# 150th SESSION OF THE EXECUTIVE COMMITTEE

Washington, D.C., USA, 18-22 June 2012

CE150.R4 (Eng.) ORIGINAL: ENGLISH

#### **RESOLUTION**

## CE150.R4

# STRATEGY AND PLAN OF ACTION FOR INTEGRATED CHILD HEALTH

#### THE 150th SESSION OF THE EXECUTIVE COMMITTEE,

Having reviewed the *Strategy and Plan of Action for Integrated Child Health* (Document CE150/15),

### **RESOLVES**:

To recommend that the 28th Pan American Sanitary Conference adopt a resolution along the following lines:

# STRATEGY AND PLAN OF ACTION FOR INTEGRATED CHILD HEALTH

## THE 28th PAN AMERICAN SANITARY CONFERENCE,

Having reviewed the *Strategy and Plan of Action for Integrated Child Health* (Document CSP28/\_\_);

Recalling the Constitution of the World Health Organization, the UN Convention on the Rights of the Child, and other international and regional human rights instruments that set forth the right of the child to enjoy the highest attainable standard of health;

Mindful of the international mandates emerging from the World Health Assembly, in particular Resolution WHA56.21 (2003), *Strategy for Child and Adolescent* 

Health and Development, and Resolution WHA58.31 (2005), Working towards Universal Coverage of Maternal, Newborn, and Child Health Interventions, the commitments by the Member States of the Region of the Americas to meeting the Millennium Development Goals (MDG), and other PAHO resolutions that contribute to and directly affect the well-being of women, children, and caregivers;

Recognizing that the children of the Region of the Americas are its greatest resource, and that recognition and protection of their distinct needs and human rights is essential for effective development, and noting that national health policies, strategies, plans, and laws require renewed attention to promote the effective integration of child health services in health facilities, using an intersectoral and life-course approach based on the social determinants of health and consistent with international mandates;

Considering that this Strategy and Plan of Action propose to build upon the continuum of care to promote the optimal development of the child; prevent and reduce the burden of disease in children younger than 5 years of age; improve child nutrition; empower parents, families, and communities to support child care efforts; create social and physical environments that promote safety and good health; and strengthen collaboration among various institutions in the health and other sectors, enabling them to work more effectively,

#### **RESOLVES:**

- 1. To endorse the Strategy and approve the Plan of Action for Integrated Child Health, and to encourage its consideration in development policies, plans, programs, and proposals, and in the discussion of national budgets, with a view to creating conditions for scaling up integrated child health interventions.
- 2. To urge Member States to:
- (a) give priority to and advocate at the highest levels for the implementation of evidence-based, effective interventions to prevent child morbidity and mortality and to reach optimum social development;
- (b) support the development of integrated child health policies, strategies, and plans as part of overall national health plans, build capacity for high-quality integrated child health services, and ensure universal access to these services;
- (c) promote dialogue and coordination between ministries and other public and academic institutions, as well as between the public and private sectors and civil society, with a view to achieving national consensus for the implementation of integrated child health services based on the social determinants and life-course approaches;

- (d) build capacity of national and local managers for effective program planning and management of health workers in first- and referral-level health facilities to deliver quality integrated child health services;
- (e) support caregivers working at the family, community, and individual levels to improve care-seeking behavior, health promotion, and care in the home and community based on primary health care practices;
- (f) strengthen health systems and health services to support implementation of quality care in a manner consistent with their obligations under the UN Convention on the Rights of the Child and the application of innovative training processes, including distance education and other innovative models;
- (g) promote the collection, sharing, and use of data on integrated child health disaggregated by age, sex, and ethnicity;
- (h) establish an integrated monitoring, evaluation, and accountability system for policies, plans, programs, legislation, and interventions that will make it possible to determine the quality of care and impacts of integrated child health services;
- (i) develop processes for conducting external reviews and analysis of the Plan's implementation based on national priorities, needs, and capabilities.
- 3. To request the Director to:
- (a) establish a technical advisory group to provide guidance on topics related to integrated child health;
- (b) provide support to the Member States, in collaboration with other international agencies and sectors, to help them work collectively to support and strengthen national plans and the implementation of integrated child health activities at the country level;
- (c) promote the implementation and coordination of the Strategy and Plan of Action to ensure that activities are cross-cutting across the Organization's various program areas and different regional and country contexts;
- (d) establish benchmarks directly correlated to the strategic areas in the Strategy and Plan of Action;
- (e) promote and consolidate horizontal (South-South) technical cooperation and the sharing of successful experiences and lessons learned by Member States;

- (f) support and maximize human resources development, capacity building, and the delivery of quality services;
- (g) support the development of integrated technical guidelines and tools to facilitate implementation of the Strategy and Plan of Action;
- (h) promote the establishment of national, municipal, and local partnerships with other international agencies, scientific and technical institutions, academic institutions, nongovernmental organizations, organized civil society, the private sector, the UN Committee on the Rights of the Child, and others, for the purpose of implementing integrated child health services;
- (i) conduct midterm and final evaluations and report these results to the PAHO Governing Bodies.

(Third meeting, 19 June 2012)