period a doubling of annual rates at which new acceptable projects, rural and urban, are achieved.

1. NOTES the report of the Director-General,¹ and endorses the general principles and programme therein;

2. RECOMMENDS to Member States:

   (i) that they intensify their efforts to identify community water supply problems as an essential first stage in national water supply development;

   (ii) that they give high priority in their development plans to programmes for the provision of community water supply and sewerage;

   (iii) that they continue to strengthen co-ordination between Ministries of Health and such other ministries or governmental bodies as may be responsible for the planning and implementation of community water supply and sewerage programmes;

   (iv) that they take full advantage of the assistance obtainable from multilateral and bilateral agencies for the implementation of water supply and sewerage programmes;

3. REQUESTS the Director-General:

   (i) to pursue co-operative activities with Member States, research institutions and with multilateral and bilateral agencies for the stimulation and promotion of community water supply research and development programmes;

   (ii) to intensify assistance to Member Governments in the development of community water supply that those governments may make use of the

¹Document A23/P&5/5.
maximum amount of assistance from external financing resources to establish acceptable projects within the WHO targets proposed for the United Nations Second Development Decade; and

(iii) to report on the financial consequences of the programme for WHO to the Twenty-fourth World Health Assembly.

Fourteenth plenary meeting, 19 May 1970
A23/VR/14