CD36/FR (Eng.)
25 September 1992
ORIGINAL: ENGLISH-SPANISH

FINAl REPORT
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FINAL REPORT

The XXXVI Meeting of the Directing Council of the Pan American Health Organization, XLIV Meeting of the Regional Committee of the World Health Organization for the Americas, was held at the Headquarters Building in Washington, D.C., from 21 to 25 September 1992, as convened by the Director of the Pan American Sanitary Bureau in compliance with Resolution I approved by the Executive Committee in its 108th Meeting.

PARTICIPANTS

The following Member, Participating and Associate Governments of the Pan American Health Organization were represented: Argentina, Bahamas, Barbados, Belize, Bolivia, Brazil, Canada, Chile, Colombia, Costa Rica, Cuba, Dominica, Dominican Republic, Ecuador, El Salvador, France, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Kingdom of the Netherlands; Mexico, Nicaragua, Panama, Paraguay, Peru, Puerto Rico, Saint Lucia, St. Kitts and Nevis, St. Vincent and the Grenadines, Suriname, Trinidad and Tobago, United States of America, Uruguay and Venezuela. The Governments of Portugal and Spain were represented by observers.

The Executive Committee of the Pan American Health Organization was represented by its Chairman, Dr. Mateo Budinich (Chile), and Dr. Salomón Zavala Sarrió (Peru).

Also present at the Meeting was Dr. Hiroshi Nakajima, Director-General of the World Health Organization.

The Meeting was also attended by observers from the following intergovernmental organizations: Caribbean Community, Hipólito Unanue Agreement, Latin American and Caribbean Institute for Economic and Social Development, Inter-American Development Bank, Inter-American Commission for Women, Inter-American Institute for Cooperation on Agriculture, Organization of American States, United Nations Children’s Fund, United Nations Development Program, and the World Bank.

Observers from 27 nongovernmental organizations were also present.

OFFICERS

Pursuant to Rule 18 of the Rules of Procedure of the Directing Council, Dr. Cynthia Prieto Conti, President of the XXXV Meeting of the Directing Council, presided over the proceedings until the election of the President. The Meeting then elected the two Vice Presidents and the Rapporteur. At the ninth plenary session the Council elected a Rapporteur pro tempore. The officers of the Directing Council were as follows:
OFFICERS (cont.)

President: Hon. Easton W. X. Douglas

Vice Presidents: Dr. Carlos Dabdoub Arrien
                 Dr. Carlos Castro Charpentier

Rapporteur: Dr. Jorge Litvak

Rapporteur pro tempore: Dr. Argentino Luis Pico

Secretary ex officio: Dr. Carlyle Guerra de Macedo

JAMAICA

BOLIVIA

COSTA RICA

CHILE

ARGENTINA

Director, PASB

COMMITTEE ON CREDENTIALS

The Committee on Credentials was appointed in accordance with Rule 27 of the Rules of Procedure, and consisted of the following members:

Chairman: Dr. Gustavo de Roux

Rapporteur: Ms. Nora Ritchie

Member: Dr. Federico Chávez Peón

COLOMBIA

CANADA

MEXICO
GENERAL COMMITTEE

With the election of the Representatives of Canada, Cuba and the United States of America, in accordance with Rule 28 of the Rules of Procedure, the General Committee was constituted as follows:

Hon. Easton W. X. Douglas
President of the Council
Dr. Carlos Dabdoub Arrien
Vice President of the Council
Dr. Carlos Castro Charpentier
Vice President of the Council
Dr. Jorge Litvak
Rapporteur of the Council
Mr. Edward M. Aiston
Representative
Dr. Jorge Antelo Pérez
Representative
Mr. Neil A. Boyer
Representative

JAMAICA
BOLIVIA
COSTA RICA
CHILE
CANADA
CUBA
UNITED STATES
OF AMERICA

AGENDA

In accordance with Rule 10 of the Rules of Procedure, in its first plenary session the Directing Council approved the provisional agenda (Document CD36/1, Rev. 1) presented by the Director.

DECISIONS

In its fifth plenary session the Directing Council elected the United States of America to membership on the Policy and Coordinating Committee of the Special Program of Research, Development and Research Training in Human Reproduction, for the term from 1 January 1993 to 31 December 1995.

In this same session, the Directing Council also elected Barbados to membership on the Management Committee of the Global Program on AIDS for the term from 1 January 1993 to 31 December 1995.
Also in the fifth plenary session the Directing Council elected the following Member Governments to designate one representative each to the International Coordination Council of the Pan American Institute for Food and Zoonoses (INPPAZ); Brazil for a three-year term; United States of America for a two-year term; and Uruguay for a one-year term. All terms will begin on 1 January 1993.

In the sixth session the Directing Council elected Cuba to designate a person to serve on the Joint Coordinating Board of the UNDP/World Bank/WHO Special Program for Research and Training in Tropical Diseases (TDR), for the term from 1 January 1993 to 31 December 1995.

WORKING PARTIES

At the first plenary session a working party was established, consisting of the Representatives of Barbados, Chile, and Paraguay to study the application of Article 6.B of the PAHO Constitution. The working group prepared a report, which was presented by its Chairman, Hon. Branford M. Taitt (Barbados), in the second plenary session. The Council at that same session approved Resolution I on the subject.

SESSIONS

The Directing Council held a preliminary session and nine plenary sessions.

The Committee on Credentials held six sessions and the General Committee, three sessions.

RESOLUTIONS

In the course of the Meeting, the Directing Council approved the following 22 resolutions:
RESOLUTION I

COLLECTION OF QUOTA CONTRIBUTIONS

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Having considered the report of the Director on the collection of quota contributions (Document CD36/24 and ADD. I) and the concerns expressed by the 109th Meeting of the Executive Committee with respect to the status of the collection of quota contributions;

Noting the report of the Working Party on the application of Article 6.B of the PAHO Constitution relating to the suspension of voting privileges of Member Governments that fail to meet their financial obligations to the Organization; and

Recognizing that, in the case of the Member Governments subject to Article 6.B, Cuba, the Dominican Republic, and Guatemala are making efforts to secure additional budgetary allocations to reduce their quota arrears,

RESOLVES:

1. To take note of the report of the Director on the collection of quota contributions (Document CD36/24 and ADD. I).

2. To express appreciation to those Member Governments that have already made payments in 1992, and to urge all Member Governments in arrears to meet their financial obligations to the Organization in an expeditious manner.

3. To congratulate Bolivia, Guyana, Haiti, Nicaragua, and Peru for their payment efforts to reduce their quota arrears for prior years.

4. To endorse the Working Party’s recommendation to permit Cuba and Guatemala to vote at this meeting of the Directing Council.

5. To allow the Dominican Republic the right to vote at this XXXVI Meeting of the Directing Council on the basis of a new payment commitment made in a letter to the Director of the Bureau.
6. To request the Director to notify the Dominican Republic that its voting privileges will be suspended effective with the commencement of the XXXVII Meeting of the Directing Council unless appropriate payments are received by the Secretariat.

7. To request the Director to notify Antigua and Barbuda that its voting privileges will remain suspended effective with the commencement of the XXXVII Meeting of the Directing Council unless appropriate payments are received by the Secretariat.

8. To endorse the Working Party's recommendation that all deferred payment plans be considered firm commitments by the countries concerned and not be modified in the future.

9. To request that the Director:

   a) Continue to monitor the implementation of special payment agreements made by Member Governments in arrears for the payment of prior years' quota assessments.

   b) Advise the Executive Committee of Member Governments' compliance with their quota payments' commitments.

   c) Report to the XXXVII Meeting of the Directing Council on the status of the collection of quota contributions for 1993 and prior years.

(Adopted at the second plenary session, 21 September 1992)
RESOLUTION II

ASSOCIATE MEMBERS OF THE PAN AMERICAN HEALTH ORGANIZATION.
ADMISSION, RIGHTS AND OBLIGATIONS

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Considering,

That Article 2.B of the Constitution of the Pan American Health Organization (PAHO) establishes the principle of participation in the Organization of territories or groups of territories that are not fully responsible for the direction of their international relations;

That the participation in PAHO of territories or groups of territories whose international relations are the responsibility of States whose seats of government are outside the Region is permitted by means of the category of Participating Governments (States), in accordance with said Article 2.B of the Constitution of PAHO and by means of Resolutions XV and LX of the V Meeting of the Directing Council of PAHO (1951);

That the direct participation in PAHO of territories or groups of territories whose international relations are the responsibility of Member Governments (States) whose seats of government are in the Region has not been expressly covered;

That it is opportune to regulate, in light of the constitutional principle of participation, a modality of direct participation for a territory or groups of territories in the Region whose international relations are the responsibility of States whose seats of government are in or outside the Region, within the limitations set forth in the present resolution;

That the category of Associate Member contemplated in the Constitution of the World Health Organization can be adopted by analogy under the Constitution of PAHO, and in accordance with the terms of the present resolution; and

That Article 2.B of the Constitution of PAHO determined that the form of participation and the rights and obligations of territories or groups of territories that are not responsible for their international relations are determined by the Directing Council or the Pan American Sanitary Conference,
RESOLVES:

1. To adopt the following procedure for the admission as Associate Members of territories or groups of territories in the Region whose international relations are the responsibility of States with seats of government in or outside the Region:

A. ADMISSION

The request for admission as an Associate Member must be presented to PAHO, as a distinct international legal person, by the State responsible for the international relations of the territory or groups of territories, by means of a communication addressed to the Director of the Pan American Sanitary Bureau.

The Director shall transmit the request to Member Governments (States) and shall include the issue in the provisional agenda of the following meeting of the Directing Council or the Pan American Sanitary Conference.

A majority of members on the Directing Council or the Pan American Sanitary Conference shall be required to approve such a request.

B. OBLIGATIONS

Obligations of Associate Members in PAHO are the following:

a) In general, the same obligations of Member Governments (States), with the limitations set forth in the present resolution.

b) Payment of financial contributions, which shall be established, on a case by case basis, at the same time and following the same procedure as for Member or Participating Governments (States). Financial contributions of Associate Members shall be paid directly to PAHO.

C. RIGHTS

Rights of Associate Members in the Organization are the following:

a) To participate, with no vote, in the meetings of the Pan American Sanitary Conference, the Directing Council and the Executive Committee of the Directing Council.
b) To participate with voice and vote in technical commissions or committees.

c) To have access to all technical cooperation services of the PAHO, in accordance with established program and budget procedures applied to Member Governments (States).

d) To receive information and documentation produced or distributed by PAHO.

2. The present resolution shall enter into effect immediately and may be applied to any request for admission as Associate Member that the Director may have received.

(Adopted at the third plenary session, 22 September 1992)
RESOLUTION III

ADMISSION OF THE COMMONWEALTH OF PUERTO RICO AS ASSOCIATE MEMBER OF THE PAN AMERICAN HEALTH ORGANIZATION

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Considering,

That the United States of America, as a Member Government (State) responsible for the international relations of the Commonwealth of Puerto Rico, has presented to the Director a request, on behalf of the Governor of Puerto Rico, for the admission of Puerto Rico as an Associate Member of PAHO;

That Puerto Rico was admitted as an Associate Member of the World Health Organization in May of 1992; and

That the Directing Council of PAHO has approved a resolution which provides for the direct participation as Associate Members in PAHO of territories or groups of territories in the Region that are not fully responsible for their international relations,

RESOLVES:

1. To admit Puerto Rico as an Associate Member of PAHO with immediate effect, in accordance with the terms of Resolution II of the XXXVI Meeting of the Directing Council.

2. To establish the assessment of Puerto Rico at 0.02% of PAHO's budget for the biennium 1992-1993.

3. To instruct the Director to take the necessary measures to facilitate, by Puerto Rico, its enjoyment of the rights and fulfillment of the obligations as an Associate Member of PAHO.

(Adopted at the third plenary session, 22 September 1992)
RESOLUTION IV


THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Having considered Document CD36/11 and ADD. I and the tentative request to the World Health Organization for $79,355,000 for the Region of the Americas for the biennium 1994-1995;

Noting the recommendation of the 109th Meeting of the Executive Committee;

Noting that the Director-General of WHO increased the ceiling for this Region by one per cent, or $715,000, in view of the major program reductions caused by insufficient cost increase ceilings; and

Noting the explanation and request by the Director that the additional funds be used to alleviate program reductions in country and intercountry programs,

RESOLVES:

To request the Director to transmit to the Director-General of WHO the revised request for $80,070,000 for the Region of the Americas for the biennium 1994-1995, for consideration by the WHO Executive Board and the World Health Assembly in 1993.

(Adopted at the third plenary session, 22 September 1992)
RESOLUTION V

PAN AMERICAN INSTITUTE FOR FOOD PROTECTION
AND ZOONOSES (INPPAZ)

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Considering the fulfillment of Resolution XXI of the XXXV Meeting of the
PAHO Directing Council (1991);

Recognizing the Agreement signed between the Government of the Republic of
Argentina and the Pan American Sanitary Bureau on 15 November 1991 for the
establishment of the Pan American Institute for Food Protection and Zoonoses
(INPPAZ);

Recognizing the generosity of the Government of the Republic of Argentina in
providing the facilities for the headquarters of INPPAZ and in providing economic
support for its operation;

Having reviewed Document CD36/18, which reports on the establishment and
initial development of the Institute; and

Recognizing the progress achieved in carrying out technical cooperation activities
in food protection and zoonoses,

RESOLVES:

1. To express its gratitude to the Government of the Republic of Argentina for
its collaboration in the establishment and operation of the Institute, and to request its
continuing support.

2. To express its appreciation for the actions carried out by the Director of the
Pan American Sanitary Bureau in establishing and making INPPAZ operational within
a short period of time.

3. To request the Member Governments to participate actively in developing the
Institute for the full exercise of its regional functions.
4. To request the Director of PASB:

   a) To complete the financial study of INPPAZ in the terms specified in Document CD36/18, in order that it may be presented for consideration by the XXXVII Meeting of the Directing Council in 1993.

   b) To continue the development of INPPAZ, with the resources available, with a view to achieving the objectives approved by the Governing Bodies of PAHO, taking into account the new forms of technical cooperation required in the context of the initiatives for subregional integration.

   c) To advise the Directing Council at its XXXVII Meeting on the outcome of budgetary discussions as specified in transitory article 2.B of the agreement between PAHO and the Government of the Republic of Argentina.

   (Adopted at the fifth plenary session, 23 September 1992)
RESOLUTION VI

ELECTION OF THREE MEMBER GOVERNMENTS TO THE EXECUTIVE COMMITTEE ON THE TERMINATION OF THE PERIODS OF OFFICE OF BARBADOS, BRAZIL, AND HAITI

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Bearing in mind the provisions of Article 9.B and 15.A of the Constitution of the Pan American Health Organization; and

Considering that the Governments of Argentina, Belize, and Mexico were elected to serve on the Executive Committee upon the expiration of the terms of office of Barbados, Brazil, and Haiti,

RESOLVES:

1. To declare the Governments of Argentina, Belize, and Mexico elected to membership on the Executive Committee for a period of three years.

2. To thank the Governments of Barbados, Brazil, and Haiti for the services rendered to the Organization during the past three years by their representatives on the Executive Committee.

(Adopted at the fifth plenary session, 23 September 1992)
RESOLUTION VII

IMPLEMENTATION OF THE EXPANDED PROGRAM
ON IMMUNIZATION AND THE PLAN OF ACTION FOR THE
ERADICATION OF INDIGENOUS TRANSMISSION OF
WILD POLIOVIRUS FROM THE AMERICAS

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Having considered and examined the progress report presented by the Director
(Document CD36/13) on the implementation of the Expanded Program on Immunization
and the Plan of Action for the Eradication of Wild Poliovirus from the Americas;

Noting with great pride that:

- Transmission of wild poliovirus appears to have been interrupted or is on the
  verge of being interrupted, with only nine cases being reported in 1991 and no
  cases in the past 12 months;

- Major advances have been made in the efforts to eliminate neonatal tetanus;

- Several countries have given high priority to the control of measles;

- Considerable effort has been made to ensure that the Region is self-sufficient
  in terms of vaccine production and quality control;

- Immunization coverage levels have been maintained and even increased in
  most countries, reaching an all-time high of over 75% for all the vaccines
  being used (DPT, polio, measles and BCG and TT); and

- New initiatives have been started, such as a better understanding of pertussis
  epidemiology in the Americas, a search for strategies for controlling hepatitis
  B and rubella, and the possibility of introduction of new vaccines in national
  immunization programs, such as against *Haemophilus influenzae* type B; and
  recognizing that as the program reaches this high level of performance, it also
  represents the beginning of a very challenging period, namely the consolidation
  of poliomyelitis eradication, elimination of neonatal tetanus, control of
  measles, and further increase of immunization coverage, and that the
possibility of inclusion of new vaccines in the national programs poses a major challenge, both in terms of strategies and of resource allocation in already strained national health budgets,

RESOLVES:

1. To congratulate all Member Governments and all concerned, particularly the health workers, for their continuing commitment and efforts, sometimes under the most difficult circumstances.

2. To recognize the continued support from the agencies involved in this effort (AID, UNICEF, IDB, Rotary International, CPHA, and PAHO) and to call on them to maintain and increase their contributions to the program, particularly in this critical phase of consolidation of gains and starting of a new phase.

3. To urge all Member Governments to maintain the priority accorded to this program and its goals and to assign the necessary human and financial resources to implement the actions outlined in the progress report, especially the ones described in Chapter II, of Document CD36/13; for these purposes it is necessary that:

   a) Resources both human and financial, including those required for the purchase of vaccines, be available in national health budgets and be allocated to the areas at highest risk for disease transmission and of low immunization coverage.

   b) Specimens for poliovirus diagnosis from all patients with acute flaccid paralysis and their contacts be collected at appropriate times and examined in the laboratory network, to ascertain that no wild virus is circulating in the Region.

   c) Following the schedule outlined in the progress report, countries appoint national certification commissions to start collecting and analyzing the data eventually needed for certification of the interruption of transmission of wild poliovirus.

   d) Priority be given to vaccination of women of child-bearing age in the areas identified as at risk for the disease, with involvement of the traditional birth attendants, and that cases of neonatal tetanus be reported separately from postnatal tetanus.

   e) In the efforts to control or eliminate measles, all countries assure that surveillance is properly implemented.
f) Strategies to include other vaccines, such as hepatitis B, rubella or Haemophilus influenzae type B, be carefully considered, particularly in relation to the epidemiological situation and resource availability.

g) All vaccines used in the program comply with the minimum requirements of PAHO/WHO.

4. To request the Director to:

a) Maintain the high priority accorded to this program and to the actions needed to consolidate the eradication of poliomyelitis and the efforts to control or eliminate other vaccine preventable diseases.

b) Start implementation of a plan for the certification of eradication of poliomyelitis from the Americas.

c) Give strong support to the search for additional resources for measles elimination initiatives under way in several countries of the Region and assess the feasibility of the elimination of measles throughout the Hemisphere.

d) Utilize the incidence of neonatal tetanus as an indicator of the performance of maternal and child health services, particularly in areas at risk.

(Adopted at the sixth plenary session, 23 September 1992)
RESOLUTION VIII

FIFTIETH ANNIVERSARY OF THE INTER-AMERICAN INSTITUTE FOR COOPERATION ON AGRICULTURE (IICA)

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

In appreciation of the significant contribution of the Inter-American Institute for Cooperation in Agriculture to agricultural development, which has increased the food supply and helped to improve nutrition among the peoples of the Americas; and

Recognizing the effort that has been made to harmonize the Institute’s technical cooperation program with that of PAHO in order to enhance the quality of life in the Region of the Americas,

RESOLVES:

1. To approve a formal vote of appreciation for IICA’s commendable efforts in the area of technical cooperation to develop and strengthen agriculture in the Americas.

2. To congratulate the Director of IICA, and through him the Inter-American Board of Agriculture and the personnel of the Institute, on the occasion of IICA’s fiftieth anniversary.

(Adopted at the sixth plenary session, 23 September 1992)
RESOLUTION IX

RECOGNITION OF THE FIFTIETH ANNIVERSARY OF THE COOPERATION IN HEALTH OF THE KELLOGG FOUNDATION IN LATIN AMERICA AND THE CARIBBEAN

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Considering the outstanding work carried out over the past 50 years by the W. K. Kellogg Foundation to support health, development, and well-being in the countries of Latin America and the Caribbean;

Taking into account the close and continuous collaboration that has existed between the W. K. Kellogg Foundation and the Pan American Health Organization (PAHO) throughout the entire period in which activities have been carried out in the Region of the Americas; and

Recalling once again the generosity with which the Foundation contributed to construction of the PAHO Headquarters building in Washington, D.C.,

RESOLVES:

To congratulate the President, the Board of Directors, and the personnel of the W. K. Kellogg Foundation for their 50-year labor of uninterrupted cooperation with the countries of Latin America and the Caribbean for the health and well-being of their peoples.

(Adopted at the sixth plenary session, 23 September 1992)
RESOLUTION X

ANNUAL REPORT OF THE DIRECTOR OF THE PAN AMERICAN SANITARY BUREAU

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Having seen the Annual Report of the Director of the Pan American Sanitary Bureau (Official Document 249) on the activities of PAHO during 1991; and

Bearing in mind, the provisions of Article 9.C of the Constitution of the Pan American Health Organization,

RESOLVES:


2. To thank the Director for his leadership and support to the Member Governments in the technical cooperation activities carried out by PAHO during 1991.

(Adopted at the seventh plenary session, 24 September 1992)
RESOLUTION XI


THE XXXVI MEETING OF THE DIRECTING COUNCIL,


Noting the presentation by the External Auditor on the satisfactory condition of the Organization’s accounts and the Organization’s continued compliance with the Financial Regulations and legislative authority; and

Recognizing that the Organization continues to maintain a very sound and stable financial condition,

RESOLVES:


2. To thank the External Auditor for his thorough audit reviews during the past biennium and for presenting a clear and comprehensive report on the condition of the Organization’s accounts for 1990-1991.

3. To express concern that the financial condition of the Caribbean Epidemiology Center (CAREC) and the Caribbean Food and Nutrition Institute (CFNI) have declined and to urge the Governments who are members of these institutions to make every effort to pay their outstanding quota contributions as early as possible.

4. To congratulate the Director on his successful efforts to maintain a balanced financial condition for the Organization.

(Adopted at the seventh plenary session, 24 September 1992)
RESOLUTION XII

1990-1991 BUDGET SURPLUS

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Taking into account the recommendation of the 109th Executive Committee to use the surplus of $545,161 to provide more resources to the priority programs in cholera, workers’ health, and health promotion, and noting the details provided by the Director with respect to these programs’ needs,

RESOLVES:

1. To endorse the Executive Committee’s proposal to utilize the surplus of $545,161 to provide more funds to meet the priority needs of the Organization’s programs in cholera ($150,000), workers’ health ($150,000), and health promotion ($245,161) in accordance with the program and budget details provided in Document CD36/25, Annex II.

2. To authorize the Director to transfer these funds to the Special Fund for Health Promotion for allocation and disbursement.

(Adopted at the seventh plenary session, 24 September 1992)
RESOLUTION XIII

REPORT ON THE UNITED NATIONS CONFERENCE ON ENVIRONMENT AND DEVELOPMENT AND ITS IMPLICATIONS FOR THE WORK OF THE PAN AMERICAN HEALTH ORGANIZATION

THE XXXVI MEETING OF THE DIRECTING COUNCIL,


Believing that human beings should be the focus of concerns for sustainable development, and that they have the right to healthy and productive lives in harmony with the nature;

Recognizing the close relationship that exists between health and development and that insufficient and inappropriate development, coupled with population growth, are causing serious environment-related health problems in the countries of the Region;

Considering that the health issues addressed in Agenda 21, approved by the United Nations Conference on Environment and Development (UNCED), are consistent with and complement the goal of "Health for All" and the strategies for its attainment;

Acknowledging the need for the health sector to take an active part in the processes of discussion and decision-making with regard to development projects in each country; and

Responding to the suggestion of UNCED that health protection and promotion activities should be coordinated by a qualified international body, such as WHO/PAHO,

RESOLVES:

1. To urge the Member Governments:

   a) To strengthen the technical, administrative, and managerial capacity of national and local institutions responsible for the management of environmental health, primarily in terms of preparation of sectoral analyses, formulation of comprehensive sectoral policies, development of plans, and coordination of their execution.
b) To facilitate the establishment or strengthening of a high-level commission to coordinate activities aimed at ensuring the implementation of health and environmental actions.

2. To request the Director:

a) To support the countries in the formulation of policies, regulations, and plans regarding health, environmental, and development issues with a view to bringing about action for the protection and promotion of health.

b) To offer support for the work of the Commissions established by the countries for the purpose of strengthening institutional and human resource capacity, carrying out sectoral studies, and formulating and executing the corresponding plans.

c) To coordinate the Regional effort needed in order to identify issues of common interest, encourage and support cooperation between countries, and establish frameworks and mechanisms for joint action.

d) To study the desirability and feasibility of convening a Pan American Conference on Health, Environment, and Development, to be attended by participants from the highest levels of the health, public works, and environment sectors of the Region, for the analysis of common problems, frameworks, and forms of action, and to make a recommendation to the 111th Meeting of the Executive Committee in June 1993.

e) To continue his efforts to tailor the activities of the Bureau and mobilize resources in order to better meet the needs of the countries and the Region in this area.

(Adopted at the seventh plenary session, 24 September 1992)
RESOLUTION XIV

ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS)
IN THE AMERICAS

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Having seen Document CD36/12 on acquired immunodeficiency syndrome (AIDS) presented by the Director;

Taking into account World Health Assembly Resolution WHA45.35;

Viewing with concern the rapid progress of the epidemic of AIDS and infection with human immunodeficiency virus (HIV) in the Americas and its growing spread among men, women, young people, and children;

Considering the serious social and economic repercussions of the epidemic in such varied aspects as the cost of medical care, the disruptive effects on the family, loss of productivity, the stigmatization of and discrimination against infected persons, and the impact on other health programs and social services in the countries;

Recognizing, on the one hand, the progress and current status of national HIV prevention and AIDS control programs and, on the other hand, the need for a multisectoral approach and for integration and decentralization activities for the prevention of HIV and control of AIDS and other sexually transmitted diseases at the state (provincial, departmental), district (municipal), and community levels in the Member Countries; and

Aware of the growing concern aroused by the association between HIV/AIDS and tuberculosis and the considerable adverse effects on measures for the control of tuberculosis in most of the countries of the Region,

RESOLVES:

1. To adopt the updated strategies and priorities of the Global Program on AIDS (GPA) in the Americas, with special emphasis on its effects on the female, adolescent, and child population, greater emphasis on the health care of persons with HIV/AIDS, and better integration with other programs for health, social well-being, and economic development in the countries.
2. To urge the Member Countries:

   a) To intensify national efforts for the prevention of AIDS and achieve commitment and leadership at the highest decision-making and/or political levels.

   b) To mobilize and guarantee the allocation of resources and multisectoral participation in response to the pandemic, including efforts to reduce sexual, blood-borne, and perinatal transmission of HIV infection, and involving all government sectors and key elements of society, such as community and religious groups, NGOs, and other community leaders.

   c) To strengthen and assign highest priority to activities under the Tuberculosis Control Program in coordination with the AIDS Program.

   d) To promote close coordination and, if required, the integration of activities for the prevention and control of HIV/AIDS and other sexually transmitted diseases, and cooperation with other health programs (for example, tuberculosis, maternal and child health, prevention of drug addiction, etcetera) and education at all levels.

   e) To protect the human rights of those infected with HIV/AIDS.

   f) To encourage and support the strengthening of the role of WHO and PAHO as leaders in the control and prevention of the epidemic.

3. To request the bilateral and multilateral agencies, and nongovernmental and volunteer organizations, to intensify their support activities and their attention to the world struggle against HIV/AIDS, in keeping with the world strategy against AIDS, and to mobilize human, financial, and moral support at the national, subregional, and regional levels in the Americas.

4. To request the Director:

   a) To promote an interprogram and interagency approach in the Americas, in keeping with the world strategy against AIDS, using existing mechanisms, initiatives, and programs in the Region and in the countries, and in close cooperation with other United Nations agencies.

   b) To continue carrying out support activities for the countries, specifically in the strengthening of national capabilities for surveillance of the epidemic and for the surveillance and evaluation of program activities.
c) To promote and coordinate exchanges of information among the Member Governments on the results of their education programs and social communication strategies based on the cultural values and patterns of each country.

d) To provide for the framing by the appropriate technical agencies of specific recommendations for the epidemiological surveillance of the association tuberculosis-HIV, primary and secondary chemoprophylaxis procedures, and the diagnosis, treatment and monitoring of tuberculosis in persons infected with HIV, and to promote the epidemiological and operational research needed for optimal understanding of a new and changing situation.

e) To explore possible sources and mechanisms to support the strengthening of national programs for the prevention of AIDS/HIV/STD, including subregional approaches, the transfer of appropriate technology, and the inclusion of AIDS as an agenda item in meetings of heads of state in the Region.

(Adopted at the seventh plenary session, 24 September 1992)
RESOLUTION XV

PLAN OF ACTION FOR THE ELIMINATION OF LEPROSY FROM THE AMERICAS

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Having seen Document CD36/14, "Plan of Action for the Elimination of Leprosy from the Americas," and considering the mandate of the Forty-fourth World Health Assembly with regard to this subject; and

Recognizing that several Member Countries are close to attaining the target for the year 2000 in advance of that date, and that epidemiological conditions in the various groups of countries and the level of development of their health systems make it feasible to carry out diagnosis, treatment, and surveillance operations,

RESOLVES:

1. To approve the Plan of Action for the Elimination of Leprosy as a public health problem in the Americas presented in Document CD36/14.

2. To urge the Member Governments:

   a) To assign political priority to the execution of the regional Plan of Action for the Elimination of Leprosy in all the countries in the Hemisphere where the disease is endemic.

   b) To encourage the framing and execution of national plans for elimination of the disease.

   c) To promote collaboration and articulation between the various levels of public administration and the private sector.

   d) To ensure that the planning and application of methodologies for timely diagnosis, multidrug therapy, and surveillance are based on sufficient epidemiological information so that the social groups affected by leprosy may be stratified and the risk factors involved may be analyzed in order to take the necessary steps for elimination of the disease.

   e) To commit the resources needed for the execution of national plans, and especially for the strengthening of diagnostic and surveillance systems.
f) To incorporate into local health systems activities for the elimination and prevention of leprosy and to promote social participation and local programming and administration so that measures may be carried out comprehensively, synergistically, and without interruption through use of all the human, institutional, and financial resources (local and national) available.

3. To request the Director, within available resources:

   a) To promote technical cooperation for the strengthening of epidemiological, diagnostic, information, and surveillance services, the implementation of multidrug therapy, the follow-up of treated patients, and the treatment of disabilities.

   b) To support development of the management and administration of programs and the application of epidemiological knowledge to local situations and the stratification process.

   c) To promote the mobilization of institutional, human, and financial resources for the development and use of the health infrastructures required to execute the Plan of Action for the Elimination of Leprosy.

   d) To encourage biomedical, epidemiological, social, and health services research for the development of more effective intervention measures.

   (Adopted at the seventh plenary session, 24 September 1992)
RESOLUTION XVI

PLAN OF ACTION FOR THE ELIMINATION OF VITAMIN A DEFICIENCY FROM THE AMERICAS

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Having seen Document CD36/15, "Plan of Action for the Elimination of Vitamin A Deficiency from the Americas";

Considering the impact that micronutrient deficiency, and specifically vitamin A deficiency, have on health, well-being, and human development;

Observing that vitamin A deficiency, in its moderate form, appears to be more widespread in the Region than had been previously estimated; and

Taking into account the scientific and technological advances that make possible the virtual elimination or control of these micronutrient deficiencies, including vitamin A deficiency, as public health problems,

RESOLVES:

1. To approve the objectives and activities proposed in the "Plan of Action for the Elimination of Vitamin A Deficiency from the Americas" (Document CD36/15).

2. To urge the Member Governments:

   a) To formulate national plans of action that include policies and programs for the elimination of vitamin A deficiency as a public health problem by the year 2000.

   b) To strengthen the technical and administrative capability of national and local institutions as required by the activities for implementing the plans of action.

   c) To improve intersectoral cooperation in order to achieve a comprehensive approach in the prevention of vitamin A deficiency.
d) To establish a focal point as a coordinating mechanism in order to promote and integrate the common activities required for the control of iodine, iron, and vitamin A deficiencies.

3. To request the Director:

a) To provide the technical cooperation necessary for strengthening the capabilities of the countries for the surveillance, control, and elimination of vitamin A deficiency.

b) To promote the mobilization of national and external resources in order to provide greater support for the development of programs for the prevention and control of micronutrient deficiencies.

c) To promote and support cooperation between countries, bilateral and international agencies and national inter-agency coordination committees for the implementation of national plans of action for the elimination of vitamin A deficiency from the Americas.

(Adopted at the seventh plenary session, 24 September 1992)
RESOLUTION XVII

REGIONAL PLAN FOR INVESTMENT IN THE ENVIRONMENT AND HEALTH

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Having seen Document CD36/23, entitled "Regional Plan for Investment in the Environment and Health,"

Taking into account the need to alleviate deficiencies in the areas of health services, drinking water supply, proper treatment of sewage, and basic sanitation in the countries of Latin America and the Caribbean;

Recognizing the need to channel national and external resources in greater proportions than have been allocated in recent years in order to meet basic needs for the expansion of coverage and the rehabilitation and adaptation of both health and environmental protection services;

Bearing in mind the "Strategic Orientations and Program Priorities for PAHO during the Quadrennium 1991-1994" and Resolution XVII of the XXXV Meeting of the Directing Council of PAHO; and

Considering the decisions of the I and II Ibero-American Summits of Heads of State and Government to support the formulation and launching of the Regional Plan for Investment in the Environment and Health, and to establish a Multilateral Fund for the Development of Preinvestment Activities, which is needed for the implementation of the Plan,

RESOLVES:

1. To approve the Regional Plan for Investment in the Environment and Health, and adopt it as a frame of reference for the investment that needs to be made over the next 12 years in the countries of Latin America and the Caribbean, both to alleviate existing deficiencies in the areas of the environment and health and to meet the growing needs of a burgeoning population in these areas.

2. To request the Member Governments:

   a) To formulate national plans of investment designed to bring about, over the next 12 years, a profound transformation of the environmental and
health sectors, with more effective and equitable action, as well as more efficient utilization of the resources expended for this purpose.

b) To allocate internal resources, both public and private, in amounts equivalent to approximately 0.8% of the GDP over the next 12 years in order to channel the national resources necessary to enable the investment proposed under the Plan.

c) To urge multilateral and bilateral institutions to increase their financial cooperation with the countries of Latin America and the Caribbean for investment in the environment and health.

d) To initiate the actions that they are called on to carry out under the strategies for implementation of the Regional Plan for Investment in the Environment and Health and to collaborate in the establishment of the Multilateral Fund for the Development of Activities of Preinvestment in the Environment and Health, along the lines proposed in Document CD36/23 and annexes.

3. To request the Director:

a) To take the measures necessary in order to ensure that the strategies for implementation of the Regional Plan for Investment in the Environment and Health are put into effect.

b) To establish a Multilateral Fund for the Development of Activities of Preinvestment in the Environment and Health that will support the national processes of implementation of the Regional Plan in each country, along the lines described in Annex II of Document CD36/23.

c) To promote the adoption of the Plan by the bilateral and multilateral lending agencies, especially the Inter-American Development Bank (IDB) and the World Bank, as a mechanism for coordinated action in those areas and to encourage these agencies to contribute to the Plan’s enhancement and execution, as well as to the establishment and operation of the Multilateral Fund for the Development of Activities of Preinvestment in the Environment and Health.

(Adopted at the eighth plenary session, 24 September 1992)
RESOLUTION XVIII

COMPREHENSIVE HEALTH OF ADOLESCENTS

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Having seen the report of the Director on the health of adolescents in the Americas and the plan of action for the strengthening and development of programs (Document CD36/16);

Considering the decisions taken on the subject by the World Summit for Children, the Technical Discussions on the health of youth and the resolutions of the World Health Organization deriving from the Technical Discussions at the Forty-second World Health Assembly (WHA42.41), and especially Resolution XVI of the XXXV Meeting of the Directing Council of PAHO (1991);

Recognizing the importance of comprehensive health of adolescents for the countries in the Region;

Valuing the enormous contribution that adolescents can make to the future of the Americas;

Recognizing that the health of adolescents has profound consequences for adult life and future generations; and

Recognizing the importance of education for improvement in the health of adolescents,

RESOLVES:

1. To approve the Plan of Action for the Health of Adolescents in the Americas presented in Document CD36/16, revised in accordance with the observations made by the Executive Committee.

2. To urge the Member Governments to:

   a) Develop or strengthen their national initiatives to promote the comprehensive health of adolescents.
b) Create and tighten the bonds of collaboration between agencies responsible for the health of adolescents so that programs will use resources efficiently and avoid duplication of efforts.

c) Establish and strengthen bonds of collaboration with nongovernmental organizations, universities, and research centers working with and for adolescents in order to design and carry out joint projects.

d) Promote active participation by adolescents in the promotion of health in communities, education and sports centers, and places of work.

e) Establish and strengthen collaboration in specific programs between the Ministries of Health, Education, and Employment.

f) Take initiatives directed at the identification and prevention of physical and sexual abuse of adolescents.

3. To recommend to the Director that he:

   a) Continue efforts to find and support strategies for the financing and mobilization of national and international resources for carrying out the Plan of Action.

   b) Determine the appropriate date for an evaluation of the progress of the Plan of Action, and inform the Directing Council thereof.

4. To further request the Director to support, within available resources:

   a) The development and dissemination of the theoretical and conceptual framework of the Program of Comprehensive Health of Adolescents in the Americas.

   b) The validation and adjustment, on the basis of experience, of indicators for the situational diagnosis, programming, surveillance, and evaluation of comprehensive care of adolescents.

   c) The development of instruments for the evaluation of services, normative guidelines for the programming and organization of services, and standards and patterns for the delivery of services.
d) Collaboration in human resources development by providing technical and material support to seminars, courses, and workshops, and promoting intersectoral measures.

e) The reinforcement and activation of national networks that work with adolescents.

f) The promotion of operational research, including the evaluation of alternative models for comprehensive care of adolescents.

g) The production, selection, and distribution of scientific material and of experiences in the development of local service programs and of teaching and training activities.

(Adopted at the eighth plenary session, 24 September 1992)
RESOLUTION XIX

DEBT CONVERSION FOR HEALTH

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Considering the continuing need to identify resources for the promotion of activities for the environment and health in the Region;

Taking into account the efforts being made by the Pan American Health Organization to stimulate investment in the environment and health through promotion of the "Regional Plan for Investment in the Environment and Health"; and

Noting the changes in commercial debt markets and the substantial international movement towards the forgiveness of certain bilateral debt, and the official statements of some Member Countries of the Paris Club that they would consider debt conversion proposals during renegotiation of bilateral loans through the Paris Club,

RESOLVES:

1. To request the economic authorities in the creditor countries, when renegotiating the debt of the developing countries, to give priority consideration to the conversion of debt for resources to finance health, water and sanitation, and other environmental health programs.

2. To urge the economic authorities in the debtor countries to give priority to health, water and sanitation, and other environmental health projects whenever they carry out operations for the conversion of their external debt into resources for the financing of projects within their borders.

3. To request the Director:

   a) To continue the Organization's efforts to help the Member Countries explore other alternatives for the financing of their health and environmental programs not just through conversion of their commercial debt, but also through renegotiation, restructuring, and forgiveness of their public debt.
b) To encourage the interest of the international financial agencies, especially the Inter-American Development Bank, the World Bank, and the International Monetary Fund, in supporting health projects through their debt conversion mechanisms.

(Adopted at the eighth plenary session, 24 September 1992)
RESOLUTION XX

HEALTH AND TOURISM

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Having examined the document presented by the Director on "Health and Tourism" (Document CD36/20);

Noting the increasing importance of tourism to the economic growth of the countries of the Americas and thus indirectly for the capability of these countries to provide health services for their citizens;

Agreeing that the health of the people, the state of the environment and the availability of health services may impact on the attractiveness of the countries of the Americas as tourist destinations;

Aware of the need for collaboration between the health and tourism sectors to their mutual benefit; and

Accepting the importance and relevance of the activities already carried out and being planned by the Pan American Health Organization (PAHO),

RESOLVES:

1. To note the actions taken by PAHO to stimulate interest and promote activities at the regional, subregional, and national levels in this area.

2. To approve the proposals for technical cooperation by PAHO contained in Document CD36/20.

3. To urge the Member Governments to:

   a) Explore the potential of the health and tourism interaction in the context of health and development as a mechanism that may strengthen the health sector.

   b) Promote the development of joint activities between the health and tourism sectors along the lines proposed in Document CD36/20.

(Adopted at the ninth plenary session, 25 September 1992)
RESOLUTION XXI

SALARY OF THE DIRECTOR OF THE PAN AMERICAN SANITARY BUREAU

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Considering the revision made to the base/floor salary scale for the professional and higher categories of staff in graded posts, effective 1 March 1992;

Taking into account the decision by the Executive Committee at its 109th Meeting to adjust the salaries of the Deputy Director and Assistant Director (Resolution CE109.R15);

Having noted the recommendation of the Executive Committee concerning the salary of the Director of the Pan American Sanitary Bureau (Resolution CE109.R15); and

Bearing in mind the provisions of Staff Rule 330.3,

RESOLVES:

To establish the annual net salary of the Director of the Pan American Sanitary Bureau at $82,297 (dependency rate) or $73,824 (single rate), effective 1 March 1992.

(Adopted at the ninth plenary session, 25 September 1992)
RESOLUTION XXII

WORKERS’ HEALTH

THE XXXVI MEETING OF THE DIRECTING COUNCIL,

Having seen Document CD36/19, and its annexes, on Workers’ Health;

Taking into account both the large number of persons who because of risk factors in the workplace suffer impairments of health that could be avoided, and the inadequate coverage of workers’ health services, especially with regard to prevention; and

Emphasizing the positive economic and social impact of the promotion and protection of health and the prevention of risk factors in the workplace,

RESOLVES:

1. To support the Declaration on Workers’ Health and the Plan of Action for the Initiative recommended by the Organizing Commission in accordance with the guiding principles of the initiative "1992: Year of Workers’ Health," as set forth in Resolution XIV of the XXIII Pan American Sanitary Conference.

2. To urge the Member Governments to maintain the political decision to implement their national development plans for workers’ health in coordination and with the participation of State institutions, public and private companies, and the workers themselves, with a view to strengthening and expanding the existing programs and services for workers’ health and their coverage by means of new alternatives, including the incorporation of workers’ health, with particular attention to that of women workers, into primary health care, local health systems, and new social security modalities.

3. To request the Ministries of Health of the Member Governments to establish specific programs for workers in the health sector, and to carry out plans for research on this subject.

4. To recommend that the Member Governments identify and mobilize the resources needed to support workers’ health in the respective national plans.
5. To request the Executive Committee at its 111th Meeting to consider designating 5 November as "Pan American Workers' Health Day," in honor of Bernardino Ramazzini, the "Father of Occupational Health," and to report to the XXXVII Meeting of the Directing Council in this regard.

6. To request that the Director, within available resources:

   a) Continue to cooperate with Governments requesting ongoing evaluation of national policies and plans in order to facilitate identification of the most pressing needs and provide such cooperation as may be required, especially with regard to the working populations that are least served,

   b) Promote interprogram and interinstitutional coordination, especially collaboration with the various national and international agencies concerned with this matter.

   c) Continue the Organizing Commission of the Initiative "Year of Workers' Health" as an advisory body to the Workers' Health Program, so that it may collaborate on the studies for the mobilization of resources and in securing increased cooperation at the regional level.

   d) Present at the meetings of the Organization's Governing Bodies in 1993, and every two years thereafter, a progress report on the health status of workers in the Region of the Americas.

   e) Promote the studies needed to build a network of collaborating centers in workers' health.

(Adopted at the ninth plenary session, 25 September 1992)
IN WITNESS WHEREOF, the President of the Directing Council and the Secretary ex officio, Director of the Pan American Sanitary Bureau, sign the present Final Report in the English and Spanish languages, the two texts being equally authentic.

DONE in Washington, D.C., United States of America, on this twenty-fifth day of September, nineteen hundred and ninety-two. The Secretary shall deposit the original texts in the Archives of the Pan American Sanitary Bureau and shall send copies thereof to the Member Governments of the Organization.

_____________________________________
Easton W. X. Douglas
President of the
XXXVI Meeting of the Directing Council
Representative of Jamaica

_____________________________________
Carlyle Guerra de Macedo
Secretary ex officio of the Directing Council
Director of the
Pan American Sanitary Bureau