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CO-OPERATION BETWEEN THE UNITED NATIONS AND THE  
ORGANIZATION OF AFRICAN UNITY

Report of the Secretary-General

Addendum

The substantive part of a reply received by the Secretary-General since the issuance of document A/42/419 is summarized below.

III. CO-OPERATION WITH REGARD TO THE SITUATION IN  
SOUTHERN AFRICA

W. World Health Organization

1. Co-operation with regard to the health situation  
in southern Africa

1. Since the Agreement between the Organization of African Unity (OAU) and the World Health Organization (WHO) came into force on 24 September 1969, technical co-operation with the national liberation movements has been implemented by WHO in collaboration with the OAU Co-ordinating Committee for the Liberation of Africa, the United Nations Development Programme (UNDP) and other international partners. The scope of activities relates to a variety of problems in the health sector that affect the population concerned and also includes training and fellowships; the aim is to ensure the improvement of their health and nutritional status. The following information provides examples of such support.

\* A/42/150.

2. With a view to strengthening health services for refugees, based on primary health care, WHO organized a workshop for training the teachers responsible for the health institutions of the African National Congress of South Africa (ANC). The workshop, which took place from 24 March to 11 April 1986 at Angola, was attended by some 30 participants, including health personnel in charge of the health services of the South West Africa People's Organization (SWAPO). For refugees from Namibia, an associate member State of WHO, about \$US 700,000 was provided from the regular budget for the biennium 1986-1987, with priority given to health manpower development and training in managerial capabilities for national health development.

3. WHO has also intensified the promotion of emergency preparedness and response in southern Africa by arranging training and workshops in which the responsible national officials from the front-line States were invited to participate. Support has been extended to the countries in the region in respect to the organization of their emergency preparedness and management needs. The requirements of Angola and Mozambique continue to be given special attention in view of their enormous needs.

4. In 1986, WHO provided assistance in reviewing the health sector requirements of Angola, which is still considered to be one of the most severely affected countries in need of emergency assistance to rehabilitate its health services. Some regions of Mozambique were facing their fifth year of drought and famine compounded by the destabilization effects of fighting and poor security. The health of the people and their health services have greatly deteriorated. WHO has participated fully in identifying the emergency requirements for health projects in these countries in support of the appeal launched by the Secretary-General.

5. Fellowships were provided to health personnel of the Pan Africanist Congress of Azania (PAC) and ANC.

#### IV. CO-OPERATION IN THE FIELD OF ECONOMIC AND SOCIAL DEVELOPMENT

6. Areas of co-operation between OAU and WHO, covered by the agreement between the two organizations, related to the indispensable contribution of health to socio-economic development in the African region. In this context, the second ordinary session of the Conference of African Ministers of Health, held at Cairo on 29 and 30 April 1987, was organized and conducted by OAU in close co-operation with WHO, in particular its Regional Office for Africa at Brazzaville.

7. One of the most significant outcomes of that Conference was the adoption of the Declaration on Health as a Foundation for Development, which reiterates that "the production of healthy people (health development) is a developmental imperative ...". This Declaration was endorsed by the Assembly of Heads of State and Government of OAU at its twenty-third ordinary session, held at Addis Ababa from 27 to 29 July 1987. In so doing, they have given political support to a series of measures to accelerate health development. These measures concentrate on health activities at the district or local level, which in most countries can be managed efficiently and are likely to yield the desired socio-economic results more

rapidly. These decisions are in line with the concept of WHO's district health systems development based on primary health care, an aspect of the Strategy for Health for All.

8. The Declaration was further strengthened by the adoption of a related resolution, endorsing it in its entirety, and requesting the OAU Secretary-General to continue his efforts in the field of health and to strengthen co-operation with WHO to ensure that the goal of Health for All by the Year 2000 becomes a reality.

9. Other areas of co-operation between the two organizations include the Nutrition Task Force for Africa (restructured out of the Joint FAO (Food and Agriculture Organization of the United Nations)/WHO/OAU Regional Food and Nutrition Commission for Africa), which links FAO/WHO/UNICEF (United Nations Children's Fund)/OAU activities designed to increase the efficiency of food and nutrition programmes in the region. WHO also participates in the OAU Labour Commission in respect to the health of the working population and the OAU Co-ordinating Committee on Assistance to Refugees in respect of the health of refugees. The Organization collaborates in emergency health and medical assistance to drought-stricken and famine-affected countries in Africa (in addition to those in southern Africa), and in the promotion and development of technical co-operation among developing countries in the health field. WHO devotes a considerable amount of funds from its regular budget as well as extrabudgetary resources to the critical health problems of Africa; for example, mother and child health care and safe motherhood, the Expanded Programme of Immunization (EPI), malaria and onchocerciasis control, treatment and rehabilitation of leprosy patients and control of the disease, and the control and prevention of AIDS. Many of these health problems were the subject of specific resolutions adopted by the meeting of the African Ministers of Health in April 1987.

10. Following the request of several resolutions of the World Health Assembly, senior officials of OAU are regularly invited to the World Health Assembly, the WHO Executive Board and the Regional Committee for Africa. In 1986 and 1987, their attendance has been highly appreciated by WHO as it improves the dialogue between OAU and WHO in order to combat the health problems in Africa.

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