

regional committee





XXV Meeting

XXIX Meeting

Washington, D.C. September-October 1977

INDEXED

Agenda Item 7

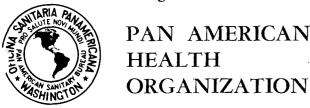
CD25/21, Corrig. (Eng.) 1 October 1977 ENGLISH ONLY

ANNUAL REPORT OF THE CHAIRMAN OF THE EXECUTIVE COMMITTEE

Corrigendum

Page 5, paragraph 5, lines 5 and 6 should read:

"transfers between budgetary items were within the limits of the Financial Regulations, according to the audit report of the External Auditor."



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Provisional Agenda Item 7

CD25/21 (Eng.) 10 September 1977 ORIGINAL: ENGLISH

ANNUAL REPORT OF THE CHAIRMAN OF THE EXECUTIVE COMMITTEE

This report on the work of the Executive Committee during the period October 1976 to date, during which it held its 77th and 78th Meetings, is submitted to the XXV Meeting of the Directing Council, XXIX Meeting of the Regional Committee of WHO for the Americas, in accordance with Article 9.C of the Constitution.

77th MEETING OF THE EXECUTIVE COMMITTEE

The 77th Meeting of the Executive Committee of the Pan American Health Organization was held in the Ministry of External Affairs, Tlatelolco, México, D.F., on 7 October 1976, following the XXIV Meeting of the Directing Council. It was attended by the following representatives of the Members of the Committee and staff members of the Pan American Sanitary Bureau:

Members

Mrs. Margaret E. McDonald Dr. Luis Alberto Valle

Dr. Gustavo Mora

Dr. Alfonso Medina Delgado

Dr. Rodrigo Jiménez Dr. Marcelo Endara

Mr. Glen Vincent

Mr. Trevor E. B. Dacosta

Dr. Rubén M. Cáceres

Mr. Victor McIntyre

Dr. Elizabeth Quamina

Mr. Lyndall G. Beamer

Mr. Robert F. Andrew

Mrs. Marlyn Kefauver

Bahamas

Bolivia

Colombia

Costa Rica Ecuador

Jamaica

Paraguay

Trinidad and Tobago

United States of America

Pan American Sanitary Bureau

Dr. Héctor R. Acuña Director Secretary ex officio

Dr. Charles L. Williams, Jr. Deputy Director

Mr. William E. Muldoon Chief of Administration

Mr. Luis Larrea Alba, Jr. Chief, Department of Conference and General Services Chief, Secretariat Services

The session was opened by the outgoing Chairman, Dr. Orontes Avilés (Nicaragua). Next the Officers of the new Executive Committee were elected, as follows: Dr. Gustavo Mora, Representative of Colombia, Chairman; Mrs. Margaret E. McDonald, Representative of Bahamas, Vice Chairman; Dr. Rubén M. Cáceres, Representative of Paraguay, Rapporteur.

The Executive Committee adopted the Agenda of the Meeting and went on to examine the resolutions of the XXIV Meeting of the Directing Council of PAHO, XXVIII Meeting of the Regional Committee of WHO for the Americas, of interest to it.

The Committee expressed its satisfaction with the fact that the Republic of Surinam had become a member of the Pan American Health Organization. Its accession, which was dealt with in Resolution I of the immediately preceding Meeting of the Directing Council, brought the number of Member States up to 31.

In discussing Resolution IX, the Director pointed out the importance of the technical cooperation program and announced that it would be submitted to the 78th Meeting of the Executive Committee.

He also pointed out, in connection with Resolution XIX (Malaria Programs in the Americas) that it was necessary to obtain external financing, and asked for the assistance of Members of the Committee in negotiations with international credit agencies, in particular the Inter-American Development Bank.

When dealing with Resolution XXVIII, Evaluation of the Ten-Year Health Plan for the Americas, the Director also requested the assistance of all Members of the Committee in achieving a more thorough evaluation of the Ten-Year Health Plan.

Resolution XXXII (Development of the Infrastructure of the Health Services Infrastructure with Due Regard to the Need for the Extension of Coverage) was considered to be exceptionally important since the Americas should make a substantial contribution to the work of a world

conference on primary health care services that would be organized by the Director-General of the World Health Organization in 1978.

The Executive Committee adopted two resolutions. During the discussion that led to the adoption of Resolution I, the conditions and guarantees required for obtaining a loan from the Inter-American Development Bank for the expanded textbook program were examined. Finally, the proposals of the Director were approved and he was authorized to complete the negotiations upon obtaining the concurrence of a majority of the Members of the Executive Committee.

Resolution II dealt with the establishment of a Natural Disaster Relief Voluntary Fund. The discussion brought out the fact that the Fund would be established with savings made by the Pan American Sanitary Bureau and that therefore the Member Governments of the Pan American Health Organization would not have to increase their contributions to the regular budget. Subsequently, those funds would be retired as and when voluntary contributions were received. In that way, the mechanisms provided for in the case of natural disasters would be able to operate whenever necessary.

The Executive Committee also decided to appoint Dr. Glen Vincent (Jamaica) a member of the Award Committee of the PAHO Award for Administration to fill the vacancy created by the departure of Argentina from the Executive Committee.

Before the close of the 77th Meeting, the Executive Committee expressed its thanks to the Government of Mexico for its generous hospitality.

78th MEETING OF THE EXECUTIVE COMMITTEE

The 78th Meeting of the Executive Committee was held in Washington, D.C., from 13 to 21 June 1977 and was attended by the following Members of the Committee, observers, and staff members of the Pan American Sanitary Bureau:

Members

Dr. Luis Alberto Valle Ureña

Dr. Fernando Patiño Villegas

Dr. Gustavo Mora Patiño Dr. Rodrigo Jiménez Monge

Dr. Asdrúbal de la Torre

Dr. Hugo Corral

Lic. José Rosero Morejón

Dr. Carlos Raúl Borja Martínez

Dr. Fausto Andrade Larrea

Dr. Christine Olive Moody

Dr. Rubén M. Cáceres

Dr. Hubert Blackett

Dr. Elizabeth Quamina

Dr. Robert de Caires

Mr. Robert Andrew

Mr. Lyndall Beamer

Mrs. Marlyn Kefauver

Bahamas Bolivia

Bolivia

Colombia Costa Rica Ecuador

Jamaica Paraguay

Trinidad and Tobago

United States of America

Observers

Mr. Alberto E. Naveiro de la Serna

Dr. Alfredo Norberto Bica

Mr. Gustave C. Strain

Miss Katherine Dumait

Argentina Brazil

France

Pan American Sanitary Bureau

Dr. Héctor R. Acuña Director

Dr. Charles L. Williams, Jr. Deputy Director

Dr. Eusebio del Cid Peralta Assistant Director

Mr. William E. Muldoon Chief of Administration

Dr. Pedro N. Acha Chief, Division of Disease Control

Mr. Frank A. Butrico Chief, Division of Environmental Health

Dr. Jorge Rosselot Acting Chief, Division of Family Health

Dr. José L. García Gutiérrez Chief, Division of Health Services

Dr. José Roberto Ferreira Chief, Division of Human Resources and Research

Miss Mary H. Burke Acting Chief, Division of Supporting Services

Chief, Secretariat Services

Mr. Luis Larrea Alba, Jr. Chief, Department of Conference and General Services

Intergovernmental and Nongovernmental Organizations

Inter-American Development Bank

Dr. Humberto Oliveiro

The officers of the Executive Committee were Dr. Gustavo Mora, Representative of Colombia, Chairman; Dr. Laurence J. Charles, Sr., Representative of Bahamas, Vice Chairman pro tempore in replacement of Mrs. Margaret E. McDonald; and Dr. Rubén M. Cáceres, Representative of Paraguay, Rapporteur.

The Executive Committee held a total of 13 plenary sessions, five of which were devoted to a detailed examination of the proposed program and budget estimates of the Organization which, in addition to being stipulated by Article 14 of its Rules of Procedure, is one of its most important functions.

At its first plenary session, the Executive Committee approved the Agenda of its 78th Meeting, following an explanation by the Director to the effect that the very important question of technical cooperation among developing countries would be dealt with under Items 16 or 17, even though it did not appear in the Agenda as a separate item.

At that session, the Executive Committee also established the dates of the XXV Meeting of the Directing Council of PAHO, XXIX Meeting of the Regional Committee of WHO for the Americas, and approved the provisional agenda for that meeting. It also took note of the satisfactory level of the collection of quota contributions; however, that did not apply to the collection of the quotas of the countries with the largest arrears, since only one of the four Members that had payment plans had paid the total of the 1976 quota.

Financial Report of the Director and Report of the External Auditor for 1976

Its examination of the Financial Report of the Director and the Report of the External Auditor for fiscal year 1976 enabled the Executive Committee to verify that PAHO had completely carried out its program by using virtually all the funds available in the regular budgets of PAHO and WHO, although transfers between budgetary items exceeded the limits established in the Financial Regulations, according to the audit report of the External Auditor.

During the discussion, the Director explained that, although the financial situation was sound and the quota contributions had been received earlier because the United States of America had established a quarterly payment system, it was too soon to reduce the amount in the Working Capital Fund. The reason was that it might be necessary to draw on it in order to execute major projects financed out of extrabudgetary funds, since the grantors did not usually make their contribution ahead of time but only to cover expenses already incurred.

Proposed Program and Budget of the Pan American Health Organization for 1978 and Provisional Draft of the Program and Budget of the Pan American Health Organization for 1979

In order to simplify the discussion, the Executive Committee dealt simultaneously with items 8 and 9 of its Agenda. It made a detailed examination of these very important items, which were discussed during its first, second, third, fourth and fifth plenary sessions. The Director made a general presentation of the proposed program and budget, the Chief of Administration then reviewed the contents of the budget book (Official Document 148), and the

Chiefs of Division explained in detail the programs for which they were responsible and answered questions put to them by the members. Finally, the Executive Committee reviewed the budgets for each country and the items corresponding to the Representatives and Area Consultants, interregional programs, technical and administrative management, Governing Bodies, increase in assets and Special Fund for Health Promotion. Throughout the discussion, the Director and the staff of the Bureau provided careful and continuous advice.

Among the most important issues discussed, mention must be made of the concept of technical cooperation, i.e., the new approach of PAHO cooperation activities to the Member Governments which replaces the earlier concept of technical assistance; the extension of the coverage of health services which was the reason for the convocation of the Fourth Special Meeting of Ministers of Health of the Americas; the expanded program of immunization; and malaria control. In presenting the items, the Director emphasized the important contribution made by members of the Executive Committee to those proposals.

The Committee was informed that the reduction of appoximately 10% in the total budget figure was the result of a decline in extrabudgetary funds. However, that reduction was more apparent than real, since certain extrabudgetary funds, which could not be quantified, might still be obtained. The increase of 8% in 1978 over 1977 and of 8.2% in the regular PAHO budget for 1978 over that of 1977 indicated the wish of the Governments to stabilize the regular budget of the Organization.

In the course of the discussion, the important contribution that could be made by the PASB/WHO Representatives in the countries to technical cooperation among developing countries was emphasized, as was the need to make continuing evaluations of the programs in order to improve their effectiveness.

Disease Control

This program area accounts for 175 technical cooperation projects, of which 51 are regional or intercountry projects, as well as the activities of the Pan American Foot-and-Mouth Disease Center, the Pan American Zoonoses Center, and the Caribbean Epidemiological Center, and those of the Center for the Study of Leprosy and other Tropical Diseases, an institution associated with the Organization. Funds earmarked for this area in 1978 amounted to \$7,383,775, or 51.6% of the PAHO regular budget. If funds arising from other souces were taken into account, the total earmarked for disease control was \$14,299,533.

In the discussion of this budget, it was emphasized that, in view of the magnitude of a number of problems in the Americas, certain allotments were insufficient, for example, that for sexually transmitted diseases and for Chagas disease. Also emphasized was the valuable assistance malaria services could give to the extension of primary health care, while primary health care services could collaborate in the final phases of the malaria campaign. With respect to natural disasters, it was pointed out that, even though the funds available were modest, the coordinating role of the Organization was important since it was essential that intervention mechanisms should be available so that, should such natural disasters occur, all the countries could provide assistance.

The Committee discussed the program of malaria eradication at considerable length. Opinions expressed varied, but there seemed to be a consensus that the report of the Study Group on Malaria Control in the Americas should be taken carefully into account. Where eradication has already been achieved epidemiological surveillance should be instituted to maintain it. Where it is achievable the program should be continued with that goal. Where it is not practicable at this time, the eradication objective should be postponed but not abandoned. In the interim, effective control measures should be instituted and maintained.

Family Health

With respect to family health, the proposed program covers maternal and child health and family planning activities (38 projects), nutrition (21 projects), mental health (6 projects) and dental health (15 projects). In all these projects, special efforts are made to enlist the active participation of women and young people and to meet the needs of shantytown and rural areas.

In addition to regular budget funds, support in these program areas was available from such organizations as the UNFPA, UNICEF, FAO, UNDP, AID, and the Kellogg Foundation, and the activities of the Latin American Center for Perinatology and Human Development (in Montevideo), the Institute of Nutrition of Central America and Panama (in Guatemala), and of the Caribbean Food and Nutrition Institute (in Kingston) were very valuable.

Budgetary allocations for those activities amounted to \$12,461,041 in 1978 and to \$10,930,468 in 1979; in the first of those years, 50.9% was earmarked for maternal and child health, 43% for nutrition, 2.7% for mental health, 2.2% for dental health, and the remainder for general support activities.

Of the total budget, 60.4% was earmarked for advisory services, 23.4% for development of human resources and 16.2% for research.

As for the operational distribution of those funds, 58% would be allocated in 1978 to regional, subregional or intercountry projects, including the multinational centers, which would receive 39 per cent.

With respect to the source of funds assigned to family health, 28.5% in 1978 and 35.1% in 1979 would come from PAHO and WHO, 39.1% and 30.7%, respectively, from UNFPA, and the remainder from miscellaneous sources.

Finally, the Executive Committee recommended to the Directing Council that it approve the program for those activities, which requires the allocation of \$2,853,615 from PAHO regular funds, or 22.9% of the total outlays of the Organization.

During the discussion on the allocations for those program areas, it was emphasized that it was essential to enlist the participation of the entire community, not only of women but also, and especially, of young persons, and that if that were done, the serious problem of shortage of personnel would be moderated. It was also advisable to take advantage of and channel the services of traditional personnel by training birth attendants and voluntary collaborators.

Certain Representatives regretted that, because of lack of funds, the allocations for mental health did not reflect the true importance of mental health problems in the Americas and that there was a lack of sufficient comparable data on accident prevention, which should receive greater attention.

The Director explained that in those activities the Organization used a multidisciplinary approach for the purpose of extending primary health care services and that that was more important than the allocation to a particular sector, especially if it were borne in mind that other extrabudgetary contributions which, for the time being, could not be quantified, would be available.

When extension of the coverage of health services was achieved, PAHO activities would be able to make themselves felt more easily in all sectors and to give greater protection to women and children, who were always the most vulnerable subjects.

Environmental Health

In 1977, approximately 9% of the PAHO budget was assigned to the environmental health program. For 1978 provision was made for 6.9% and for 1979 for 7.5 per cent. The reductions were the result of changes in extrabudgetary contributions to certain projects.

In the Americas, only 37% of the inhabitants have a satisfactory water supply, and therefore the program of the Organization is primarily devoted to assisting governments in executing water supply and basic sanitation programs, especially in rural areas. Assistance in those activities from the World Bank, the Inter-American Development Bank, the Canadian International Development Agency, AID, UNICEF and the Government of the Federal Republic of Germany was envisaged. The Pan American Center for Sanitary Engineering and Environmental Sciences, with the assistance of the Government of Peru and the Inter-American Development Bank, was helping to prepare teaching material on water supply for the Region.

The programs for 1978 and 1979 reflected a temporary reduction in environmental health projects due to the financial crisis of the UNDP and the smaller contributions of certain multilateral and bilateral agencies.

During the discussion, the major contribution of the countries themselves to water supply projects, which amounted to 80% of the total cost, was emphasized. The members of the Committee expressed the hope that more funds would be obtained from international agencies for water supply projects without the Governments reducing their percentage contribution to them.

Health Services

In the matter of health services, the priority objective for the present decade was to extend coverage to the underserved population as a result of community participation. Efforts and resources were centered on two areas: the extension and strengthening of national service systems and the provision of services to individuals, families and the community. To strengthen national systems, provision was made for a regional program with the assistance of 12 countries; international loans to finance the projects were being negotiated. In medical care, plans had been made for the execution of 23 country projects and six regional projects, and assistance would also be given to 18 countries for primary care programs. The purpose of 21 country projects and 9 regional projects was to develop and improve nursing services.

For these purposes, PAHO regular funds accounted for 58% of the total outlays planned, WHO funds, 31%, and the remainder would come from the UNDP and other sources. A total of \$10,862,475, or 17.3% of the budget, was earmarked for the health services area and distributed among 132 country projects and 30 subregional and regional projects.

During the discussion in the Executive Committee, it was pointed out that it would be advisable to establish standards for measuring the coverage of primary services as well as to define the term "nurse," since the role of nurses could be extremely important in primary care. The advisability of improving maintenance of equipment was also emphasized, and the Bureau was requested to help select the apparatus that was going to be purchased in the countries. It might also be useful to provide manufactures with guidance on the needs of the countries.

It was also pointed out that the resources assigned and the programs envisaged were in line with the guidelines of the Ten-Year Health Plan and the Sixth General Program of Work of WHO, and that services could not be extended to the entire population by means of the traditional methods, but that simple solutions, together with the active participation of the population, i.e., primary services, would have to be used.

Development of Human Resources and Coordination of Research

The strategy adopted for the human resources development activities planned were aimed at finding indigenous solutions aimed at self-sufficiency, in accordance with the form of technical cooperation advocated by the Organization. The program comprised 124 projects, 33 of which were regional and 91, country projects.

For that purpose, a total of \$8,576,788, or 13.7% of the budget, was available. Of that amount, 33% represented PAHO regular budget funds for 1978.

With respect to specific program areas, human resources planning included 18 projects, the purpose of which was the coordination in the countries of health and education agencies.

Human Resources development comprised 88 projects aimed primarily at integration of education and medical care, the improvement of teaching, and the training of middle-level and auxiliary personnel. Some of these projects were supported by the Kellogg Foundation and the Inter-American Development Bank.

For technological resources there were 15 projects. This area included the preparation of documents and biological information, the Regional Library of Medicine and the Health Sciences in São Paulo, Brazil, the Latin American Centers for Educational Technology in Health in Rio de Janeiro and Mexico City, and the Textbook and Teaching Materials Program, in addition to the quarterly review, Educación médica y salud.

The fourth area of the program was that of research coordination. It comprised a review and definition of research policy, including changes in the Advisory Committee on Medical Research designed to further integrate its work into that of the technical divisions.

With respect to the fellowship program, a computerized evaluation system was being used and a directory of programs was being prepared. Thought was also being given to the decentralization of the management of the program to areas in the Region in which candidates and training centers were concentrated.

During the course of the discussion in which the importance of the fellowship program was discussed several members expressed their satisfaction with what was being done. It was explained that the Textbook Program had originally been envisaged for publications in Spanish and Portuguese, but that an annual grant of \$5,000 was being made to the University of the West Indies for the purchase of books in English and their distribution at a low cost. In addition, it was explained to the Executive Committee that every effort would be made to take maximum advantage of the possibilities of the tropical diseases research program, especially the program on Chagas disease and on other diseases that were of importance to the Americas.

Supporting Services

For 1978 the budget for supporting services was \$1,104,555, of which 69.4% came from regular funds. The program, which covers not only statistics

but also other control and evaluation activities, is made up of 13 projects in 11 countries and 13 AMRO projects, of which four are area projects and nine regional projects. Thirteen advisors in statistics are providing advisory services to the Member countries that request them. One regional project and another country project are devoted to the International Classification of Diseases in Spanish and in Portuguese. During the year, preparations would be made for the Ninth Revision of the International Classification of Diseases in the above-mentioned languages.

Mention was made during the discussion of the shortcomings of vital statistics and of civil records in the Latin American countries as well as of the need to increase PAHO assistance to planning in the countries.

The Committee was of the opinion that it would be useful to accept the request of the Governments of Spain and Portugal and of certain African Governments that wished to participate in the committees for the revision of the International Classification of Diseases.

Administration

For administrative activities, the total budget was \$8.3 million from PAHO regular funds for 1978, i.e., 78% of the total funds assigned to that area. The total of all funds allotted for administration in 1978 was \$10.7 million, i.e., 17% of the total PAHO budget.

In the AMRO-5002 programs, most of the \$83,690 budgeted for 1978 was for the purpose of establishing mechanisms for obtaining extrabudgetary funds from foundations for health programs of the Member Governments.

The resources for statistics and information systems (AMRO-5405) were earmarked both for programs and for administrative activities. Advisory services in computer sciences were also given to the Governments, and computerized reports were provided to enable the other divisions to improve the planning and execution of PAHO programs.

With respect to technological resources, for 1978 regional libraries were allocated \$160,395, and efforts would be made to integrate the activities of those libraries with the information services for the entire Region.

A total of \$1,158,555 was earmarked for editorial services in 1978. The publications program is an important cooperation tool and takes the form both of monthly and quarterly journals and the issuance of scientific publications and official documents.

In 1977 and 1978, special emphasis will be given to the priority activities of primary care, extension of coverage and community participation.

The budget for executive and technical direction, i.e., the Office of the Director and the Office of the Chief of Administration, amounted to \$750,435 for 1978.

Program services included liaison with other international agencies, public information, reports and agreements. The allocation for 1978 was \$492,500.

Administrative Services included administrative support to Area Offices and the Washington Office, and the program for 1978 was allocated US\$4,155,310. Of this total, \$460,560 was for Area Offices, and \$3,748,750 for Headquarters.

Overhead included rent and maintenance of buildings and installations, communication costs, procurement of supplies and equipment, and their repair and maintenance, as well as common services of the Area Offices and of Headquarters. The 1978 budgetary allocation was \$2,044,075.

Funds allocated to the Governing Bodies for 1978 amounted to \$580,100, and were intended to cover the cost of two meetings of the Executive Committee and one meeting of the Directing Council, including conference and translation services.

The appropriation for Part V of the budget was reduced from \$700,000 to \$500,000 for 1978 because, as already mentioned, the Government of the United States of America had adopted a quarterly system for paying its contribution. The Director indicated his intention to study the status of the Working Capital Fund and to submit a report, together with his recommendation, to the 80th Meeting of the Executive Committee to be held in 1978.

Country Projects

The Committee next examined the budgets for the country projects. During the animated discussion of this subject, the Secretariat answered all the questions of the members.

The Director explained that the evaluation of country projects was made at the request of the Governments and that, if it were to be done on a continuing and permanent basis, it was up to the countries themselves to request such evaluation in each case.

Area Representatives and Advisers--Intercountry Projects

The allocation for Area Representatives and Advisers for 1978 amounted to \$4,394,934, a slightly higher amount than for 1977. Almost all the funds were PAHO funds, but some came from WHO, UNDP and the United Nations Fund for Population Activities.

In 1978, interregional projects would account for 64% of all the regular and extrabudgetary funds available to the Bureau.

During the discussion of this item the members expressed their satisfaction that the administrative assistance given to Area and Country Representatives had been increased, since that enabled them to devote more time to collaboration with the governments. Interest was also expressed in the suggestion of the

Director that related projects in the same country be grouped into one or more of the program areas established in the national health plan. This would permit greater flexibility in the administration of programs and the handling of funds.

The Director and the technical staff of the Bureau answered a number of questions put by the members concerning details of the program and its financing.

Of special interest was the discussion on the purchases of medicaments by the Bureau on behalf of the countries for which a service charge of 3% was made and which in some cases did not even cover the administrative costs. The Director explained that if the Governments so desired, procurement could be free of charge and instead the charges could be added to the quotas of the Member countries.

Examination of the budget for Governing Bodies, Increase to Assets, and Special Fund for Health Promotion gave rise to no discussion.

Conclusions and Recommendations

The Representatives of the nine Member countries of the Executive Committee expressed their support for the 1978 budget, which represented an 8% increase over that of the preceding year. The Committee expressed its belief that the provisional draft for 1979 was a satisfactory base for the preparation of a detailed 1979 budget proposal for examination by the Executive Committee and the Pan American Sanitary Conference in 1978. The Committee adopted Resolutions V and VI recommending to the Directing Council that it approve them.

After fulfilling this major constitutional duty to make a thorough examination of the PAHO budget, the Executive Committee turned its attention to the resolutions of the World Health Assembly and of the WHO Executive Board of interest to the Region.

Resolutions of the Thirtieth World Health Assembly of Interest to the Executive Committee

The Director drew the attention of the members of the Executive Committee to various resolutions of interest to it, in particular that relating to the WHO two-year budgetary cycle (WHA30.20), which would be initiated in 1980-1981. He explained that in 1978 he intended to submit to the Executive Committee some recommendations that would enable PAHO to adopt a two-year budgetary cycle.

Following a short discussion, the Committee decided to take note of the report of the Director on the resolutions of the World Health Assembly and of the Executive Board of WHO and to transmit them to the XXV Meeting of the Directing Council.

Proposals for the WHO Director-General's Development Program, 1978-1979

Of special importance to the Americas was the discussion on the proposals relating to the 1978-1979 Development Program of Director-General of the World Health Organization, under which the Americas was assigned US\$440,000 for 1978 and \$625,000 for 1979. Those proposals consisted of a list of 10 projects selected by the Director of the Pan American Sanitary Bureau out of a total of 45 projects prepared by the divisions of the Bureau. Their cost would exceed the \$440,000 assigned for 1978 to the Americas in the Program of the WHO Director-General. At the time they were presented to the Executive Committee, the Secretariat had still not had time to consult the Ministries of Health of the PAHO Member countries.

The Director explained to the Executive Committee that the Development Program of the Director-General of WHO stemmed from the request made by the World Health Assembly (in Resolution WHA29.48) that adjustments be made at Headquarters and in the Regions so that 60% of the budget of the World Health Organization could be assigned to technical cooperation in the countries. As a result of the adjustments made under that resolution, an allocation had been made to the Region of the Americas that covered only part of the 10 programs proposed by the Director of the Pan American Sanitary Bureau. The Secretariat should therefore be given guidance on the priority to be assigned to those 10 programs. The ensuing debate brought out the fact that all the programs were important, but that preference should be given to programs 1, 6 and 9 in the allocation of the funds of the Development Program of the Director. Accordingly, Resolution XIII was adopted, since several countries had also expressed keen interest in programs for the control of diarrheal diseases and for the Expanded Program of Immunization in the Americas. The Executive Committee adopted another resolution on this item (Resolution XIV) in which it drew the attention of the Director-General of WHO to the interest of the countries of the Americas in programs 3 and 5, so that he could take it into account should additional voluntary funds become available.

Report on the X Inter-American Meeting, at the Ministerial Level, on Footand-Mouth Disease and Zoonoses Control

The report on the X Inter-American Meeting, at the Ministerial Level, on Foot-and-Mouth Disease and Zoonoses Control gave rise to only a short discussion in which the countries expressed their appreciation of the work of PAHO in this field. It was decided (Resolution XII) to recommend to the Directing Council that it adopt a resolution thanking the Ministries of Agriculture for their support and requesting them to continue their combined efforts in a coordinated foot-and-mouth disease and zoonoses control campaign.

Amendments to the Staff Rules of the Pan American Sanitary Bureau

When discussion was opened on item 12, it was explained to the members of the Executive Committee that the PASB Staff Rules were being amended to

bring them into line with the amendments introduced into the Staff Rules of WHO by the Executive Board of the World Health Organization. The purpose was better to reflect the differentiation in the emoluments of staff with and without dependents, which in the former system had been excessive for staff members with dependents in the lowest classes of post adjustment, while it was insufficient in the higher classes of post adjustment. There had been virtually no increases in remuneration and, in the few cases of decrease, the level of the salaries of staff members was guaranteed under the transitional provisions authorized by the United Nations.

Difficulties arose in connection with Staff Rule 275, the proposed amendment to which was intended to give an end-of-service grant to staff members whose contracts were not renewed after not less than 10 years serv-That indemnity had been authorized by the Executive Board of the World Health Organization at the request of the Director-General, who was forced not to renew contracts in order to comply with the request of the Assembly embodied in Resolution WHA29.48. In the case of WHO it was a provisional measure contrary to the common system of the United Nations, which had once again postponed discussion of the matter. If the Pan American Sanitary Bureau did not adopt the same position as WHO, WHO staff members in the Americas could receive an indemnity for termination, whereas PASB staff members could not receive it in the same circumstances. In view of this, Resolution VIII was adopted, in which the Executive Committee confirmed the amendments to the Staff Rules which brought them into line with those of WHO, but decided to leave in abeyance the application of Rule 275 pending the approval by the United Nations of that amendment, on the understanding that, should that take place, it would likewise be applicable with retroactive effect as of 1 January 1977 so as to ensure that there would be no differences in application of the Staff Rule between WHO and PASB and that the principle of the United Nations common system would be safeguarded.

On the other hand, no discussion took place on two resolutions (Resolutions IX and X) which continued the practice already established by the Governing Bodies of maintaining the salary of the Director of the Pan American Sanitary Bureau at the same level as that of the Deputy Director-General of WHO, the salary of the Deputy Director of PASB at the level of the Regional Directors of WHO, and the salary of the Assistant Director at \$1,000 less.

International Year of the Child, 1979

During the discussion of item 20, there was a very interesting exchange of views about how to focus the activities of the governments in favor of children. The Executive Committee emphasized in particular that the celebration of the International Year of the Child should be based on activities in the countries and that the expenses involved by large international conferences should be avoided. It also requested the Director to bring this matter to the attention of this meeting of the Directing Council and, to that end, adopted Resolution XV.

Topic of the Technical Discussions, 1978

Item 21 gave rise to a short discussion on the scope of the topic. It was explained that, although the topic was entitled "The Impact of Drugs on Health Costs: National and International Problems," all the problems raised by drugs would be examined as fully as necessary and, consequently, the Executive Committee decided to recommend that the Directing Council approve the above-mentioned title of the topic (Resolution XI).

Reduction of Length of Meetings of the Directing Council

Special mention should be made of the discussion on the reduction of the length of meetings of the Directing Council, since it involves a constitutional question that affects the effectiveness of the Organization. At the outset, it was clearly determined that the duration of the meetings must be the consequence and not the starting point for determining the topics and their consideration by the Council, and that only the Council could decide how much time it needed to perform its important function. Nevertheless, the Director explained that, without prejudice to providing the fullest possible information to the Governing Bodies, he always attempted not to overload the agenda. Furthermore, he believed that thorough examination of the problems by the Executive Committee helped to facilitate and shorten the discussions in the Directing Council. He also hoped that the introduction of a two-year budgetary cycle would make it possible to shorten the length of the general discussion on the Annual Report of the Director and on the report which I have the honor to submit to you at this time. Accordingly, the Executive Committee decided to recommend to the Council, in Resolution XVI, that, when examining the report of the Director on this subject, it adopt a decision that does not compromise the vital role played by the Directing Council in achieving the goals of the Organization.

Proposed PAHO Policy for Dengue, Yellow Fever, and Aedes aegypti

The problem of the policy to be followed in the Americas in dealing with dengue, yellow fever and Aedes aegypti gave rise to an animated debate in which all the Representatives took part and in which the observer from Brazil vigorously advocated eradication of the vector. All the speakers supported the policy of eradicating Aedes aegypti with the exception of the Representative of the United States of America who, while recognizing that eradication would in theory be the ideal and final solution, was of the opinion that the practical problems and the cost of a hemispheric campaign made it impossible. He therefore supported the alternatives proposed by the Secretariat, based on the conclusions reached by the PAHO Scientific Advisory Committee on Dengue, Yellow Fever and Aedes aegypti at its first meeting held in March 1976 in Panama. In its Resolution XVIII, the wording of which gave rise to further discussion and several votes, the Executive Committee finally recommended to the Directing Council that it give absolute priority to the eradication of the vector, without prejudice to other epidemiological surveillance and yellow fever vaccination activities as may be necessary and also requested the Director to take the necessary steps to support that policy.

Mechanisms for the Establishment of Official Relations between PAHO and Nongovernmental Organizations

In dealing with item 24 of its agenda, the Executive Committee had to choose between two methods for establishing official relations between PAHO and nongovernmental organizations: to entrust the task to the Committee itself or to a subcommittee it would set up for that purpose, or to leave examination of the applications to the Director of the Pan American Sanitary Bureau. Some representatives expressed support for the first alternative because they considered it important for the Committee to examine the application; but most favored the second alternative because the procedure was more rapid and freed the Governing Bodies from an additional task. Finally, it adopted a resolution (No. XVII) in which it recommended to the Directing Council that it entrust the Director with the examination of applications for the establishment of official relations with PAHO presented by nongovernmental organizations, authorize him to take decisions in each case, and to inform the Executive Committee whose members could object within a period of 60 days and request that the matter be submitted to the Executive Committee for final decision.

Buildings and Installations

In connection with item 22, the Executive Committee was provided with an up-to-date report on the progress being made with the various facilities in the Americas, their costs and methods of financing. The Director drew attention to the problems presented by the maintenance of buildings and installations in different countries of the Region. He pointed out that no provision was made in the PAHO budget for that maintenance and that the corresponding investments were only made when savings from other items were available. He announced his intention to regularize that situation and to present a complete report on it in 1978 as well as proposals for the appropriate maintenance of the property owned by the Organization.

Representation of the Executive Committee at the XXV Meeting of the Directing Council of PAHO, XXIX Meeting of the Regional Committee of WHO for the Americas

The appointment of the representatives of the Executive Committee to this meeting of the Directing Council of PAHO (item 11), which appears in Resolution XIX, gave rise to no discussion. Due to the absence of the Chairman, this report is submitted to the Executive Committee by the Alternate Representative of the Executive Committee. Dr. Laurence J. Charles (Bahamas) and Dr. Rubén M. Cáceres (Paraguay) are also providing valuable assistance.

Multinational Centers: Pan American Center for Human Ecology and Health

In dealing with item 7 of the agenda, the Executive Committee received an interesting report from the Director of the Pan American Center for Human Ecology and Health which, during the two years it has been in existence, has undertaken important activities consisting primarily in advice to governments and assistance in evaluating the effects of environmental changes on health. Following a short discussion, the Executive Committee adopted Resolution XX in which it requested the Director to continue to pursue those activities, urge the countries to make use of the valuable services the Center could provide, and thanked the Government of Mexico for the support it is providing that institution.

PAHO Award for Administration 1977

The Executive Committee expressed satisfaction with the decision of the Award Committee to confer the PAHO Award for Administration posthumously on Dr. Roberto Pereda Chávez of Cuba. The corresponding resolution (XXIII) was adopted unanimously.

Other Matters

Technical Cooperation Among Developing Countries

Presentation to the Executive Board by the Regional Director for the Americas of the Report of the Director-General of WHO on Technical Cooperation among Developing Countries was perhaps one of the most important and significant matters dealt with by the Executive Committee. Technical cooperation among developing countries is defined as "the process by which technical possibilities and knowledge are shared between developing countries." The idea originated in the United Nations and has spread to all the specialized agencies, especially WHO, since the health field readily lends itself to its application. American Health Organization counts among its achievements many outstanding examples of this type of cooperation, such as, for example, the Institute of Nutrition of Central America and Panama. The Region of the Americas was chosen by the Director-General of WHO to serve as the focal point of this new program, on the basis of the new concept of cooperation, because of its experience in the The importance of this new policy, which sets the former technical assistance against technical cooperation among developing countries, is clear. The discussion on this item led the Director to make a statement on the new policy and to explain that the developing countries believe that technical assistance is an activity imposed by developed countries or by an increasing international bureaucracy interested in maintaining its privileges. He recalled that the Director-General of WHO, and likewise the Director of the Pan American Sanitary Bureau, are civil servants who are elected and are at the service of all governments, and must place that service above every other consideration. He also

made it clear that this was a new policy in which activities were to be promoted and carried out primarily by the developing countries with such technical and administrative support as PAHO could give them. Those ideas were embodied in Resolution XXI, by which the Executive Committee recommends to the Directing Council that it give positive support to technical cooperation among developing countries and apply to the programs of the Region the proposals contained in the report submitted to it, and to endorse any steps taken in that regard.

Expanded Program on Immunization in the Americas

The Executive Committee examined the recommendations of the Study Group on the Expanded Program on Immunization in the Americas, in whose work members of the Executive Committee had also participated. An interesting exchange of information ensued about the experience of different countries with national immunization programs. The need to bring to the attention of the Directing Council the financial implications of the program in the Americas, whose execution was recommended, was emphasized, and it was decided to request the Director to submit a report to the Council on the funding requirements and proposed sources of financing. All those points were embodied in Resolution XXII adopted by the Executive Committee.

Malaria Control in the Americas

The study of the malaria problem in the Americas is another example of the collaboration of the Executive Committee in the work of the high level study group that met for that purpose and whose sessions were attended by the Chairman. The discussion on the item showed general agreement with the recommendations of the Study Group. The important assistance the new primary health services could give to the malaria campaign was emphasized, as was the contribution malaria control personnel could make to the establishment of primary health services and to control of other diseases. In that regard, the Executive Committee adopted Resolution XXIV, which also incorporated several suggestions made by the representatives of different countries.

Statistics on PASB/WHO Staff

The Director submitted to the Executive Committee statistics on the structure of the PASB/WHO staff. He pointed out that it was necessary to correlate the qualifications and experience of candidates with an equitable distribution by nationality, and that it was advisable to recruit new staff members to replace those that retired at an age when they could serve the Organization for 15 to 20 years. He also mentioned the resistance he had encountered in changing the duty stations of staff members, a problem on which the Executive Committee might be called upon to take action in the coming year.

Other topics were discussed on which it was not deemed necessary to adopt an official resolution, although that does not mean that they were less important. Among these, mention should be made of the report on the progress being made in establishing a Pan American Center for Community Health Training (item 15 of the Agenda); the discussion on the multidisciplinary approach that should be adopted to problems of health and youth (item 18), during which the Director emphasized the contribution that youth could make to the establishment of primary services; the information provided by the Secretariat and by the representatives of the Governments on the celebration of the 75th anniversary of PAHO (item 19); and the interesting discussion on international surveillance of air travelers (item 25), on which the conclusion reached was that epidemiological surveillance services in the countries should be strengthened, for which purpose the coverage of basic health services should be extended to the entire population.

Members of the Executive Committee present at this meeting are at the disposal of the Directing Council for the clarification of any points they may wish to raise.