The Thirtieth World Health Assembly,

Bearing in mind resolution WHA28.88 on the development of primary health care;

Reaffirming the main principles contained in resolution WHA29.72 on health manpower development;

Having examined the report of the Director-General on the work of WHO in 1976, and noting particularly the expressed priority to be given to the rapid balanced increase in the numbers of health personnel and to the strengthening of facilities for this purpose;

Considering that comprehensive primary health care services involve not only treatment of the ill but also, and more so, the prevention of disease as well as the promotion and maintenance of health;

Considering that nursing/midwifery personnel as part of the health team have provided and continue to provide the greater part of health care in most health systems;

Considering that many Member States already have a sizeable pool of nursing/midwifery personnel possessing the necessary managerial, supervisory and teaching skills from which may be drawn teachers and supervisors of primary health care workers;

Considering that most of the primary health services, particularly in developing countries, are in the field of maternal and child health care and family planning, in which different categories of nursing/midwifery personnel have traditionally been the primary sources of such services, under the general supervision of qualified physicians;

Considering that within the range of nursing/midwifery skills and knowledge should be the ability to plan and organize with individuals and communities health care including vaccination programmes as well as aspects of selfcare enabling them to become selfreliant;

Recognizing that there are many alternatives that may be considered in the development of primary health care workers, one costeffective alternative being the redefinition and restructuring of nursing/midwifery roles and functions in relation to those of other members of the health team, in order to optimize their contribution to primary health care, including the implementation of programmes for immunization of babies and infants;

1. RECOMMENDS that Member States:

   (1) undertake a comprehensive review of the roles and functions of the different types of personnel, including nursing/midwifery personnel, within the context of national health programmes, particularly the aspects relating to health teams in primary health care, to achieve a satisfactory balance;

   (2) redress the imbalance in the production and utilization of different types of health manpower in such a way that a more rational increase is effected in the supply of the different types of nursing/midwifery personnel, to be developed in harmony with that of other categories of health manpower so as to respond to the pressing needs of primary health care, including vaccination programmes;
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(3) utilize more effectively existing nursing/midwifery personnel by involving them, together with the representatives of other categories of health manpower, in the planning and management of primary health care and vaccination programmes and as teachers and supervisors of primary health care workers;

2. REQUESTS the Director-General:

(1) to cooperate with Member States in redefining and restructuring the roles and functions of the different categories of nursing/midwifery personnel in the health team so that they can meet, in an interdisciplinary approach, the needs of communities for primary health care as part of total community development;

(2) to intensify efforts to develop retraining and continuing education programmes for nursing/midwifery personnel consistent with the redefined and restructured roles and functions of the different members of the health team;

(3) to provide nursing/midwifery personnel with the opportunities to develop the skills required to participate effectively in a multidisciplinary approach to the planning, management and execution of primary health care and vaccination programmes;

(4) to promote the further development of appropriate technologies, studies, research and experimentation;

(5) to reexamine and, if necessary, develop within the structure of WHO the mechanisms through which the planning and implementation of such technical cooperation may be effected with Member States;

(6) to report on the progress made to a future Health Assembly.

*Handb. Res., Vol. II (2nd ed.), 1.7; 1.5.2*

Fourteenth plenary meeting, 19 May 1977 (Committee A, third report)