XXVII Meeting of the PAHO Directing Council

XXXII Meeting of the WHO Regional Committee for the Americas

FINAL REPORT
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FINAL REPORT

The XXVII Meeting of the Directing Council of the Pan American Health Organization, XXXII Meeting of the Regional Committee of the World Health Organization for the Americas, was held at the Headquarters of the Organization in Washington, D.C., from 22 September to 3 October 1980, as convened by the Director of the Pan American Sanitary Bureau in accordance with Resolution 11 adopted by the Executive Committee at its 84th Meeting.

PARTICIPANTS

The Directing Council began its work under the presidency of Dr. Roquelino Recinos Méndez (Guatemala), Vice President of the XXVI Meeting of the Directing Council. The Governments of the following countries were represented: Argentina, Bahamas, Barbados, Bolivia, Brazil, Canada, Chile, Colombia, Costa Rica, Cuba, Dominican Republic, Ecuador, El Salvador, France, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Kingdom of the Netherlands, Mexico, Nicaragua, Panama, Paraguay, Peru, Suriname, Trinidad and Tobago, United Kingdom, United States of America, Uruguay, and Venezuela.

At the second plenary session Saint Lucia was admitted as a new Member of the Pan American Health Organization, and from then on its Government was represented in the Meeting.

In accordance with Rule 14 of its Rules of Procedure, the Executive Committee was represented by its Chairman, Mr. Michel Careau (Canada), and Dr. Nelson Vargas (Chile), a member of the Committee.

At the fourth plenary session Spain was admitted to the Pan American Health Organization with the status of Observer, and from then on its Government was represented as Observer in the Meeting, which was also attended by Observers from the Food and Agriculture Organization of the United Nations, the Hipólito Unanue Agreement, the Inter-American Development Bank, the International Committee of Military Medicine and Pharmacy, the Organization of American States, the United Nations Development Program, the United Nations Economic Commission for Latin America, and the United Nations Fund for Population Activities. Observers from 31 nongovernmental organizations were also present.

2The complete list of participants appear in the annex, p. 106.
OFFICERS

The President, the two Vice Presidents, and the Rapporteur were elected pursuant to Rule 18 of the Rules of Procedure of the Directing Council. The officers were as follows:

President: Dr. Roquelino Recinos Méndez, Guatemala
Vice Presidents: Dr. Jorge Michelsen, Colombia; Dr. Rodolfo Girón Flores, El Salvador
Rapporteur: Mr. Donald E. Miller, Jamaica
Secretary ex officio: Dr. Héctor R. Acuña, Director, Pan American Sanitary Bureau

COMMITTEE ON CREDENTIALS

Pursuant to Rule 27 of the Rules of Procedure, the Committee on Credentials was composed of the following members:

Chairman: Dr. José Manuel Borgoño, Chile
Rapporteur: Dr. Juan Ponce de León, Peru
Member: Dr. Gérard Martineau, Canada

GENERAL COMMITTEE

The Representatives of Barbados, Brazil, and the United States of America were elected to the General Committee, which in accordance with Rule 28 of the Rules of Procedure was composed as follows:

Dr. Roquelino Recinos Méndez, President of the Council, Guatemala
Dr. Jorge Michelsen, Vice President of the Council, Colombia
Dr. Rodolfo Girón Flores, Vice President of the Council, El Salvador
Mr. Donald E. Miller, Rapporteur of the Council, Jamaica
Ms. Billie A. Miller, Representative, Barbados
Dr. Alfredo Norberto Bica, Representative, Brazil
Dr. Howard Minners, Representative, United States of America
AGENDA

In accordance with Rule 10 of its Rules of Procedure, the Directing Council at its first plenary session adopted the provisional agenda (Document CD27/1, Rev. 4) submitted by the Director, after deleting Item 15 (Health and Youth).

WORKING GROUPS

Seven working groups were established. The first, composed of the Representatives of the Bahamas, Honduras, and Venezuela, was entrusted with the study of the application of Article 6-B of the Constitution concerning the suspension of the voting privileges of any Government more than two years in arrears in the payment of its quotas.

The second, consisting of the Representatives of Argentina, Ecuador, and Nicaragua, was entrusted with the preparation of a list of not more than three topics from which, in accordance with Rule 8 of the Rules for Technical Discussions, the topic would be chosen by the Directing Council, in plenary session, for the Technical Discussions to be held during the XXI Pan American Sanitary Conference, XXXIV Meeting of the Regional Committee of WHO for the Americas, in 1982.

The third, composed of the Representatives of Argentina, Canada, Chile, and Cuba, and later on also by the Representative of the United States of America, was instructed to draft proposed resolutions in connection with Item 10 (Regional Strategies of Health for All by the Year 2000).

The fourth, consisting of the Representatives of Barbados, the United States of America, and Venezuela, was instructed to draft a proposed resolution in connection with Item 16 (Report on Women in Development).

The fifth, composed of the Representatives of Argentina, Brazil, and the United States of America, was given the task of drafting a proposed resolution on the Pan American Zoonoses and Foot-and-Mouth Disease Centers.

The sixth, comprising the Representatives of Cuba, Guatemala, Mexico, and the United Kingdom, was entrusted with the drafting of a proposed resolution on a revolving fund for the acquisition of critical inputs.

The seventh, made up of the Representatives of Chile, Guyana, Trinidad and Tobago, and the United Kingdom, was entrusted with the task of drafting a proposed resolution on the Caribbean Epidemiology Center.

3All documents designated with the prefix “CD27” were printed in mimeographed form for the XXVII Meeting of the Directing Council.
TECHNICAL DISCUSSIONS

The Technical Discussions were held on 26 and 27 September 1980 and dealt with the topic “Community Health Education: Evaluation of Present Programs, New Approaches and Strategies.”

The following officers were appointed:

**Moderator:** Dr. Carmelo Calvosa Chacón  
Costa Rica  

**Rapporteur:** Ms. Veta Brown  
Bahamas  

**Technical Secretary:** Ms. Marilyn Rice  
Pan American Sanitary Bureau

**Group I**

**Moderator:** Dr. Merlin Fernández  
Honduras  

**Rapporteur:** Dr. Jaime Solórzano Espinoza  
Guatemala  

**Technical Secretaries:** Ms. Isabel Rojas Aleta  
Pan American  
Dr. Héctor García Manzanedo  
Sanitary Bureau

**Group II**

**Moderator:** Dr. Germán Jiménez Bozo  
Colombia  

**Rapporteur:** Dr. Mariano García Viveros  
Mexico  

**Technical Secretaries:** Dr. George Foster  
Pan American  
Dr. Felipe García Sánchez  
Sanitary Bureau

The Report on the Technical Discussions was submitted to the eleventh plenary session, which adopted a resolution on the subject.

SESSIONS

The Directing Council held a preliminary session, 16 plenary sessions, and a closing session.

The Committee on Credentials met five times, and the General Committee met three times.

RESOLUTIONS ADOPTED

During the Meeting the Directing Council adopted the following 41 Resolutions:
Resolution I

Request of the Government of Saint Lucia for Membership in the Pan American Health Organization

The Directing Council,

Having examined the formal request for membership in the Pan American Health Organization made on behalf of the Government of Saint Lucia by the Permanent Secretary of the Ministry of Health and Housing in a communication dated 9 May 1980; and

Considering that the Government of Saint Lucia has declared its readiness to accept all the obligations of the Constitution of the Pan American Health Organization, to comply with the provisions of the Pan American Sanitary Code, as amended by the Additional Protocol of 24 September 1952, and to contribute by means of a specified quota assessment to the financial support of the Organization,

Resolves:

1. To approve with satisfaction the request of the Government of Saint Lucia for membership in the Pan American Health Organization.

2. To instruct the Director to transmit this decision to the Member Governments of the Organization.

(Adopted at the second plenary session, 22 September 1980)

Resolution II

Annual Report of the Chairman of the Executive Committee

The Directing Council,

Having examined the Annual Report of the Chairman of the Executive Committee (Document CD27/5) on the work of the Committee from October 1979 to date, the period during which the 83rd and 84th Meetings were held; and

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

Resolves:

1. To take note of the Annual Report of the Chairman of the Executive Committee.
Committee (Document CD27/5).

2. To commend the Chairman and the other members of the Committee for their excellent work.

(Adopted at the fourth plenary session, 23 September 1980)

Resolution III

Annual Report of the Director

The Directing Council,

Having examined the Annual Report of the Director of the Pan American Sanitary Bureau, Regional Office of the World Health Organization for the Americas, for 1979 (Official Document 171); and

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

Resolves:

1. To approve the Annual Report of the Director of the Pan American Sanitary Bureau for 1979 (Official Document 171), to commend the Director for the numerous accomplishments and improvements, and to extend this commendation to all the staff of the Bureau.
2. To urge the Director to make abundant use of the Annual Report, and the many relevant items therein, in WHO and other forums as substantial testimony to the significant health cooperation taking place in the Region of the Americas.

(Adopted at the fifth plenary session, 24 September 1980)

Resolution IV

Request of the Government of Spain for Observer Status in the Pan American Health Organization

The Directing Council,

Considering that the Government of Spain has requested admission to the Pan American Health Organization as an Observer Country;
Considering that Spain and the countries of the Americas, and particularly those of Ibero-America, are bound by special historical and cultural ties;
Considering that the Organization of American States, of which PAHO is a specialized agency, by Resolution CP/Res. 54/62/72 of 2 February 1972 admitted Spain to the Organization of American States as a Permanent Observer; and

Recognizing that it is of mutual benefit to strengthen relations between Spain and the countries of the Americas in the health field,

Resolves:

1. To grant Spain the status of Observer Country in the Pan American Health Organization.

2. To recommend to the Director that he promote technical cooperation between Spain and the countries of the Americas.

3. To request the Director to communicate the present resolution to the Government of Spain.

(Adopted at the sixth plenary session, 24 September 1980)

Resolution V.

Report on the PAHO Award for Administration, 1980

The Directing Council,

Having reviewed the report of the Award Committee of the PAHO Award for Administration and Resolution XXIII of the 84th Meeting of the Executive Committee (Document CD27/20 and Annexes); and

Bearing in mind the regulations set forth in the procedure governing the PAHO Award for Administration and the modifications thereto proposed in Resolution XXIII of the 84th Meeting of the Executive Committee,

Resolves:

1. To declare Dr. Jair de Oliveira Soares of Brazil the winner of the PAHO Award for Administration, 1980.

2. To approve the proposed modifications to the procedure governing the PAHO Award for Administration contained in operative paragraph 3 of Resolution XXIII of the 84th Meeting of the Executive Committee.

(Adopted at the seventh plenary session, 25 September 1980)

Resolution VI

Biennial World Health Assemblies

The Directing Council,

Noting the discussions at the Thirty-third World Health Assembly in 1980 concerning the periodicity of World Health Assemblies,

Resolves:

1. To endorse Resolution WHA33.195 relating to the possible changeover from annual to biennial Assemblies.

2. To urge Member Governments of the Region to support the proposed amendments to the Constitution of the World Health Organization on this subject when they are put to the vote at the Thirty-fourth World Health Assembly in 1981.

3. To request the Director to transmit this resolution to the Director-General of the World Health Organization and to the Regional Directors of the other WHO Regions for submission to their Regional Committees.

(Adopted at the seventh plenary session, 25 September 1980)

Resolution VII

Election of Three Member Governments to the Executive Committee on the Termination of the Periods of Office of Brazil, Canada, and Venezuela

The Directing Council,

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

Considering that the Governments of Argentina, Jamaica, and Nicaragua were elected to serve on the Executive Committee on the termination of the periods of office of Brazil, Canada, and Venezuela,

Resolves:

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

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

(Adopted at the ninth plenary session, 29 September 1980)

Resolution VIII

Report on the I Inter-American Meeting, at the Ministerial Level, on Animal Health

The Directing Council,

Mindful of the report\(^6\) on the I Inter-American Meeting, at the Ministerial Level, on Animal Health (Document CD27/8);
Aware of the repercussions of animal diseases on the health and the economies of the countries of the Hemisphere; and
Cognizant of the common interest of Ministries of Health and of Agriculture in continuing their successful cooperation in programs for the prevention and control of zoonoses,

Resolves:

1. To take note of the report on the I Inter-American Meeting, at the Ministerial Level, on Animal Health (Document CD27/8).
2. To congratulate the Ministers of Agriculture of the Region on their efforts to improve the health of the peoples of the Americas by preventing and controlling animal diseases that affect the health and economies of the countries of the Hemisphere.
3. To urge the Governments and the international, bilateral, and private agencies of the Region to increase their efforts to combat the principal zoonoses, by providing the political, technical, and financial support necessary for the attainment of the goals set by each country.

(Adopted at the ninth plenary session, 29 September 1980)

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Resolution IX

Diarrheal Disease Control Program for the Americas

The Directing Council,

Bearing in mind the recommendations\textsuperscript{7} of the International Conference on Primary Health Care held at Alma-Ata, USSR, from 6 to 12 September 1978, Resolution WHA.31.44\textsuperscript{8} of the Thirty-first World Health Assembly, and Resolution XXXVIII\textsuperscript{9} of the XXVI Meeting of the Directing Council of PAHO;

Having reviewed the Director's report on implementation of the Diarrheal Disease Control Program for the Americas (Document CD27/26); and

Realizing that child mortality from acute diarrheal diseases can be rapidly reduced throughout the Region by the use of oral rehydration, and that immediate application of other Program strategies will gradually reduce diarrheal morbidity in children,

Resolves:

1. To recommend to the Member Governments that they coordinate activities under the Diarrheal Disease Control Program with those for increasing and improving the quality of the potable water supply, excreta disposal, and food control services in connection with the International Drinking Water Supply and Sanitation Decade with a view to promoting the multidisciplinary approach to these problems.

2. To commend the Director for his speedy implementation of the activities of the Diarrheal Disease Control Program for the Americas.

3. To endorse in its entirety the Director's report on implementation of the Program, which highlights activities to date and identifies needs.

4. To recommend to the Director that continued emphasis be placed on the Diarrheal Disease Control Program as an integrated component of primary health care.

\textit{(Adopted at the ninth plenary session, 29 September 1980)}

\textsuperscript{8}WHO Official Records 247 (1978), 31-32.
\textsuperscript{9}PAHO Official Document 167 (1980), 84-85.
Resolution X

Implications of the Study of WHO's Structures in Light of its Functions

The Directing Council,

Recognizing the commitment to the goal of health for all by the year 2000;
Bearing in mind Resolutions WHA30.43 (1977), WHA31.27 (1978), and WHA33.17 (1980), as well as Resolution XXIV of the XXVI Meeting of the Directing Council (1979) and Resolution XVII of the 84th Meeting of the Executive Committee (1980), concerning the Study of WHO's Structures in Light of Its Functions;
Considering the opinions expressed by the countries in the report of the Member Governments of the Region of the Americas on the above-mentioned study; and
Having examined the report and recommendations to the Directing Council presented by the Subcommittee on the Study of WHO's Structures in Light of Its Functions concerning the implications of the study for the Region (Document CD27/25),

Resolves:

1. To thank the Subcommittee for its report and recommendations.
2. To seek to implement the recommendations addressed to the Directing Council by deciding:
   a) To utilize the leadership capacity that exists in the Region in order to play a stronger role in relation to the Governing Bodies of WHO, particularly in view of the need to maintain continuity between biennial Assemblies, by:
      i) Sharing regional information and experience in dealing with health problems;
      ii) Presenting resolutions at the global level in relation to health needs and programs, and proposing planning and administrative mechanisms;
      iii) Making the expertise of individuals from specific Member Countries available to WHO expert committees;
   b) To promote increased emphasis on monitoring and evaluation of the Organization's activities;

c) To consider the establishment of a regional mechanism for improving the flow of extrabudgetary resources available for priority programs, including the flow from global to regional level of WHO.

3. To recommend that Member Governments:
   a) Establish dynamic and evolving national “health for all” plans that include appropriate indicators and quantifiable objectives so as to provide the means of assessing the progress in health already made and still to be made;
   b) Ensure, in cooperation with the Secretariat, that national health programs are appropriately consistent with the world-wide and Region-wide priorities of the Organization;
   c) Place emphasis at the national level on the equitable redistribution of available resources within health and related sectors for technical cooperation among developing countries (TCDC);
   d) Work to maintain the continuity and to enhance the preparation and coordination of delegations to the meetings of the Governing Bodies of PAHO and WHO, in order to achieve a more consistent participation;
   e) Set up joint PAHO/country health programming committees, with multisectoral participation, in order to facilitate the exchange of information on health programming and collaboration in the formulation and execution of PAHO programs.

4. To recommend that the Director:
   a) Strengthen the Organization’s plans and programs designed to give increased support to the achievement of health for all by the year 2000, by:
      i) Increasing the horizontal integration of the technical components of the Secretariat in order to ensure full coordination of the staff’s capabilities in respect of multisectoral, national, regional, and world strategies;
      ii) Endeavoring to synchronize the Organization’s planning cycles with those of WHO, taking into consideration the planning cycles of other agencies within the United Nations system;
      iii) Analyzing the content and timing of the meetings of the Executive Committee and the Directing Council in order to strengthen PAHO’s contribution to the review process of the Executive Board and World Health Assembly, and making recommendations to the 86th Meeting of the Executive Committee;
      iv) Seeking ways to broaden the scope of the Advisory Committee on Medical Research (ACMR) in order to utilize its capabilities in the regional priority-setting process;
b) Consider reorienting the role and functions of the Pan American Health and Education Foundation (PAHEF) to serve as a mechanism for multisectoral fund-raising.

c) Devise additional mechanisms for assisting Member Governments in evaluating their health status and the effectiveness of programs undertaken within or outside the Organization to deal with national health problems, in order to aid the Governments in future health planning and programming;

d) Increase the emphasis on evaluation, utilizing AMPES and the Pan American Centers model, review both AMRO and country projects in terms of their priority in achieving health for all by the year 2000, and report on the progress made in these evaluations to future meetings of the Directing Council;

e) Play a more vigorous leadership role in working with Member Governments to facilitate their interaction to pursue TCDC efforts in matters of common interest, using such mechanisms as the Pan American Centers and advisory committees to focus on:

   i) Stimulating cooperative activities at subregional levels;
   ii) Providing information calculated to encourage a dialogue among interested countries;
   iii) Establishing and coordinating the exchange of information;

f) Ensure that the process for selecting future Country Representatives is broadened to include qualified applicants with international experience coming from a variety of backgrounds (e.g., the social sciences, engineering, business administration) and with appropriate basic skills and experience, particularly in management, to meet the wider responsibilities of the coming decades;

g) Continue to increase the support given to Country Representatives and delegate to them increased responsibilities, at the same time improving communications and managerial support and providing more flexible administrative guidelines for field work. In conjunction with this, the Director should:

   i) Emphasize in-service training for field office staff by means of seminars, workshops, correspondence courses, and other continuing education mechanisms;
   ii) Devise ways in which Country Representatives can participate in the preparation and analysis of PAHO documents;
   iii) Ensure that all Country Representatives are informed of the decisions made by the PAHO Governing Bodies.

(Adopted at the tenth plenary session, 29 September 1980)
Resolution XI

Report of the PAHO Advisory Committee on Medical Research

The Directing Council,

Having examined the report of the PAHO Advisory Committee on Medical Research for the period June 1979 to May 1980 (Document CD27/30),

Resolves:

1. To take note of the concern of the PAHO Advisory Committee on Medical Research for areas of research that provide the greatest contribution toward solving problems of PAHO and its Member Countries, such as diarrheal diseases, health services research, the formation of ethical review committees and research information, in support of PAHO and the activities of the Member Governments.

2. To urge the Director to make even greater use of the PAHO Advisory Committee on Medical Research in defining priorities and promoting programs which will help the Organization to reach its goal of health for all.

3. To commend the PAHO Advisory Committee on Medical Research on its innovative work which increasingly supports the broad scientific and technical activities of the Organization.

(Adopted at the tenth plenary session, 29 September 1980)

Resolución XII

Selection of Two Governments, Each to Designate a Representative to Serve on the Joint Coordinating Board of the WHO Special Program for Research and Training in Tropical Diseases

The Directing Council,

Bearing in mind that the composition of the Joint Coordinating Board of the WHO Special Program for Research and Training in Tropical Diseases is to include 12 members selected by the WHO Regional Committees from among those countries directly affected by the diseases about which the Program is directly concerned, or from those countries providing technical or scientific support to the Program; and

Considering that two of these 12 countries must be selected by the Regional Committee for the Americas,
Resolves:

1. To select the Government of Mexico to designate a representative to serve on the Joint Coordinating Board for three years.
2. To select the Government of Cuba to designate a representative to serve on the Joint Coordinating Board for two years.

(Adopted at the tenth plenary session, 29 September 1980)

Resolution XIII

Hemispheric Malaria Control Plan

The Directing Council,

Considering the deterioration of the malaria situation in the Region of the Americas in recent years;

Bearing in mind Resolution XXX\(^2\) of the XXVI Meeting of the Directing Council, which requested the Director to prepare a hemispheric plan for the promotion and support of malaria programs;

Mindful that the guidelines for this plan were formulated at the III Meeting of Directors of National Malaria Eradication Services (Mexico, 1979); and

Considering that several countries have already completed their revision of the basic strategies for conducting comprehensive control programs and for intensifying their operations against the disease, as provided in Resolution XVIII\(^3\) of the XX Pan American Sanitary Conference, which declared 1980 as the "Year of Frontal Struggle with Malaria in the Americas,"

Resolves:

1. To take note of the Director’s report (Document CD27/24) on the progress made in preparing the hemispheric malaria control plan, in which eradication is the ultimate goal.
2. To suggest to the Governments which have not yet completed the review of their national malaria control plans that they proceed to evaluate the strategies used in their programs, including coordinated control measures in border regions, in accordance with the general guidelines of the hemispheric plan and in the frame of reference of the goal of health for all by the year 2000.

\(^3\)PAHO Official Document 162 (1979), 67-68.
3. To again request the Governments to assign high priority and appropriate technical and administrative support to the integration of malaria control operations into primary health care in implementing their national plans.

4. To request the Governments and the Director to promote and support the development of the components of the hemispheric malaria control plan, particularly the education and training of program personnel, in conjunction with those components aimed at the extension of coverage and at research in malaria control programs.

5. To request the Director to continue the effort to channel extrabudgetary funds toward the support of malaria control in the Hemisphere.

(Adopted at the tenth plenary session, 29 September 1980)

Resolution XIV
Technical Cooperation among Developing Countries

The Directing Council,

Having noted the progress report on technical cooperation among developing countries (TCDC) in the Region of the Americas (Document CD27/18);
Reaffirming the importance of the international technical cooperation mechanism for making the countries nationally and collectively self-reliant in the development process in general and in the health sector in particular; and
Recognizing the part that TCDC will play in the implementation of the strategies of health for all by the year 2000,

Resolves:

1. To request the developing countries in the Region of the Americas to continue their efforts to promote and strengthen TCDC activities.

2. To urge all countries to continue supporting TCDC activities among the Member Countries.

3. To recommend to the Director that he continue collaborating with the countries in the area of TCDC and incorporating these mechanisms into the Organization's cooperation programs.

4. To request the Director that in the future he include the information on TCDC in the Region in his Annual Report.

(Adopted at the eleventh plenary session, 30 September 1980)
Resolution XV

Expanded Program on Immunization

The Directing Council,

Considering that immunization programs constitute one of the highest priorities of the Region;

Having noted that immunization coverage in the Region remains low, particularly for children under one year of age and pregnant women, and the limitations of the information systems necessary for the surveillance of the diseases included in the Expanded Program on Immunization (EPI);

Recognizing that good quality vaccine is of fundamental importance for the success of the Program;

Having taken note of the progress accomplished (Document CD27/16) in the development of regional strategies for the implementation of this Program, particularly the approach utilized for strengthening the managerial capabilities through the EPI training courses and the efforts to integrate these activities within the context of primary health care;

Taking note of the rapid establishment of the Regional Cold Chain Development Center recommended in Resolution XXI\(^4\) of the XXVI Meeting of the Directing Council;

Having considered the still limited capitalization of the EPI Revolving Fund and realizing that the feasibility studies for the establishment of this Fund approved by the XXV Meeting of the Directing Council, and subsequently by the XX Pan American Sanitary Conference,\(^{15}\) showed that a level of US\$4 million would be necessary for its smooth operation; and

Bearing in mind that the achievement of the goals of the EPI by 1990 will be a milestone along the road toward attainment of health for all by the year 2000,

Resolves:

1. To approve the training strategies being implemented and urge Member Governments to formulate specific plans for multiplying the EPI national training workshops at the primary health care level.

2. To recommend to Member Governments that vaccination activities be geared above all toward the high-risk groups of children under one year of age and pregnant women.


\(^{15}\)Resolutions XXVII and XVI. PAHO Official Documents 152 (1978), 69-70 and 162 (1979),
3. To institute a system that will allow for continuous evaluation of the coverage of the population.

4. To urge Governments, within their epidemiological surveillance systems, to give high priority to reinforcing the surveillance of the diseases included in this Program by means of guidelines applicable to all levels of the health system, in order to measure the real impact of EPI in reducing disease.

5. To recommend that countries which are involved in the production of DPT and BCG vaccines and which have installations equipped to perform tests and titrations on attenuated live virus vaccines, make every effort to comply with the requirements laid down by WHO for quality control of these products and provide support for strengthening national quality control services.

6. To commend the Director for his efforts in promoting the rapid development of the EPI in the Americas.

7. To recommend that the Director make efforts to include the EPI training materials in all PAHO-sponsored training of primary health care workers.

8. To request the Director to support the consolidation and operation of the Regional Cold Chain Development Center.

9. To ask the Director to study and present to the XXVIII Meeting of the Directing Council, in conjunction with the progress report, the alternatives for full capitalization of the EPI Revolving Fund to the needed level of US$4 million, including restoration of the level of the Revolving Fund by timely reimbursements.

(Adopted at the eleventh plenary session, 30 September 1980)

Resolution XVI

Noncommunicable Diseases Prevention and Control Program

The Directing Council,

Bearing in mind Resolution XXIV of the XXIII Meeting of the Directing Council and Resolution XVIII16 of the XXVI Meeting of the Directing Council;

Having considered the report of the Director on the Noncommunicable Diseases Prevention and Control Program (Document CD27/17);

Recognizing that the problem of chronic noncommunicable diseases is becoming increasingly important in the countries of the Region and is thus causing major changes in the morbidity and mortality structure and in the demand for services;

Considering the growth of the aged population and of its special health problems, and the scarcity of adequate geriatric care services; and

Noting that the program presented emphasizes disease prevention and health promotion in the context of the general health services and identifies priority areas on the basis of the magnitude of the problem and the availability of effective control methods,

Resolves:

1. To urge the Member Countries to identify in their national health plans programs and strategies for achieving health for all by the year 2000, measures for the prevention of chronic noncommunicable diseases, and action on the risk factors that are causing an increase in morbidity and mortality related to these diseases.

2. To urge the Governments to study the health problems of the aged and to establish specific geriatric programs for them.

3. To recommend to the countries that, in accordance with their priorities, they promote activities for the prevention and control of these diseases integrated into those of the general health services, with special attention to diseases for which there are effective methods of control, such as hypertension, rheumatic fever and rheumatic heart disease, diabetes mellitus, and cancer of the cervix.

4. To request the Director to support programs for improved care of the aged and to report to the Executive Committee on progress in this field.

5. To commend the Director for the strategy he is developing to orient and support the programs for the prevention and control of noncommunicable diseases in the countries of the Region.

6. To request the Director to continue to support the programs for the prevention and control of noncommunicable diseases in the Member Countries, as well as cooperative activities among the countries, in order to encourage an exchange of knowledge and technology.

7. To request the Director to continue his efforts to obtain extrabudgetary resources for supporting these programs.

(Adopted at the eleventh plenary session, 30 September 1980)
Resolution XVII

Women in Development

The Directing Council,

Recognizing that health is an integral part of development, and that to ensure the achievement of health for all by the year 2000, women must be actively involved in the development process;

Considering that the health goals and priorities of the 1975 United Nations World Plan of Action remain valid and represent basic aspirations of Member Governments;

Recalling that the World Conference of the United Nations Decade for Women held at Copenhagen in 1980 reported that insufficient progress has been attained at the mid-point of the Decade to achieve the objectives set forth by the Governments for improving the status of women;

Bearing in mind Resolution XXXVII of the XIX Pan American Sanitary Conference, Resolution X adopted by the Directing Council at its XXIII Meeting, and Resolution XXV adopted by the Directing Council at its XXIV Meeting; 17

Having reviewed the report of the Director (Document CD27/33), which describes the activities of PASB in relation to the role of women in health during the first half of the Decade for Women;

Noting that although there has been some progress, much more remains to be achieved in advancing the status of women as well as their placement in decision-making positions in the health sector and in PAHO; and

Considering that in many countries the basic problem of inequality of opportunities for women as well as discrimination against women in all fields results from the traditional orientation of life style and from a type of education which gives preferential placement to men,

Resolves:

1. To thank the Director for the review of the status of women in the Region and within the Bureau.

2. To urge the Governments to renew their commitment to the goals of the Decade for Women and to provide for the specific physical and mental health and development needs of women through effective national and international action to develop and implement primary health care throughout the Region.

3. To further urge the Governments to introduce the concept of equality

between the sexes in their basic educational programs with the aim of eliminating prejudice and discrimination against women.

4. To recommend that Governments, with assistance from PAHO, give increased attention to the special need of disabled women of all ages for medical and social rehabilitation, particularly during 1981, the International Year of the Disabled.

5. To recommend that a special subcommittee of the Executive Committee be established to examine, with the cooperation of PASB, the World Plan of Action proposed by the Copenhagen Conference and develop a plan of implementation specifically oriented toward meeting the health needs of the Region and seeking solutions to the obstacles which interfered with the progress in the first half of the Decade, and that this plan, after review by the Member Governments, be presented to the 86th Meeting of the Executive Committee in June 1981.

6. To further recommend that the special subcommittee of the Executive Committee mentioned in paragraph 5 continue to monitor the progress made in the implementation of this Plan of Action and the achievement of the goals of the Decade.

7. To encourage the Governments to make it possible for women to play an active role in health development, particularly at the decision-making and planning levels, and to provide facilities for training them for appropriate positions.

8. To recommend to the Governments that they promote the development of technologies appropriate to ease the burden of families in regard to household activities, water supplies, and food production and preparation.

9. To recommend to the Governments that they consider the possibility of developing specific community projects, with the active participation of women, aimed at accomplishing the goals of the Decade.

10. To recommend to the Director that the Organization:

10.1 Cooperate with Member Governments in the development of plans of action which incorporate women in decision-making positions at all levels.

10.2 Strengthen its mechanisms for coordination with other organizations of the Inter-American System and the United Nations System in order to avoid duplication of efforts and utilize the available resources most effectively.

10.3 Provide technical cooperation in the development of educational material aimed at enhancing women’s role in health and community development.

10.4 Provide technical cooperation in identifying and formulating projects that involve the active participation of women in health and community development.

10.5 Intensify the selection and recruitment of women for professional posts, including those at the highest levels, and promote the leadership abilities of women within PAHO, particularly in policy-making positions.
10.6 Further develop a focal point at the highest level of the Bureau to ensure that women's needs and roles are adequately considered in the formulation and implementation of health programs and to encourage the enhancement of the status of women within the Bureau, utilizing mechanisms such as career counseling and in-service training.

10.7 Present a report on the progress achieved in these areas to the XXX Meeting of the Directing Council.

(Adopted at the twelfth plenary session, 30 September 1980)

Resolution XVIII

Evaluation of the Pan American Zoonoses Center and the Pan American Foot-and-Mouth Disease Center and Recommendations on Budgetary Adjustments for 1981

The Directing Council,

Having examined the report of the external Evaluation Team for the Pan American Zoonoses and Foot-and-Mouth Disease Centers (Document CD27/22 and Annexes I, II, and III) and Resolution XXXI of the XX Pan American Sanitary Conference, Resolution XXVII of the XXVI Meeting of the Directing Council, and Resolution XXI of the 84th Meeting of the Executive Committee;¹⁸

Acknowledging that the Team's recommendation for 1981 contained in Document CD27/22 and the priority ranking of activities and future requests for development of a new or different mechanism were based on maintaining the Center programs at the 1980 level;

Guided by the trends that appear to be emerging from the ongoing evaluations of these and other Pan American Centers and that point to: program consolidation on the basis of the priorities of the countries served; the need for strengthening program management; the responsibilities of the countries being served by the Centers in assuming a growing role in their programmatic and financial activities; and recognition that, in the future, the fundamental role of the Organization in relation to the Centers should be to carry out coordination and management functions; and

Recognizing that severe budgetary restrictions may require reductions and a different set of priorities, particularly at the Pan American Zoonoses Center,

Resolves:

1. To thank the Director for the report on the evaluation of the Pan American Zoonoses Center and the Pan American Foot-and-Mouth Disease Center and for the recommendations on budgetary adjustments for 1981 (Document CD27/22).
2. To decide against the Evaluation Team's proposal that a supplementary budget increase be adopted for the two Centers for 1981.
3. To maintain the PAHO regular budget ceiling for the Pan American Zoonoses Center at US$1,294,000 for 1981 (Official Document 161).
4. To thank the Argentine Government for its willingness to contribute US$2,596,000 for the 1981 budget of the Pan American Zoonoses Center.
6. To request the Director, with the participation of the Executive Committee, to undertake the appropriate reductions, decentralization and/or other necessary action at both Centers, in accordance with the available resources, observing in the Pan American Zoonoses Center the following priorities: 1) rabies; 2) food microbiology; 3) hydatidosis; 4) tuberculosis; 5) brucellosis; and 6) leptospirosis. The Research Unit at Azul and the Pathology Unit of the Pan American Zoonoses Center should be kept for support of the other activities.
7. To request the Director, with the participation of the Executive Committee, to determine the appropriate components of each priority program for the Pan American Zoonoses Center within the available resources.
8. To endorse the recommendation that the Director should seek voluntary extrabudgetary contributions from Governments, particularly through the Ministries of Agriculture, as recommended by the Evaluation Team, as well as from multilateral, bilateral, and private agencies, to enable the Centers to function more effectively.
9. To request the Ministers of Agriculture of the Hemisphere, at the next Inter-American Meeting, at the Ministerial Level, on Animal Health, to develop for the consideration of the Directing Council a provisional plan of action designed to identify dependable sources of financing for the Pan American Zoonoses Center and the Pan American Foot-and-Mouth Disease Center outside the PAHO regular budget.

(Adopted at the twelfth plenary session, 30 September 1980)
Resolution XIX

Nursing Goals

The Directing Council,

Considering that development of the extended coverage programs and application of the idea of primary care as the principal strategy for achieving the goal of health for all by the year 2000 necessitate changes in the structure, education, and utilization of health personnel;

Recognizing that nursing staff represent the greatest human resource potential in the delivery of primary care;

Recognizing the need to expand the function of nurses so that they can take on greater responsibility in the prevention of disease and the promotion, maintenance, and restoration of health; and

Bearing in mind the report submitted by the Director (Document CD27/32),

Resolves:

1. To recommend to the Governments that they make greater efforts:
   a) To define the expanded function of nurses and make it official so that nurses can assume greater responsibilities in the delivery of primary care, including as part of their work the identification and evaluation of the health and socioeconomic problems and needs of the community, the planning of priority action on the basis of high-risk groups, treatment of the most common diseases whose course can be predicted, and support to the community to enable it to reach a desirable level of self-direction in terms of health;
   b) To increase the number of nurses and auxiliaries in the health services by creating new posts and/or redistributing existing posts so that nurses can carry out their new responsibilities at all levels, but particularly at the primary level of supervision and systematic, continuous support for primary care agents;
   c) To train nurses and auxiliaries to perform their new role efficiently by means of basic, post-basic, and continuing education programs; and
   d) To make and/or consolidate changes in the basic and post-basic nursing and auxiliaries’ training programs with a view to emphasizing and/or reinforcing the teaching of epidemiology, social sciences, community health, primary care, evaluation, and research.

2. To request the Director to provide the Governments with the cooperation they need to achieve the objectives indicated, and to develop a sound data base for predicting nursing needs and resources (including auxiliaries) for the years 1985, 1990, and 2000.
The Directing Council,

Bearing in mind that the Ministers of Health of the Region of the Americas at their III Special Meeting in 1972 established as the main objective the extension of health services, coverage to all underserved populations and to those completely lacking such services and that at their IV Special Meeting in 1977 they ratified and recognized "primary health care" as the main strategy to achieve total coverage in the sectoral context of national socioeconomic development;

Having reviewed Resolution WHA30.43 in which the World Health Assembly resolved that the main social goal of the Governments and WHO should be "the attainment by all the people of the world by the year 2000 of a level of health that will permit them to lead a socially and economically productive life;" 

Considering that the World Health Assembly in Resolution WHA32.30 endorsed the Declaration of Alma-Ata, which recognizes that primary health care is the key to the attainment of health for all by the year 2000 as part of general development, in the spirit of social justice, and urged Member States to define and to put into practice national, regional, and global strategies to attain that goal;

Recognizing that, according to Resolution XXVIII of the XXIV Meeting of the Directing Council of PAHO, the final evaluation of the Ten-Year Health Plan for the Americas should take place in 1980, and that given the commitment of the Governments of the Region to comply with Resolution WHA32.30 of the World Health Assembly on the formulation of regional strategies, the Executive Committee of PAHO at its 82nd Meeting approved a plan of work, contained in Resolution XIX, which joined in a single process

3. To request the Governments to cooperate with the Director in developing the required data base.

(Adopted at the thirteenth plenary session, 1 October 1980)

Resolution XX

Regional Strategies of Health for All by the Year 2000

the evaluation of the Ten-Year Health Plan and the formulation of national and regional strategies;

Taking into consideration that attaining the goal for the year 2000 constitutes a dynamic process which creates new situations, and that therefore it is necessary to establish its evaluation and systematic monitoring in order to identify new problems and courses of action, and to adjust the strategies as part of this ongoing process;

Recognizing that there are problems which demand joint and synergic action among several countries to ensure an efficient solution in the most effective manner, and that the key to ensure the success of these initiatives lies in the evaluation by each country of its capacity to provide and utilize assistance, and in the national analysis and programming of external cooperation;

Considering that, in agreement with Resolution VII\textsuperscript{24} of the 84th Meeting of the Executive Committee, the Subcommittee on Long-Term Planning and Programming revised the reference document prepared by the Secretariat: “Developments in the Health Sector in the 1971-1980 Decade, and Strategies for Attaining the Goal of Health for All by the Year 2000,” incorporating modifications, elaborations, and constructive criticisms made of its content in order to give the document greater consistency and coherence; and

In view of the fact that during the XXVII Meeting of the Directing Council several countries have made additional contributions for inclusion in the regional strategies, which must be taken into account,

Resolves:

1. To approve Document CD27/34.A: “Developments in the Health Sector in the 1971-1980 Decade, and Strategies for Attaining the Goal of Health for All by the Year 2000,” for transmittal to WHO with a preface announcing that a complementary document prepared by the Ad Hoc Working Group on the basis of the additional contributions and criticisms made in the discussions will be sent by 15 November 1980.

2. To stress that primary health care and its components constitute the basic strategies for attaining the goal of health for all by the year 2000 in the Region of the Americas, which include: the extension of health services coverage and environmental improvement; community organization and participation; improvement of mechanisms for intersectoral linkages; the development of research and appropriate technologies, and of human resources; the availability and production of critical inputs; the establishment of national systems for financing the health sector; and the reorientation of international cooperation.

\textsuperscript{24} \textit{PAHO Official Document 172 (1980), 34-35.}
3. To consider the regional strategies contained in Document CD27/34.A and the additional contributions and criticisms brought out in the XXVII Meeting of the Directing Council, as noted in the preface, as constituting the basis for the Pan American Health Organization's policy and programming, and as representing the contribution of the Region of the Americas to the global strategies of the World Health Organization.

4. To recommend to the Governments that they:
   
a) Adjust their health policies and plans and make them compatible with national development policies and strategies, taking into consideration the implications of the national strategies adopted by them, and the regional strategies which they have agreed upon to attain the goal of health for all by the year 2000;
   
b) Reorganize the health sector to include community participation and to improve the links between the different components of the sector, relating them to other development sectors;
   
c) Develop the operative capacity of each of the levels of care of the health sector so as to maximize its efficiency and the effectiveness of its activities, and revise and redefine its financing systems;
   
d) Analyze and program the human, physical, and financial resources needed to comply with national programs, thus ensuring the maximum efficiency and social relevance in their utilization;
   
e) Orient the development of research and appropriate technologies in accordance with the needs of the national development process;
   
f) Improve the programming and coordination of international cooperation in the intersectoral context of each country;
   
g) Define within their external cooperation plans the areas in which technical cooperation among developing countries (TCDC) may be applied, and analyze and develop national capacity in order to utilize and to provide cooperation, and identify those problems whose solution might be facilitated by the joint action of the countries, avoiding duplication;
   
h) Develop their national planning, programming, information, control, and evaluation systems;
   
i) Review and evaluate their strategies periodically and introduce the necessary adjustments within the context of national development;
   
j) Assure the continuity of all activities which acquire special significance during the celebrations promoted in the United Nations System in connection with health, such as the activities generated by the International Year of the Child.

5. To request the Director:
   
a) To prepare a plan of action for the development of all strategies agreed upon, including technical and administrative support measures, promotion of the identification and mobilization of resources, research promotion, development of appropriate technologies and information exchange, and promotion
of intrasectoral and intersectoral coordination within a monitoring and evaluation system for the above strategies; this plan of action to be submitted to the XXVIII Meeting of the Directing Council, following its approval by the Executive Committee;

b) To promote the use of TCDC, including its information systems;

c) To develop the necessary instruments and take the appropriate initiatives to strengthen the technical cooperation and international coordination functions of the Organization;

d) To adopt the necessary measures for improving the programming, information, control, and evaluation system in relation to the Organization's short-term and medium-term program of technical cooperation.

(Adopted at the fourteenth plenary session, 1 October 1980)

Resolution XXI

Ad Hoc Working Group to Complement the Regional Strategies of Health for All by the Year 2000

The Directing Council,

Bearing in mind the discussions during the XXVII Meeting of the Directing Council on the subject of "Regional Strategies of Health for All by the Year 2000," and the directions contained in Resolution XX;25

Being convinced of the advisability of incorporating contributions and observations made during the discussions at that Meeting; and

Having considered the report of the Working Group appointed by the Directing Council,

Resolves:

1. To establish an Ad Hoc Working Group to draw up, in accordance with the guidelines provided in the preface to Document CD27/34.A, the complementary document reflecting the additional contributions and observations made during the XXVII Meeting of the Directing Council in connection with the regional strategies, for transmittal in due course for consideration by the WHO Executive Board Program Committee.

2. To request the Governments of Brazil, Canada, Chile, Colombia, Cuba, Nicaragua, and Saint Lucia to appoint one representative each to the Ad Hoc Working Group, which will meet from 24 to 31 October 1980.

3. To delegate to the Ad Hoc Working Group the authority it needs to approve, on behalf of the Directing Council, the complementary document to be sent to the World Health Organization, and to transmit this to Member Governments for information.

4. To request the Director to facilitate the work of the Ad Hoc Working Group in every possible way, and to prepare for it all the documents and background materials it may require.

5. To authorize the Director to make the necessary appropriations to cover the cost of the meeting of the Ad Hoc Working Group.

(Adopted at the fourteenth plenary session, 1 October 1980)

Resolution XXII

Medium-term Program for the Development of Human Resources

The Directing Council,

Considering that Resolution XXXII26 adopted at the XXV Meeting of the Directing Council recommends the use of the Medium-term Program for the Development of Human Resources as a basic guide for country programming in this field of activity;

Bearing in mind the request in that resolution that the Director report periodically to the Governing Bodies on the progress of the Program; and

Having studied the progress report presented by the Secretariat (Document CD27/29),

Resolves:

1. To take note of the progress achieved, and particularly to take cognizance of the effort made to adjust the regional plan to the specific needs and characteristics of the programming of each country.

2. To recommend that the regional plan continue to be used with adjustments to accommodate the new strategic proposals formulated by the countries for attaining the goal of health for all by the year 2000.

(Adopted at the fourteenth plenary session, 1 October 1980)

Resolution XXIII

Revolving Fund and Other Mechanisms for the Acquisition of Critical Health Inputs

The Directing Council,

Considering the successful experience with the Revolving Fund of the Expanded Program on Immunization in the Americas, the Textbook Program, and others, and the benefits derived therefrom by the Member Countries; and

Recognizing the growing demand on the part of the Member Countries for critical health inputs such as drugs, reagents, other biological products, and insecticides needed to achieve the goal of health for all by the year 2000,

Resolves:

1. To instruct the Director to have studies carried out on issues involved in setting up a revolving fund and/or other mechanisms for the acquisition of critical health inputs.

2. To request the Member Governments, bilateral and multilateral organizations, foundations, and other private institutions, to give financial and other support for the study of such mechanisms.

3. To instruct the Director to submit to the Executive Committee for consideration the result of the studies referred to in paragraph 1.

4. To request the Executive Committee to examine the studies in question, and if it finds them acceptable, to submit them to the Directing Council for approval.

(Adopted at the fourteenth plenary session, 1 October 1980)

Resolution XXIV

Selection of the Topic for the Technical Discussions to be Held in 1982 during the XXI Pan American Sanitary Conference, XXXIV Meeting of the Regional Committee of WHO for the Americas

The Directing Council,

Considering that the provisions of Rules 7, 8, and 9 of the Rules for Technical Discussions have been followed in the selection of the topic for the 1982 Technical Discussions,
Resolves:

To declare “Managerial Analysis of Health Systems” selected as the topic for the Technical Discussions to be held in 1982 during the XXI Pan American Sanitary Conference, XXXIV Meeting of the Regional Committee of WHO for the Americas.

(Adopted at the fourteenth plenary session, 1 October 1980)

Resolution XXV


The Directing Council,

Having examined the Financial Report of the Director and Report of the External Auditor for fiscal year 1979 (Official Document 168); and

Recognizing that the Organization continues to be in a sound financial situation,

Resolves:


2. To commend the Director for having maintained a sound financial situation.

(Adopted at the fourteenth plenary session, 1 October 1980)

Resolution XXVI

Status of the Evaluation of the Pan American Centers

Caribbean Food and Nutrition Institute

The Directing Council,

Having examined the progress report on the evaluation of the Caribbean Food and Nutrition Institute (Document CD27/23, Add. II);
Taking account of the provisions of Resolution XXXI of the XX Meeting of the Pan American Sanitary Conference (1978), Resolution XXXI of the XXVI Meeting of the Directing Council (1979), and Resolution XXII of the 84th Meeting of the Executive Committee (1980);\(^{27}\)

Bearing in mind that the third phase of the evaluation procedure, namely responses by the participating Governments and institutions to the key issues formulated by the Evaluation Team, is in progress;

Recognizing that these responses are a very important part of the evaluation process; and

Guided by the trends that appear to be emerging from the ongoing evaluations of the five Pan American Centers and that point to: program consolidation on the basis of the priorities of the countries served; the need for strengthening program management; the responsibility of the countries being served by the Centers to assume a growing role in the programmatic and financial activities of the Centers; and recognition that, over time, the fundamental role of the Organization in relation to the Centers should be one of coordination and management, and not directly operational,

Resolves:

1. To thank those Governments that have already responded to the key issues and to urge those that have not yet done so to reply as soon as possible.

2. To take note of the preliminary report on the Caribbean Food and Nutrition Institute, and to thank the Director for that report.

3. To request that the evaluation be continued, and that it include the management and cost of the services provided.

4. To request the Director to consult with the participating Governments, in particular the host Government, for the solution of problems associated with the establishment of program priorities, program consolidation, housing, staffing, and stable financial support for its services.

5. To request the Director to assist the participating Governments in achieving a progressively higher degree of self-reliance, both technical and financial, in the further development of the Institute.

6. To request the Director to ensure that the completed report is available to the next Meeting of the Directing Council.

7. To request the Director to take the appropriate steps, in consultation with the host Government, to solve the problem of housing for the Center.

(Adopted at the fifteenth plenary session, 2 October 1980)

Resolution XXVII

Status of the Evaluation of the Pan American Centers

Institute of Nutrition of Central America and Panama

The Directing Council,

Having examined the report (Document CD27/23, Add. III) on the evaluation of the Institute of Nutrition of Central America and Panama (INCAP);

Taking account of the provisions of Resolution XXXI of the XX Meeting of the Pan American Sanitary Conference (1978), Resolution XXXI of the XXVI Meeting of the Directing Council (1979), and Resolution XXII of the 84th Meeting of the Executive Committee (1980);\(^2\)

Considering Resolution IV of the XXXI Meeting of the Directing Council of INCAP, establishing a study group to study the options for the future of the Institute;

Bearing in mind that the Evaluation Team’s assessment, jointly with the Center staff, of the program priorities of the Center, has been delayed by recent unforeseen developments; and

Guided by the trends that appear to be emerging from the ongoing evaluations of the five Pan American Centers and that point to program consolidation on the basis of the priorities of the countries served; the need for strengthening program management; the responsibility of the countries being served by the Centers to assume a growing role in the programmatic and financial activities of the Centers; and recognition that, over time, the fundamental role of the Organization in relation to the Centers should be one of coordination and management, and not directly operational,

Resolves:

1. To thank the Member Governments for their participation in the evaluation process.

2. To take note of the report on the Institute of Nutrition of Central America and Panama, and to thank the Director for that report.

3. To request the Director to ensure that the evaluation is continued, and that it include the management and cost of the services provided.

4. To request the Director to enlist the cooperation of the participating Governments, in particular the host Government, in accordance with Resolution IV of the XXXI Meeting of the Directing Council of INCAP, in the solu-

\(^2\)Ibid.
tion of problems associated with the establishment of program priorities, pro-
gram consolidation, staffing, and stable financial support for services to coun-
tries.

5. To request the Director to assist the Evaluation Team in completing the
assessment of the program priorities and to implement the necessary changes
at the Institute, in keeping with program consolidation and achieving a
healthier balance between regular and extrabudgetary resources, since the lat-
ter may be reduced.

(Adopted at the fifteenth plenary session,
2 October 1980)

Resolution XXVIII

Program of Technical Cooperation with Nicaragua

The Directing Council,

Considering that the XXVI Meeting of the Directing Council adopted
Resolution VII instructing the Executive Committee to examine the
progress of the program of technical cooperation with Nicaragua;

Considering that the Director has presented a detailed report evaluating the
program of technical cooperation, including that based on extrabudgetary
funds (Document CD27/31);

Bearing in mind that the 84th Meeting of the Executive Committee examined the progress of this program and commended the efficiency with which it
was being conducted; and

Considering that the Government of Nicaragua has now established its
policies and programs in the health sector in accordance with the country’s
new socioeconomic priorities,

Resolves:

1. To take note of the report presented by the Director (Document CD27/
31) and of Resolution XIII on the program of technical cooperation with
Nicaragua, adopted by the 84th Meeting of the Executive Committee.

2. To congratulate the Director on fulfilling the terms of Resolution VII of
the XXVI Meeting of the Directing Council by meeting promptly and effi-
ciently the technical cooperation needs formulated by the Government of
Nicaragua.

31Ibid., 39-40.
3. To request the Director to include in his Annual Report appropriate information on technical cooperation with Nicaragua.

(Adopted at the fifteenth plenary session, 2 October 1980)

Resolution XXIX

Status of the Evaluation of the Pan American Centers

Caribbean Epidemiology Center

The Directing Council,

Having examined the evaluation report on the Caribbean Epidemiology Center (CAREC) (Document CD27/23, Add. I);

Taking account of the provisions of Resolution XXXI of the XX Pan American Sanitary Conference (1978), Resolution XXXI of the XXVI Meeting of the Directing Council (1979), and Resolution XXII of the 84th Meeting of the Executive Committee (1980); 32

Bearing in mind that this evaluation coincided with the timing of the Mid-term Review of CAREC, 1974-1979, as provided for in the Multilateral Agreement between PAHO and the Signatory Governments;

Noting that since the terms of the Multilateral Agreement extend until 1984, Document CD27/23, Add. I is considered as an interim report; and

Guided by the trends that appear to be emerging from the ongoing evaluations of the five Pan American Centers and that point to: program consolidation on the basis of the priorities of the countries served; the need for strengthening program management; the responsibility of the countries being served by the Centers to assume a growing role in the programmatic and financial activities of the Centers; and recognition that the fundamental role of the Organization in relation to the Centers should be one of coordination and management, in accordance with the context of PAHO/WHO policies and strategies,

Resolves:

1. To thank the participating Governments and institutions for their responses to the key issues and to urge those that have not yet done so to submit their comments to the Director of PASB as soon as possible.

2. To take note of the interim report on the Caribbean Epidemiology Center, and to thank the Director for that report.

3. To request the Director:

   a) To cooperate with Member Governments and the CAREC Council in ensuring that CAREC's activities remain relevant to the overall PAHO program and the priorities and needs of all the countries served;

   b) To consult and cooperate with the host Government and other participating Governments and institutions, in order to meet the terms of the Multilateral Agreement of 1974, and to review the agreement as soon as possible;

   c) To consolidate the deliberations of this Council, noting the overwhelming expressions of participating Governments that CAREC should be maintained as a regional institution for the Caribbean area, and make them available as information additional to the interim report of the Evaluation Team, for use by the CAREC Council in accordance with the terms of the Multilateral Agreement;

   d) To communicate with the CAREC Council for the development of recommendations regarding the policies and guidelines for the future of the Center beyond 1984, and to convey these recommendations to the PAHO Executive Committee and Directing Council in 1981;

   c) To make an evaluation of the Center, including management and the cost of the services provided.

(Arrived at the fifteenth plenary session, 2 October 1980)

Resolution XXX

Resolutions of the Thirty-third World Health Assembly of Interest to the Regional Committee

The Directing Council,

Having examined the resolutions of the Thirty-third World Health Assembly brought by the Director of the Pan American Sanitary Bureau to the attention of the Directing Council as Regional Committee of the World Health Organization for the Americas (Document CD27/10); and

Having been informed by the Director of the activities being carried out in the Region in the various fields,

Resolves:

To take note of the resolutions of the Thirty-third World Health Assembly contained in Document CD27/10.

(Arrived at the fifteenth plenary session, 2 October 1980)
Resolution XXXI
Provisional Agenda of the Sixty-seventh Session of the Executive Board of WHO: Items of Interest to the Regional Committee

The Directing Council,

Having examined the draft provisional agenda of the Sixty-seventh Session of the Executive Board made available to it by the Director-General of WHO,

Resolves:

1. To take note of the provisional draft agenda of the Sixty-seventh Session of the Executive Board (Document EB67/1, annexed to Document CD27/11).

2. To thank the Director-General of WHO, through the Regional Director, for making this valuable advance information available.

3. To urge the Member Governments to review carefully the issues that will be considered by the WHO Executive Board, and to provide their views to the Director and to the Members of the Executive Board from the Region in order to ensure that regional perspectives are fully reflected at the Board's meeting.

(Adopted at the fifteenth plenary session, 2 October 1980)

Resolution XXXII
Amendments to the Financial Regulations of the Pan American Health Organization

The Directing Council,

Having considered the report of the Director on financial reports and extra-budgetary resources (Document CD27/21);

Having considered the amendments to the Financial Regulations proposed by the Director; and

Having noted the Director's proposals to include in the annual financial reports to the Directing Council information on income and expenditures relating to all extrabudgetary funds available for program purposes,

Resolves:

1. To adopt the amendments to the Financial Regulations as annexed to the Director's report (Document CD27/21).
2. To approve the Director’s proposal to report annually to the Directing Council on all extrabudgetary resources available for program purposes.

(Adopted at the fifteenth plenary session, 2 October 1980)

Resolution XXXIII

Tentative Budgetary Projections for the Program Budget of the World Health Organization for the Region of the Americas for the Biennium 1982-1983

The Directing Council,

Having considered Official Document 161 submitted by the Director of the Pan American Sanitary Bureau, which contains the provisional draft of the program budget of the World Health Organization for the Region of the Americas for 1982-1983, amounting to $45,071,900;

Having considered the proposed adjustments to that program budget contained in Document CE84/5 and Add. I of the 84th Meeting of the Executive Committee, amounting to $1,059,900 designed to reduce the budget to the allocation of $44,012,000 from the World Health Organization to the Region of the Americas for the biennium 1982-1983;

Bearing in mind that the provisional draft of the program budget, as adjusted, is submitted to the Directing Council as Regional Committee of the World Health Organization for the Americas for review and transmittal to the Director-General of the World Health Organization; and

Noting the recommendation33 made by the 84th Meeting of the Executive Committee,

Resolves:

To approve the provisional draft of the program budget of the World Health Organization for the Region of the Americas for 1982-1983 appearing in Official Document 161 and adjusted in Document CE84/5 and Add. I of the 84th Meeting of the Executive Committee, and to request the Regional Director to transmit it to the Director-General.

(Adopted at the fifteenth plenary session, 2 October 1980)

Resolution XXXIV

Technical Discussions on "Community Health Education: Evaluation of Present Programs, New Approaches, and Strategies"

The Directing Council,

Having examined the Final Report of the Technical Discussions on "Community Health Education: Evaluation of Present Programs, New Approaches, and Strategies" (Document CD27/DT/3);

Recalling that at the Conference of Alma-Ata and in the strategies formulated by the Governments of the Region of the Americas for attaining the goal of health for all by the year 2000, the countries have acknowledged the need to develop mechanisms for facilitating community participation in health and the use of local resources through community health education;

Taking cognizance of the growing importance of community health education in increasing community participation as a basic strategy for extending the coverage of health services, promoting primary health care, and improving the environment; and

Recognizing that community health education is a multisectoral and multidisciplinary function in all health and community development programs, and that the Ministries of Health bear the responsibility of being catalysts and sources of guidance for other development sectors in order to attain appropriate levels of participation by the community in the improvement of its health,

Resolves:

1. To take note of the Final Report of the Technical Discussions and to express satisfaction with the proceedings.
2. To urge the Member Governments:
   a) To intensify their efforts to formulate policies and define strategies for promoting community health education as an indispensable means of extending the coverage of health services and promoting primary health care so as to assist in attaining the goal of health for all by the year 2000;
   b) To give high priority to the inclusion of community participation as a process, and of community health education as a means of achieving it, in all national health plans and programs, including the planning, operation, evaluation, and adjustment of the administrative structures of the health sector;
   c) To promote community participation so as to ensure that local economic, social, and cultural characteristics are borne in mind in the development, selection, and application of appropriate primary health care techniques;
d) To ensure that all programs for the training and instruction of health personnel include community education and participation components, and that adequate resources are provided for their implementation;

c) To promote and conduct operations research in community participation, and to utilize the results in the promotion of training activities and the application of appropriate methods and techniques.

3. To request the Director to include in the plan of action to be drawn up for implementation of the regional strategies for attaining the goal of health for all by the year 2000, guidelines for educational activities and community participation in health as a basic element of these strategies, with particular attention to the following:

a) Technical cooperation with Member Governments in primary health care programs that emphasize community participation and community health education as a means of obtaining it;

b) Intercountry exchanges and utilization of information, experiences, training facilities, and appropriate technologies in community health education;

c) Identification, preparation, and funding for implementation of projects that emphasize active participation by the community in the extension of coverage of health services;

d) Inclusion in the progress reports on the various cooperation projects in which the Organization participates of specific information on the progress of the aforementioned activities.

(Adopted at the sixteenth plenary session, 2 October 1980)

Resolution XXXV

Collection of Quota Contributions

The Directing Council,

Having considered the report of the Director on the collection of quota contributions (Document CD27/6 and Add. I);

Considering the importance of prompt and full payment of quota contributions in ensuring the financing of the authorized program and budget and maintaining the Organization in a sound financial position; and

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 Governments that fail to meet their financial obligations,
Resolves:

1. To take note of the report of the Director on the collection of quota contributions (Document CD27/6 and Add. 1).
2. To permit the Representatives of the Dominican Republic, Haiti, and Paraguay to vote at the XXVII Meeting of the Directing Council.
3. To thank the Governments that have already made payments in 1980, and urge the other Governments whose legal circumstances so permit to pay their current quotas as early as possible in the year in which they are due, so that the work of the Organization can continue and the financial burden of its program can be spread fairly among all Members.
4. To request the Director to continue to inform the Governments of any balance due.

(Adopted at the sixteenth plenary session, 2 October 1980)

Resolution XXXVI

Quota Assessment for Saint Lucia

The Directing Council,

Having approved the request of the Government of Saint Lucia for membership in the Pan American Health Organization;

Considering that Article V (5.10) of the Financial Regulations of PAHO provides that, if membership begins at any time during the first year of a financial period, new members will be assessed for the full two-year period;

Considering that in Resolution XXVIII of the XXVI Meeting of the Directing Council approved a supplementary budget to be utilized in 1980 for the Pan American Zoonoses Center and the Pan American Foot-and-Mouth Disease Center, to be financed by quota contributions from the Member and Participating Governments; and

Bearing in mind that the quota assessed should be equivalent to the appropriate percentage shown in the scale adopted by the Organization of American States, in compliance with Article 60 of the Pan American Sanitary Code, but should not be higher than the per capita contribution of the largest contributor,

Resolves:

1. To establish the 1980-1981 assessment for the Government of Saint Lucia at 0.03 per cent.
3. To assess the net quota for the supplementary budget to be utilized in 1980 for the Pan American Zoonoses Center and the Pan American Foot-and-Mouth Disease Center at $290.

(Adopted at the sixteenth plenary session, 2 October 1980)

Resolution XXXVII

Reimbursement of Travel Costs of Representatives to WHO Regional Committees

The Directing Council,

Having considered Document CD27/14 regarding the reimbursement of travel costs, excluding per diem, of representatives to WHO Regional Committees;

Noting Resolution XXIV \(^{35}\) of the 84th Meeting of the Working Party of the Regional Committee and Resolution EB65.R2 \(^{36}\) of the Sixty-fifth Session of the Executive Board; and

Recognizing that WHO funds would be better invested in health programs for the Member Countries than in payment of travel costs,

Resolves:

1. To take note of Document CD27/14 concerning the reimbursement of travel costs, excluding per diem, of representatives to WHO Regional Committees.
2. To recommend to the Executive Board that WHO should not finance the travel costs of representatives to meetings of Regional Committees but rather that such expenses should continue to be borne by the respective Member Governments.

(Adopted at the sixteenth plenary session, 2 October 1980)

Resolution XXXVIII

Procedures for the Establishment of Relations between
PAHO and Intergovernmental Organizations

The Directing Council,

Recalling Resolution XXVIII\(^{37}\) of the XIV Pan American Sanitary Conference, which set forth the criteria to be observed by the Pan American Health Organization in establishing official relations with international and interAmerican organizations;

Considering that procedures are needed to apply the criteria set forth in Resolution XXVIII and to establish the status of the Observers for regional and subregional intergovernmental organizations; and

Having considered the recommendations set forth in Document CE84/7, presented by the Director, having noted Resolution XXIII\(^{38}\) of the 82nd Meeting of the Executive Committee, and following the recommendation of the Executive Committee at its 84th Meeting,\(^{39}\)

Resolves:

1. To observe the criteria adopted by the XIV Pan American Sanitary Conference in Resolution XXVIII for the establishment of official relations with regional and subregional intergovernmental organizations.

2. To establish the rule that the approval of two-thirds of the Members of the Directing Council or Pan American Sanitary Conference is required for the establishment of official relations between the Pan American Health Organization and a regional or subregional intergovernmental organization.

3. To establish that a regional and subregional intergovernmental organization with which the Organization maintains relations may:
   3.1 Be invited to attend the meetings of the Executive Committee, the Directing Council, and the Pan American Sanitary Conference, to which end it may designate a representative to act as an Observer;
   3.2 Collaborate, on request, in the programming and execution of joint activities;
   3.3 Submit to PAHO its views and observations on programs underway in areas of mutual interest;
   3.4 Request joint participation with PAHO in conferences, seminars, or working groups;


\(^{38}\)PAHO Official Document 166 (1979), 54.

3.5 Participate, in accordance with the applicable Rules of Procedure, but without a vote, in the open sessions of the Governing Bodies of PAHO in the terms of the invitation issued by the Secretariat.

(Adopted at the sixteenth plenary session, 2 October 1980)

Resolution XXXIX

Selection of a Member from the Region of the Americas for the Health 2000 Resources Group

The Directing Council,

Mindful of the need to rationalize and coordinate the contribution of external resources toward the achievement of the goal of health for all by the year 2000; and

Having considered the request of the Director-General of WHO concerning the nomination of a representative from the Americas for the Health 2000 Resources Group,

Resolves:

To select the Government of Chile to nominate an individual who will represent the Region of the Americas, for the period September 1980-September 1982, in the Health 2000 Resources Group to be appointed by the Director-General.

(Adopted at the sixteenth plenary session, 2 October 1980)

Resolution XL

Emergency Preparedness Program

The Directing Council,

Bearing in mind Resolutions X and XXXVI of the XXIV and XXVI Meetings of the Directing Council, respectively, on the establishment of the Emergency Preparedness and Disaster Relief Coordination Program and the Natural Disaster Relief Voluntary Fund;

Having examined Document CD27/25 presented by the Director on the proposed medium-term program and strategy for the Emergency Preparedness Program and the role of the Organization in the immediate aftermath of disasters;

Believing that the Organization should extend its technical cooperation in all disaster or emergency situations presenting any serious threat to public health;

Being aware that emergency technical cooperation must be provided with the utmost promptness and a minimum of administrative or other delays; and

Being convinced that PAHO has the necessary technical and administrative capacity to coordinate international disaster health assistance in the Region and to offer technical advice to potential donors on appropriate assistance required,

Resolves:

1. To approve the medium-term program and strategy proposed in Document CD27/25, and to request the Director to gradually increase technical cooperation within the Emergency Preparedness Program to assist the health sectors of Member Countries in the development of disaster preparedness programs also in case of natural or technological disasters of public health importance.

2. To request the Director to seek extrabudgetary funding for strengthening PAHO's technical cooperation at regional and area levels in emergency preparedness and disaster relief.

3. To request the Director to take the necessary steps to make a multidisciplinary team of PAHO experts available, on request, for providing emergency technical cooperation in case of a major disaster and to assist in the assessment of needs and in the coordination of the international health assistance.

4. To urge Member Governments of countries which are especially vulnerable to disasters and which so desire it to facilitate the entry of the multidisciplinary team of PAHO experts in the country after a disaster has occurred and, when deemed convenient, adopt the necessary measures prior to a disaster.

5. To request the Director-General of the World Health Organization to study the desirability of decentralizing to the Regional Office for the Americas the responsibility for the management and coordination of international disaster health assistance in the Region.

6. To request Member Governments, international organizations, bilateral agencies, and private donors to make contributions to the Natural Disaster Relief Voluntary Fund, which operated by PAHO.

(Adopted at the sixteenth plenary session, 2 October 1980)
Resolution XLI

Abuse of Narcotic and Psychotropic Substances

The Directing Council,

Taking into account Resolution WHA33.27 of the Thirty-third World Health Assembly concerning greater attention to drug abuse in WHO programs;

Considering Resolution 34/177 of the Thirty-fourth United Nations General Assembly, calling for increased programmatic activity in drug abuse prevention and control by the United Nations agencies and programs;

Recognizing that the growing abuse of psychoactive drugs, including alcohol, knows no national boundaries and is a problem of particular relevance to the social and economic well-being of each nation and of the Region as a whole;

Further recognizing that drug abuse has a particular negative impact on public health and must be addressed at the community level; and

Being aware of the multisectoral aspects of the WHO goal of health for all by the year 2000 and the role of primary health care in achieving that goal,

Resolves:

1. To call the attention of the Member Governments of the WHO Region of the Americas to the relevance of these resolutions to drug abuse problems in the Region.

2. To urge Member Governments to define opportunities for incorporating broad-based multisectoral drug abuse prevention components in their evolving national strategies for "health for all" and in their biennial national PAHO programs and budgets in order to facilitate the integration of drug abuse prevention components in the health service systems.

3. To recommend that Member Governments give priority to the establishment of mechanisms for monitoring the epidemiology of drug abuse, particularly the establishment of surveillance systems to identify and measure new and existing drug abuse problems.

4. To call upon the Director to collaborate with the countries in designing appropriate surveillance and information systems as a means toward better defining current national and regional drug abuse trends.

5. To further request the Director, in order to facilitate the implementation of paragraphs 2, 3, and 4 above, to prepare a report for the XXI Pan Amer...
can Sanitary Conference, in 1982, summarizing the status of drug abuse in the Region, describing the current activities of PAHO relating to drug abuse, including sources of funding (both regular and extrabudgetary), and proposing new approaches that Member Countries might consider for addressing this increasing problem in their national strategies and in their PAHO country program proposals.

6. To request the Member Governments to assist the Organization in seeking extrabudgetary resources for these national programs.

(Adopted at the sixteenth plenary session, 2 October 1980)

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 third day of October, nineteen hundred and eighty. The Secretary shall deposit the original texts in the archives of the Pan American Sanitary Bureau and shall send copies thereof to the Governments of the Organization.

(In the absence of the President)

Jorge Michelsen
Vice President of the Directing Council
Representative of Colombia

Héctor R. Acuña
Secretary ex officio of the Directing Council
Director of the
Pan American Sanitary Bureau
ANEXO
Participants

Gobiernos
Governments

ARGENTINA

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Dr. Oscar Horacio González Carriazo, Director Nacional de Sanidad de Fronteras y Transportes, Secretaría de Estado de Salud Pública, Buenos Aires

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Dr. Luis Rivero Cortés, Asesor en Relaciones Internacionales, Ministerio de Previsión Social y Salud Pública, La Paz

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Dra. Valerie Rumjanek Chaves, Coordinadora de Assuntos Internacionales da Saúde, Ministério da Saúde, Brasília, D.F.


Sr. Francisco Azevedo, Secretario, Missão do Brasil Junto à Organização dos Estados Americanos, Washington, D.C.

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Mr. Jacques C. Cousineau, Embassy of Canada, Washington, D.C.

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Dr. Luis E. Pontón, Jefe, División de Convenios Bilaterales, Ministerio de Salud, Bogotá

Dr. Guillermo Vargas Ayala, Jefe, Oficina Jurídica, Ministerio de Salud, Bogotá

COSTA RICA

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Comité Ejecutivo del Consejo Directivo
Executive Committee of the Directing Council

Sr. Michel Careau, Presidente

Dr. Nelson Vargas, Miembro

Oficina Sanitaria Panamericana
Pan American Sanitary Bureau

Dr. Héctor R. Acuña, Director, Secretario ex officio del Consejo

Dr. S. Paul Ehrlich, Jr., Director Adjunto

Dr. Eusebio del Cid Peralta, Subdirector

Dr. Martín Vázquez Vigo, Gerente de Operaciones

Sr. William E. Muldoon, Jefe de Administración

Sr. Frank Butrico, Jefe, División de Protección de la Salud Ambiental

Dr. José Roberto Ferreira, Jefe, División de Recursos Humanos e Investigación

Dra. Sumedha Khanna, Jefe, División de Servicios Integrados de Salud

Dr. Luis Carlos Ochoa, Jefe, División de Prevención y Control de Enfermedades

Dr. Mário Fernandes, Jefe, Programa Especial de Salud Animal

Jefe, Departamento de Conferencias y Servicios Generales

(Chief, Department of Conferences and General Services)

Sr. Luis Larrea Alba, Jr.

Jefe, Servicios de Secretaría

(Chief, Secretariat Services)

Sr. Carlos L. García
Representante—Representative

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Suplentes—Alternates

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Sr. Eduardo Cerro, Observador Permanente Adjunto de España ante la Organización de los Estados Americanos, Washington, D.C.

ORGANISMOS ESPECIALIZADOS DE LAS NACIONES UNIDAS
SPECIALIZED AGENCIES OF THE UNITED NATIONS

Comisión Económica para América Latina de las Naciones Unidas (United Nations Economic Commission for Latin America)

Mr. Marco D. Pollner, Director, Washington, D.C.
Mr. Raoul Nelson, Economic Affairs Officer, Washington, D.C.

Fondo de las Naciones Unidas para Actividades de Población (United Nations Fund for Population Activities)

Mr. O. J. Sikes, Chief, Population, Education and Communications Section, New York, N.Y.

Organización de las Naciones Unidas para la Agricultura y la Alimentación (Food and Agriculture Organization of the United Nations)

Dr. D. Kimmel, Director, Liaison Office for North America, Washington, D.C.
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Mr. Henry H. Dueringer, Economist, Washington, D.C.

Programa de las Naciones Unidas para el Desarrollo (United Nations Development Program)

Mr. Charles Perry, Liaison Officer, Washington, D.C.
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Banco Interamericano de Desarrollo (Inter-American Development Bank)
Dr. Abraham Drobny, Jefe de la Unidad de Salud Pública, Departamento de Análisis de Proyectos, Washington, D.C.

Comité Internacional de Medicina y Farmacia Militares (International Committee of Military Medicine and Pharmacy)
Tte. Cnel. Dr. Carlos Díaz Coller, Profesor de Administración de Salud Pública, Facultad de Medicina del Ejército, México, D.F., México

Convenio Hipólito Unanue (Hipólito Unanue Agreement)
Dr. Alfredo Lynch, Secretario Ejecutivo, Lima, Perú

Organización de los Estados Americanos (Organization of American States)
Sr. O. Howard Salzman, Director, Oficina de Cooperación Internacional, Washington, D.C.
Sra. Marijane E. Peplow, Secretaria Ejecutiva Adjunta, Comisión Interamericana de Mujeres, Washington, D.C.
Sra. Leonor Salcedo de Barreto, Especialista, Programa de Desarrollo Rural, Washington, D.C.
Dr. Kennette C. Soares, Especialista Principal, Programa de Desarrollo Rural, Washington, D.C.
Dr. Pedro N. Acha, Asesor Especial del Director General IICA/OEA, Instituto Interamericano de Ciencias Agrícolas, Washington, D.C.

ORGANIZACIONES NO GUBERNAMENTALES
NONGOVERNMENTAL ORGANIZATIONS

Asociación Interamericana de Ingeniería Sanitaria y Ambiental (Inter-American Association of Sanitary and Environmental Engineering)
Sr. Edmundo Elmore, Presidente, Lima, Perú

Asociación Internacional contra la Lepra (International Leprosy Association)
Dr. W. F. Ross, Treasurer, Bloomfield, New Jersey
Asociación Internacional de Logopedia y Foniatría (International Association of Logopedics and Phoniatrics)

Dr. Louis J. LaBorwit, American Speech-Language-Hearing Association, Washington, D.C.

Asociación Internacional de Médicas (Medical Women's International Association)

Dr. Gloria Cochran, Bethesda, Maryland

Asociación Internacional de Registros del Cáncer (International Association of Cancer Registries)

Dr. John Young, Biometry Branch, National Cancer Institute, Bethesda, Maryland

Asociación Médica Mundial (World Medical Association)

Ms. Diane Hedgecock, Associate Director, Washington, D.C.

Comisión Médica Cristiana (Christian Medical Commission)

Rev. John A. Murdock, Associate General Secretary, Health and Welfare Ministries, Board of Global Ministries, The United Methodist Church, New York, N.Y.

Comisión Permanente y Asociación Internacional para la Medicina del Trabajo (Permanent Commission and International Association on Occupational Health)


Comité Internacional para el Uso de Animales de Laboratorio (International Council for Laboratory Animal Science)

Dr. Earl W. Grogan, ILAR Executive Secretary, Washington, D.C.

Consejo Internacional de Enfermeras (International Council of Nurses)

Ms. Mary Elizabeth Dunn, Washington, D.C.

Consejo Internacional de Sociedades de Patología (International Council of Societies of Pathology)

Dr. Chapman H. Binford, Arlington, Virginia

Consejo de Organizaciones Internacionales de las Ciencias Médicas (Council for International Organizations of Medical Sciences)

Dr. Murillo Belchior, President, Rio de Janeiro, Brazil

Federación Dental Internacional (International Dental Federation)

Dr. Ariel O. Gómez, Buenos Aires, Argentina
Federación Internacional de la Diabetes (International Diabetes Federation)
Mrs. Nancy Hall, President, American Diabetes Association Inc., D.C. Area Affiliate, Upper Marlboro, Maryland

Federación Internacional de Hospitales (International Hospital Federation)
Dr. José González, Secretary, Washington, D.C.
Ms. Carol A. Lively, Management Department, Health Planning, Chicago, Illinois

Federación Internacional de la Industria del Medicamento (International Federation of Pharmaceutical Manufacturers Associations)
Ms. Jay J. Kingham, Assistant Vice President, International Division, Pharmaceutical Manufacturers Association, Washington, D.C.
Mr. Paul A. Belford, Director, International Issues Analysis, International División, Pharmaceutical Manufacturers Association, Washington, D.C.

Federación Latinoamericana de Hospitales (Latin American Federation of Hospitals)
Dr. Juan Carlos Albarellos, Presidente, Buenos Aires, Argentina
Dr. Guillermo Fajardo Ortiz, Director Ejecutivo, México, D.F.

Federación Latinoamericana de la Industria Farmacéutica (Latin American Federation of the Pharmaceutical Industry)
Sr. David A. V. Zarouk, Presidente, Buenos Aires, Argentina
Sr. Pablo Dupit, Buenos Aires, Argentina

Federación Mundial de Asociaciones de Salud Pública (World Federation of Public Health Associations)
Dr. Susi Kessler, Executive Secretary, Washington, D.C.
Dr. Alfred N. Gerald, Deputy Director, International Health Program, APHA, Washington, D.C.

Federación Mundial para la Enseñanza de la Medicina (World Federation for Medical Education)
Dr. Henry van Zile Hyde, Executive Director, Bethesda, Maryland

Federación Mundial de Ergoterapeutas (World Federation of Occupational Therapists)
Ms. Barbara Neuhaus, Regional Representantive, Regional Office for the Americas, New York, N.Y.
Federación Mundial de Fabricantes de Medicamentos de Marcas Registradas (World Federation of Proprietary Medicine Manufacturers)

Dr. Joseph Pisani, Vice President, Medical/Scientific Affairs of the Proprietary Association of the United States, Washington, D.C.

Federación Mundial de Neurología (World Federation of Neurology)

Dr. Michael Newmark, Epilepsy Branch, National Institutes of Health, Bethesda, Maryland

Federación Mundial de Sociedades de Anestesiólogos (World Federation of Societies of Anaesthesiologists)

Dr. Paula R. Kaiser, Associate Professor Emeritus, Department of Anaesthesiology, George Washington University, Washington, D.C.

Federación Mundial de Veteranos de Guerra (World Veterans Federation)

Ms. June A. Willenz, Executive Director, Washington, D.C.

Liga de Sociedades de la Cruz Roja (League of Red Cross Societies)

Mr. José Aponte, International Services Officer, Washington, D.C.
Ms. Dolores Angleton, Nursing and Health Services, Washington, D.C.

Organismo Internacional de Prevención de la Ceguera (International Agency for the Prevention of Blindness)

Dr. Carl Kupfer, Member of the Executive Board, Director, National Eye Institute, National Institutes of Health, Bethesda, Maryland

Sociedad Internacional para la Micología Humana y Animal (International Society for Human and Animal Mycology)

Dr. K. J. Kwon-Chung, National Institute of Allergy and Infectious Diseases, National Institutes of Health, Bethesda, Maryland

Unión Internacional de Arquitectos (International Union of Architects)

Mr. Roger C. Mellem, Washington, D.C.

Unión Internacional de Ciencias de la Nutrición (International Union of Nutritional Sciences)

Dr. David B. Coursin, Lancaster, Pennsylvania
Unión Internacional de Farmacología (International Unión of Pharmacology)

Dr. George J. Cosmides, Deputy Associate Director, Specialized Information Services, National Library of Medicine, National Institutes of Health, Bethesda, Maryland