

directing council

regional committee



**PAN AMERICAN
HEALTH
ORGANIZATION**

XXXVII Meeting



**WORLD
HEALTH
ORGANIZATION**

XLV Meeting

Washington, D.C.
September-October 1993

Provisional Agenda Item 3.1

CD37/5 (Eng.)
31 August 1993
ORIGINAL: SPANISH

ANNUAL REPORT OF THE CHAIRMAN OF THE EXECUTIVE COMMITTEE

In compliance with the provisions of Article 9.C of the Constitution of the Pan American Health Organization, which establishes that the Directing Council shall review the annual report of the Chairman of the Executive Committee, presented below is the report on the activities carried out by the Executive Committee during the period between September 1992 and September 1993, when its 110th and 111th Meetings were held.

110th MEETING OF THE EXECUTIVE COMMITTEE

The single plenary session of the 110th Meeting of the Executive Committee took place on 25 September 1993 at the Headquarters building in Washington, D.C. It was attended by the representatives of Argentina, Belize, Cuba, Chile, United States of America, Honduras, Mexico, and Peru, as well as by observers for Canada and Puerto Rico.

Elected by consensus to serve as officers of the Committee for the period September 1993 to September 1994 were Dr. César Castellanos Madrid (Honduras), as Chairman; Dr. Salomón Zavala Sarrio (Peru), as Vice President; and Dr. Argentino Luis Pico (Argentina), as Rapporteur.

Because Barbados, Brazil, and Haiti had finished their terms of office on the Committee, Belize and Mexico were elected by consensus to serve on the Subcommittee on Planning and Programming, replacing Barbados and Brazil; Peru was elected to replace Brazil on the Special Subcommittee on Women, Health, and Development; and Argentina and Cuba were elected to the Standing Subcommittee on Inter-American Nongovernmental Organizations in Official Relations with PAHO, replacing Brazil and Haiti.

The Committee undertook a thorough analysis of the process and content of the recently concluded XXXVI Meeting of the Directing Council. The discussion is reflected in the records of the Meeting.

Next, the Committee considered Agenda Items 5.1 and 6.1 and set the dates for the 111th Meeting of the Executive Committee and the XXXVII Meeting of the Directing Council.

Item 5.1: Democracy and Health

The Secretariat explained that this project for cooperation between the Organization and the parliaments of the Region grew out of an agreement between PAHO/WHO and the Organization of American States (OAS) and was initiated in 1990. That same year five subregional meetings of lawmakers were held. The second stage of the project got under way in 1991 and during that stage agreements for technical cooperation in the health field were established with 21 parliaments, as were cooperation ties with regional and subregional parliamentary bodies.

The aim of this project is to strengthen the participation of the parliaments in the development of health policies and to define the instruments needed to implement them. The first strategy is that of promotion, and in this regard legislative studies are being conducted and macro-laws are being written dealing with the priorities of the Organization. These studies and laws are being reviewed at different levels by *ad hoc* legislative committees which will, in later stages, help to apply the macro-laws in each country.

The Secretariat emphasized that the activities carried out with the parliaments are the product of the work of various units of PAHO, such as its Representative Offices in the countries, that are working with the respective legislative bodies and with the corresponding national authorities. For example, the PAHO/WHO Representative Office in Guatemala, where the headquarters of PARLACEN is located, serves as an intermediary for the cooperation between PAHO and that parliamentary body.

An essential element of the project are the Regional Programs, such as the programs for Communicable Disease Control, Environmental Health, Health Services Development, Maternal and Child Health, Health Promotion, and Scientific and Technical Health Information. The resources that are being used belong to the budget allotments of the PAHO/WHO Representative Offices and the Regional Programs. There may be a need to use funds of the Regional Director, although in the majority of cases, especially in the last year, the marginal costs entailed by this cooperation have been very low.

Finally, in evaluating the activities carried out with the parliaments, it should be kept in mind that the attainment of the objectives depends to a great extent on factors that are not part of the Organization's responsibilities. To that end, an attempt is being made to develop criteria to measure intermediate results as an indication of the success of the activities.

In response to several observations made during the debate that followed, the Secretariat clarified that the subregional parliaments are parliamentary associations that as yet lack the authority vested in the European Parliament. In this regard, it stated that PAHO's only role will be to facilitate, from a strictly technical standpoint and only in health-related matters, the strengthening of interaction between the executive and legislative branches of government in each country, and it was underscored that the setting of national health policy is the exclusive and inalienable responsibility of every government.

The presentation and the discussion are reflected in the records of the Meeting.

Item 6.1: New PAHO Headquarters Building

The Secretariat reported that the Working Party established by the Executive Committee to assist the Secretariat in this matter--consisting of Barbados, Chile, and the United States of America--authorized the Organization to begin negotiations in January 1992 with the owners of a site in Bethesda, Maryland, but no agreement had been reached by the date of the 110th Meeting of the Executive Committee. The Organization therefore simultaneously initiated informal negotiations with the Government of the United States of America with a view to finding some other satisfactory solution. The Working Party would be provided with all the necessary information so that, when called upon to do so, it could make the recommendations it considered appropriate.

The presentation and discussion are reflected in the records of the 110th Meeting.

111th MEETING OF THE EXECUTIVE COMMITTEE

The 111th Meeting of the Executive Committee was held at the Headquarters of the Organization in Washington, D.C., from 28 June to 1 July 1993. It was attended by representatives of the nine Member Governments of the Committee: Argentina, Belize, Chile, Cuba, Honduras, Mexico, Peru, Saint Vincent and the Grenadines, and the United States of America. Also present were observers for three Member Governments--France, Jamaica, and Uruguay, and for the Associate Member--Puerto Rico; and one Observer Government--Spain, as well as five intergovernmental organizations and one nongovernmental organization. The Subcommittee on Planning and Programming and the Working Party on the New Headquarters Building were also represented at the Meeting.

In the absence of the Chairman, and in accordance with the provisions of Article 10 of the Committee's Rules of Procedure, the Vice President, Dr. Salomón Zavala Sarrio (Peru), served as Chairman *pro tempore*. Dr. José Ramón Pereira (Honduras) was elected Vice President *pro tempore*.

The Executive Committee held seven plenary sessions in the course of which it examined the following matters, which resulted in a series of decisions and 21 resolutions.

Item 2.1: Adoption of the Agenda

At the first plenary session, the Executive Committee adopted the agenda.

Item 2.2: Representation of the Executive Committee at the XXXVII Meeting of the Directing Council of PAHO, XLV Meeting of the Regional Committee of WHO for the Americas

Pursuant to Article 14 of the Rules of Procedure, at the first plenary session the Committee designated the Chairman *pro tempore*, Dr. Salomón Zavala Sarrio (Peru), and the Rapporteur, Dr. Argentino Luis Pico (Argentina), to represent the Executive Committee at the XXXVII Meeting of the Directing Council of PAHO, XLV Meeting of the Regional Committee of WHO for the Americas. In addition, Dr. James Sarn (United States of America) and Dr. Mateo Budinich (Chile) were named as alternate representatives for Dr. Zavala Sarrio and Dr. Pico, respectively.

Item 2.3: Provisional Agenda for the XXXVII Meeting of the Directing Council of PAHO, XLV Meeting of the Regional Committee of WHO for the Americas

The Committee approved, with the addition of three items and the elimination of two, the provisional agenda prepared by the Director for the XXXVII Meeting of the

Directing Council of PAHO, XLV Meeting of the Regional Committee of WHO for the Americas.

Item 3.1: Report of the Subcommittee on Planning and Programming

The Rapporteur of the Subcommittee on Planning and Programming reported on the activities carried out by the Subcommittee at its 19th and 20th Meetings, held on 17 and 18 December 1992 and 7 to 9 April 1993, respectively. He reported on the following matters analyzed by the Subcommittee:

Regional Program on Communicable Diseases. The various problems related to the prevention and control of these diseases, particularly the vector-borne diseases, underscore the crucial role of the Ministries of Health, the need to promote effective intersectoral cooperation, and the importance of bringing about a change in attitudes and increasing community participation.

Evaluation of PAHO/WHO's Technical Cooperation in Cuba. One of the principal conclusions of the evaluation had been that the management of cooperation should be shared by those responsible for the PAHO/WHO programs and officials of the Government of Cuba. In order to make optimum use of resources, the following principles have been established: selection of appropriate areas for cooperation, efficiency in the use of resources, and effectiveness of the results. Finally, it should be pointed out that Cuba assumes all the overhead costs of running the Country Office, except the salary of the PAHO/WHO Representative.

The Crisis in Public Health: A Proposal for Action. The Subcommittee suggested that the word "challenge" might be more apt than "crisis," as it has more positive connotations, but no conclusion was reached in this regard.

SUMA: A Relief Supplies Management Project in the Aftermath of Disasters in Latin America and the Caribbean. The purpose of this project is to administer donated supplies in the aftermath of major disasters. The management effort consists of three main components: sorting incoming supplies into urgent, non-priority, and useless items; classifying packages according to content; and preparing a computerized inventory. The project has a budget of some \$800,000, and it is to be carried out by a team of up to 15 nationals of the country in question.

Evaluation of PAHO/WHO's Technical Cooperation in Mexico. The Subcommittee found the evaluation document presented jointly by the Government of Mexico and the Secretariat to be very useful and well prepared. In discussing the item, comments had been made on the need for flexibility in PAHO/WHO's cooperation with the countries and the positive results of conducting an evaluation. Attention was called

to the desirability of using local specialists as consultants, as had been done in Mexico, and the importance of cooperation between countries, emphasizing that mutual technical support had been very valuable in malaria control and in the recent cholera epidemic.

The Committee decided not to adopt a resolution. The report presented and the ensuing discussion are included in the records of the Meeting.

Item 3.2: Report of the Special Subcommittee on Women, Health, and Development

The Secretariat presented the report of the 13th Meeting of the Special Subcommittee, held at the Headquarters of PAHO from 5 to 7 April 1993. The Subcommittee's agenda encompassed a total of nine items, of which three were reports of the Secretariat, and six were technical matters of high priority and great interest for the Organization.

The report on the evolution, current situation, and future prospects for technical cooperation on women, health, and development (WHD) was presented, as was a report on the interinstitutional preparatory activities for the World Conference on Women, which will take place in 1995 in Beijing, China. This topic will be included on the agenda of the next meeting of the Subcommittee.

The Vice Minister of Health of Colombia presented a case study on his country's policy of "Health for Women, Women for Health." The Subcommittee recommended that information about this pioneering initiative be widely disseminated.

The Subcommittee analyzed proposals to promote gender equity in health by promoting women's health, and a proposal for the promotion and development of research on WHD. The Subcommittee applauded the research initiative on "Female-Friendly Services," which seeks, through a gender-based approach, to contribute to change and to the adaptation of health services to better meet the needs of women.

The Subcommittee examined the proposal for a regional system to monitor and evaluate the health status of women and the sex-based differences in opportunity that create disadvantages or discrimination in society, and agreed that it was necessary to establish minimum indicators for the Region or for groups of countries in order to ensure monitoring and evaluation of the health conditions of women at the regional level. It requested that the Secretariat prepare a proposal in this regard for consideration at the Subcommittee's next meeting.

Of particular interest was the issue of violence against women and girls from the perspective of public health and the impact of violence on the living conditions and advancement of the women in the Region. It was recommended unanimously that the

subject be included in the agenda for the meetings of the Executive Committee and the Directing Council.

The Executive Committee decided that these last observations should be given due consideration during the examination of Item 4.12, "Violence and Health," and that they should be included in the records of the Meeting.

Item 3.3: Report of the Award Committee of the PAHO Award for Administration, 1993

The Award Committee of the PAHO Award for Administration, made up of the Representatives of Belize, Cuba, and Honduras, recommended to the Committee that it grant the Award to Dr. Georgina Velásquez Díaz of Mexico for her contribution to the organization and consolidation of the administrative infrastructure and health services of the Solidarity Program of the Mexican Institute of Social Security.

The Committee adopted Resolution VIII, in which it takes note of that decision and transmits the Report of the Award Committee to the XXXVII Meeting of the Directing Council.

Item 4.1: Proposed Program Budget of the Pan American Health Organization for the Biennium 1994-1995

The Rapporteur of the Subcommittee on Planning and Programming indicated that the proposed program budget (*Official Document 254*) had been prepared taking into account both the Strategic Orientations and Program Priorities for PAHO during 1991-1994 and the Ninth General Program of Work of WHO.

In April 1993 the Subcommittee examined the preliminary budget proposal, which was for a total of \$250,958,000, including \$80,070,000 in WHO regular funds and \$170,888,000 in PAHO regular funds. The increase in the amount of funds from both sources was 12.0% with regard to 1992-1993, a figure which encompassed the 12.2% rise in costs associated with inflation and increases mandated by the United Nations, as well as program reductions of \$452,800, or 0.2%.

Although the preliminary budget proposal was considered reasonable, both the Subcommittee and the Director expressed concern over the resulting 17.74% quota increase that would be required of the PAHO Member Governments. In order to keep the increase to no more than 12%, various strategies were proposed, including the possibility of freezing the cost of fellowships and reducing spending on programs, while attempting to increase miscellaneous income through better investments.

It was agreed that the costs of the Organization should be reviewed in order to determine whether or not an increase in revenues was essential and that an order of priorities should be established. It was also pointed out that in the five previous biennial budgets there had been a cumulative reduction of 31 %-32 % in the regular funds, in spite of which, thanks to sound and innovative management, it had been possible to maintain, or even expand, the country programs.

It was emphasized that extrabudgetary funds are expected to diminish significantly after 1992-1993. Contributions of funds from three sources in particular have already declined considerably in comparison with 1990-1991: the United Nations Population Fund, by almost \$9,000,000; the Global Program on AIDS, by almost \$6,000,000; and the United Nations Development Program (UNDP), by almost \$1,000,000.

In response to comments made by the Representatives, the Director agreed on the desirability of including in future budget documents more detailed information on the expenditures of the Centers. Regarding extrabudgetary funds, he said that in important documents of the UNDP more appropriate indicators have been proposed for measuring human development. Also the banks, especially the World Bank and the Inter-American Development Bank (IDB), are now attaching greater importance to social concerns as essential aspects of the process of economic stabilization, adjustment, and growth. This conceptual change, which will probably be affirmed during the United Nations Conference on Social Development to be held in 1995, is very encouraging. Also, from the regional point of view, it can be said, with cautious optimism, that the economic crisis of the 1980s seems to be coming to an end.

In its Resolution II, the Committee recommended to the Directing Council that it approve the proposed program budget of the Pan American Health Organization for the biennium 1994-1995, with an effective working budget of \$164,466,000, taking into account comments made by the Executive Committee, and that it adopt the required appropriation and assessment resolutions.

The Secretariat's detailed explanations of *Official Document 254* and the comments made are reflected in the records of the Meeting.

Item 4.2: Acquired Immunodeficiency Syndrome (AIDS) in the Americas

The Secretariat informed the Committee that almost 700,000 cases of AIDS have been reported worldwide, more than 50% of them from the Region of the Americas. Nevertheless, WHO estimates the actual figures at three times higher, i.e., more than two million cases.

It is important to point out that the number of people infected by human immunodeficiency virus (HIV) is increasing progressively. In all the countries there are certain population groups within the community that are at greater risk, basically because they engage in high-risk sexual behavior and/or are intravenous drug users. In addition, several demographic and sociological factors are very important. Certain biological factors should also be taken into account, among them the other sexually transmitted diseases, which raise the risk of HIV transmission considerably.

Since 1990 there has been an increase in funds for activities in the countries, but a decrease in funds for the coordination of activities at the regional level. That reduction has affected mainly the support for actions in the countries, which have already begun to experience delays in receiving the financing they need owing to lack of funds within the Global Program on AIDS.

At the Meeting of Ministers of Health of the Ibero-American Countries, held from 24 to 27 May in Brasília, it was agreed that a multisectoral approach was essential, as was coordination between agencies of the United Nations and Inter-American systems in order to ensure more effective and efficient technical support in all the countries of the Region.

There was a lengthy discussion within the Committee, particularly during consideration of the proposed resolution, in which various opinions were expressed concerning whether or not WHO should continue to exercise formal leadership of the interagency activities on AIDS. The Chairman decided to name a working group, made up of the Rapporteur and the Representatives of Cuba, Mexico, and the United States of America, to draft a new proposed resolution.

The Committee adopted Resolution V, in which it recommends to the Directing Council that it call on the Member Governments to intensify national efforts to prevent AIDS/HIV/STDs and diminish the social and economic consequences thereof; promote the establishment of a national program for preventing and combating AIDS; and draw upon the expertise of all relevant UN system and Inter-American system organizations in establishing a well-conducted intersectoral program to combat AIDS/HIV/STDs at the country level. The resolution also recommends that the Directing Council resolve to support fully Resolution WHA46.37, adopted in May 1993, in which the Director-General of WHO is requested to study, in close consultation with all organizations and bodies concerned, the feasibility of establishing a joint and co-sponsored United Nations program on HIV/AIDS, and that it recognize PAHO's scientific and technical leadership in the health field in the Region of the Americas. In addition, it recommends to the Directing Council that it request the Director to assist the Member Governments in their efforts to establish strong intersectoral coordinating mechanisms on AIDS/HIV/STDs at the country level, and take the necessary steps to improve coordination to promote, bring

together, and articulate the actions of the various agencies of the United Nations and the Inter-American systems in the Region of the Americas.

Item 4.3: Proposal for a Pan American Conference on Health, Environment, and Development

The Secretariat pointed out that the United Nations Conference on Environment and Development (UNCED), held in Rio de Janeiro in 1992, had afforded an excellent opportunity to include in the discussions on environment and development various issues relating to health as a basic element of sustainable development.

The results of the Conference have implications for the health sector, including the following: the Rio Declaration, which states categorically that human beings have a right to a healthy life in harmony with their environment; and Agenda 21, the Conference's plan of action which not only takes due account of health promotion and protection in the context of environment and development, but contains references to health in 39 of its 40 chapters.

In view of the fact that PAHO and the health sector need urgently to become more involved in these areas, the Organization considered it important and timely to propose that a Pan American conference on health, environment, and development be held at PAHO Headquarters in June 1994, after a preparatory process carried out in all the countries. At the conference, which would be attended by some 100 ministerial-level participants (from ministries of health, natural resources, planning, public works, social development, etc.), it would be proposed that a Pan American charter on health, environment, and development be adopted as instrument of consensus between related sectors.

During the discussion that followed the presentation, the Observer for Uruguay, in his capacity as Chairman of the Environmental Commission of the Organization of American States (OAS), said that following the Conference in Rio de Janeiro, the OAS had begun the translation of Agenda 21 into Spanish. The translation might be useful to PAHO when it was ready to prepare the documentation for the Pan American Conference on Health and Environment.

The Representative of the United States of America pointed out that the Commission on Sustainable Development (CSD), a subsidiary of the Economic and Social Council (ECOSOC), was to hold a three-week meeting in May 1994, almost at the same time that the proposed Pan American conference was scheduled. Instead of dividing efforts between two meetings that would deal with similar or identical topics, he thought it would be better for PAHO to contribute its expertise to the CSD and collaborate with that body at the regional level. He proposed that the aforementioned

Pan American conference be held in 1995 rather than in 1994, which would provide the time needed to carry out consultations with the Member Governments and make all the preparations for the meeting. The other members of the Committee agreed with this proposal to postpone the conference.

The Secretariat thanked the Committee for its suggestions, and the Chairman of the Environmental Commission of the OAS for the offer made.

The presentation and discussion of this item are reflected in the records of the Meeting.

Item 4.4: Regional Plan of Action for the Reduction of Maternal Mortality in the Americas

The Secretariat reported that the context in which the plan of action was formulated and the analysis was done is characterized by a profound economic and social crisis, with its accompanying inequities, poverty, and neglect for a large proportion of the inhabitants of the Region. A great majority of the 197 million women in the Americas run a very high risk of becoming ill and dying in connection with the reproductive process.

Although national plans for the reduction of maternal mortality were formulated by the great majority of the countries, thereby fulfilling one of the targets proposed in the regional plan, little progress has been made in the last two years, owing both to problems within the health sector and factors stemming from the economic crisis in the Region. Nevertheless, the countries have made notable efforts in research. On the other hand, with rare exceptions, alternative or complementary models of maternal health care have been implemented only to a limited extent.

The Committee noted during the discussion that the document clearly identified the impediments that are hindering the reduction of maternal mortality: lack of political commitment, scarcity of reliable and comparable data, and absence of intersectoral coordination. It is urgent to adjust goals, strategies, and lines of action; to improve national information systems and intersectoral coordination; and to intensify the search for national and international resources with a view to developing health actions to benefit women.

In Resolution VI, the Executive Committee recommends that the Directing Council urge the Member Governments to define and give priority to a policy on comprehensive care for women and the prevention of maternal morbidity and mortality; review and appropriately adjust the goals, strategies, and principal actions to reduce maternal morbidity and mortality; and promote laws, regulations, and policies that will

commit national resources and mobilize bilateral or multilateral cooperation for financing the improvement of health services for women, and mothers in particular. In addition, it recommends to the Directing Council that it request the Director, within the resources available, to provide support for activities aimed at the prevention of maternal morbidity and mortality in fulfillment of the collective mandates of the Organization, especially the mobilization of national and international technical and financial resources.

Item 4.5: Establishment of the Regional Program on Bioethics in Chile

The Representative of the Subcommittee on Planning and Programming reported that the proposal to create an institute of bioethics under the aegis of PAHO and in association with the University of Chile had been discussed at the 19th and 20th Meetings of the Subcommittee. No one had been opposed to PAHO's involvement in the area of bioethics; however, the representatives of some Governments expressed concern over the financial implications of the creation of the institute. In addition, several delegations from of the Caribbean felt that the institute might not be very accessible to the English-speaking countries. Therefore, the initial proposal to create a Pan American institute of bioethics has been replaced by another option: the creation of a Regional Program on Bioethics with a much simpler administrative structure. The objectives of this Regional Program will be the same as those of the originally planned institute.

The Secretariat explained that the proposal for a Pan American Program on Bioethics emerged out of concern over the ethical issues raised by advances in biomedicine and their repercussions on clinical and scientific medicine, especially with regard to transplants, reproduction, and death. The field has now grown to encompass political, social, economic, and legal issues.

The Representative of Chile expressed his satisfaction that the Subcommittee on Planning and Programming had decided to recommend to the Executive Committee that it approve the establishment of the Regional Program on Bioethics, and that the proposal had been acted upon so quickly, thanks to the understanding and interest of the Member Governments and the Secretariat.

The Director announced that, pending the final decision of the Directing Council of PAHO at its meeting in September 1993, the President of the Republic of Chile has designated 13 January 1994 as the date for the official inauguration of the Program's activities.

The Committee adopted Resolution VII, in which it recommends to the Directing Council that it approve the Regional Program on Bioethics as a PAHO/WHO technical program, attached to the Office of the Director/Deputy Director, with headquarters in Santiago, Chile, in association with the University of Chile and the Ministry of Health

of Chile; and that it urge the Member States to participate, through voluntary contributions, in the activities of the Regional Program on Bioethics and in the creation and strengthening of national capabilities in the field of bioethics in both the private and public sectors. It also recommends that the Council request the Director to, *inter alia*, promote the mobilization of extrabudgetary resources to support and expand the Regional Program on Bioethics, and carry out an evaluation of the work accomplished by the Program after five years of operation and report the findings to the Executive Committee in the year 2000.

Item 4.6: Workers' Health

The Secretariat pointed out, during the presentation of the item on workers' health, the importance of this issue, given the high mortality, high incidence of disability, and the reduction of productivity associated with occupational diseases. In Latin America and the Caribbean it is estimated that the number of occupational accidents that cause disability number five million and it is probable that this figure is an underestimation. In addition, occupational diseases are driving up the costs of medical care in the countries and substantially lowering productivity and reducing years of working life. Moreover, low levels of medical care coverage--both curative and, especially, preventive--combined with the scarcity of trained personnel, hinder the institution of any legal framework to regulate the situation. The national plans for workers health (PLANSAT) are aimed at finding ways of addressing these problems in the context of the current international economic situation.

During the Committee's discussion of the item, it was pointed out that in order to analyze deficiencies and orient the allocation of the limited available resources at the national, subregional, and regional level, it is necessary to establish an order of priorities.

The Committee adopted Resolution XVII, in which it recommends to the Directing Council that it urge the Member Governments to implement or continue developing national workers' health plans and to give priority to mobilizing the resources necessary to execute those plans. In addition, it recommends that the Council ask the Director, in accordance with the availability of resources from the Organization, continue to cooperate with the governments in the implementation and development of those national plans.

Item 4.7: Regional Plan for Investment in the Environment and Health

At its XXXVI Meeting (1992), the Directing Council approved the Regional Plan for Investment in the Environment and Health (PIAS) as a frame of reference for the investments that need to be made in the Region over the next 12 years in the

environment and health. The Secretariat emphasized that in order to understand the way in which the Plan is being implemented, it is important to recognize the linkage between the processes of investment in the environment and health, and the national processes of reform and reorganization in the environmental and health sectors, in which investment becomes a fundamental operational instrument. It is also necessary to recognize the need for greater articulation of the Organization's cooperation with national investment processes and international financial cooperation in the environmental and health sectors.

One of PAHO's lines of action is support for the process of implementing the Plan in each country in order to ensure more integrated and rational planning of the investments in the environment and health, as well as the forging of a strategic alliance with the principal multilateral and bilateral agencies of technical and financial cooperation in order to carry out the Plan. To that end the Multilateral Fund for the Development of Preinvestment Activities in the Environment and Health was established. With regard to investment projects, the Organization's efforts are focusing on the provision of direct cooperation to the countries to strengthen the national teams working on the development of investment plans, programs, and projects.

Finally, it was announced that, pursuant to the mandates of the Directing Council, PAHO had delivered to the provisional secretariat of the third Ibero-American Summit of Heads of State and of Government to be held in Salvador, Bahía, a report on the Plan, with special reference to the recommendations of previous summits.

In the course in the discussion that followed, the Representative of Mexico announced the decision of his Government to contribute \$700,000 to the Preinvestment Fund in 1994. Various speakers underscored the importance of the Regional Plan.

In Resolution IX, the Committee recommends that the Directing Council adopt a resolution in which, among other things, it requests the Member Governments to strengthen national capacity to plan and execute investment projects in environment and health; to increase their efforts to articulate internal and external investments aimed at sectoral reform in environment and health; to use PIAS as one of the fundamental approaches for orienting multilateral and bilateral technical and financial cooperation in the Region; and to contribute to the Preinvestment Fund in Environment and Health. In addition it recommends that the Council request the Director to ensure the Organization's continued support of efforts to strengthen national capacities in the area of environment and health; continue promoting contributions to the Preinvestment Fund in Environment and Health, in cooperation with national agencies and bilateral and multilateral technical and financial cooperation institutions; and continue to analyze the investment processes in environment and health at the country level.

Item 4.8: Financial Study of the Pan American Institute for Food Protection and Zoonoses (INPPAZ) and Report on Budgetary Discussions

The Subcommittee on Planning and Programming examined this item at its 20th Meeting, held in April 1993. The total operating costs of INPPAZ for 1992 amounted to \$3,231,160 and they have been estimated at \$9,224,800 for the biennium 1994-1995 and \$10,191,400 for the biennium 1996-1997. During the Subcommittee's discussion of the matter, the members praised the work of INPPAZ, although they expressed concern over the growing costs associated with the Institute. It was suggested that it might try to increase income through the sale of services, and it was proposed that a market study be conducted in order to determine demand for the services that the Institute could offer.

The Secretariat reported that the financial study carried out pursuant to Resolution V of the XXXVI Meeting of the Directing Council had taken into account: a) the mission and functions of INPPAZ, as set forth in the founding Agreement, and the volume of activities, based on the actual known demand for technical cooperation on the part of the countries during 1992 and projections for the future; b) the number of staff by category needed to perform the normal functions of the Institute; c) personnel costs, based on the Organization's calculations of the cost for staff hired under the United Nations system, the cost for national personnel, fixed maintenance costs, variable costs for the delivery of technical cooperation, and predicted inflation during the next biennium; and d) the need to upgrade installations and equipment.

In the course of the Committee's discussion, it was pointed out that under the Agreement establishing INPPAZ the contribution of the Government of Argentina was to be paid before 31 May of every year in order to ensure the normal operation of INPPAZ. The Transitory Article even provided for closing the Institute at the end of the biennium if the host government had not paid its contribution in full by that time. The Representative of Argentina stated that the amount owed for INPPAZ and the now-defunct Pan American Zoonoses Center (CEPANZO) had been reduced considerably with the payment of the quota contribution for 1992, and that other payments were being processed by the Ministry of the Economy of his country and would be made at any moment, in accordance with the express instructions of the President of Argentina, Dr. Menem.

It was emphasized that the planned market study would provide essential information concerning the type of services that INPPAZ might offer and its ability to attract and retain qualified technical experts. A report concerning the possible demand for INPPAZ services from the countries will be available by the time the Subcommittee on Planning and Programming holds its meeting in December 1993. In addition, the Committee was informed that a professional internship program has been established to

bolster the core staff, inasmuch as an international reference institution such as INPPAZ requires a staff with great moral and professional integrity.

In regard to staff, the Director reiterated that in principle there will be no increase in the number of United Nations professional posts at the Institute. Rather, every effort will be made to seek and utilize the resources available at the local level and mechanisms will be developed to enable exchanges of highly trained personnel with institutions in and outside the Region who have experts in INPPAZ's areas of specialization.

In its Resolution X, the Committee recommends to the Directing Council that, among other things, it request the Government of the Argentine Republic to bring its 1992 and 1993 contributions up to date by December 1993, in the amounts of \$1,627,500 and \$1,627,500, respectively, in order to guarantee the normal operation of the Institute; and to approve a budget for INPPAZ of \$9,224,800 for 1994-1995, of which the PAHO contribution is \$3,825,100 and the contribution of the Government of the Argentine Republic, \$4,034,700. It also recommended that the Council request the Director to continue to make all necessary efforts to guarantee the financing of the Institute, and to study the market for the services that INPPAZ is in a position to offer to the Member States of PAHO, to the private sector in the Region, and to third countries.

Item 4.9: Expanded Program on Immunization

The Secretariat noted that, on 23 August 1991, what will probably be the last case of paralytic poliomyelitis in the Region was detected in a child living in the area of Pichanaki, Peru. The procedure for certifying the eradication of the disease is already under way.

It should be remembered, however, that there is always the risk of importation of cases as occurred recently in Canada with a case from the Netherlands. It is important to point out that the Canadian incident also shows that the Region is capable of fulfilling the requirements of the International Certification Commission for Polio Eradication (ICCP). It is also noteworthy that Belize, Guatemala, and Mexico have established a trinational association for border cooperation, which has provided important support in the area of immunization.

It is essential to give priority to the certification process. The basic criteria of eradication are: investigation of cases within 48 hours following a report; an annual rate of flaccid paralysis of less than 1 case per 100,000 children under the age of 15; collection and examination of stool samples from cases; and analysis of stool samples from contacts. In 1992, the first year in which no cases of poliomyelitis have been reported in the Region, only three countries--Ecuador, Honduras and Paraguay--had fulfilled the criteria for certification.

EPI has also achieved important successes in the control of two diseases preventable by vaccination: neonatal tetanus and measles. Concerning neonatal tetanus, a considerable reduction in cases has been observed since 1988, the year in which the high-risk areas were identified. The vaccination of women at high risk has also had a positive effect.

During the discussion, the representatives of several governments outlined the activities being carried out in their countries.

The Committee adopted Resolution XVI, in which it recommends that the Directing Council, among other things, commend the health authorities of Canada for their prompt detection and apparent containment of the spread of wild poliovirus following its importation from the Netherlands; urge all the Member Governments to intensify their surveillance among groups potentially at risk for transmission of poliovirus associated with the aforementioned or future importations; recommend to all the Member Governments that they establish national certification commissions to collect and analyze the data on the eradication of poliomyelitis; and call on all the Member Governments to increase their support for activities aimed at achieving control and the definitive elimination of measles and at achieving increased control of neonatal tetanus. It also recommends that the Council request the Director to continue his efforts to mobilize additional resources for the EPI and its disease control and elimination initiatives, and establish a special fund for the control and the elimination of measles.

Item 4.10: Health Promotion in the Americas

The document presented by the Secretariat examined health promotion as a response to the situation prevailing in the Region, taking into account socioeconomic, demographic, and epidemiological factors and the overall approach of health and development. The document also outlined the challenges and constraints facing both PAHO and the Member States for the development of health promotion and protection: the scarcity of human resources with the skills needed to utilize new technologies, and the current problems of competition between different development sectors to coordinate economic and social investments.

The Committee acknowledged that epidemiological changes are occurring rapidly within an accelerated demographic transition, the result being a significant increase in morbidity and mortality from chronic diseases associated with the aging of populations. The social and economic cost of such diseases is very high and hence their prevention and health promotion constitute fundamental strategies for ensuring that adults and the elderly achieve a healthy standard of living. It also stressed the importance of educating children, not only for the benefit of their own future health but also for the influence they exert on their parents. In addition, it was noted that relations with the ministries of

education are being strengthened, as are, where possible, those with ministries of communication, since it is necessary to give broad dissemination to the concept of health as a resource and an investment in development, emphasizing the clear need to have healthy communities, to step up the processes of decentralization, and to strengthen local health services and systems.

In Resolution XVIII, the Executive Committee recommends to the Directing Council that it urge the Member Governments to develop public policies aimed at strengthening health promotion and addressing emerging health problems, especially those related to nutrition; strengthen programs intended to foster intersectoral cooperation in health promotion; formulate policies and plans directed at adapting current public health programs and services, promoting the "healthy cities" concept; and include mass communication as a key instrument in community health programs. In addition it recommends that the Council request the Director to prepare a regional plan, with concrete objectives and targets, and present this plan to the Subcommittee on Planning and Programming and the Executive Committee, and to continue his efforts to identify and promote strategies to mobilize national and international resources for health protection and promotion initiatives.

Item 4.11: Family Planning, Reproductive Health, and Population

The Subcommittee on Planning and Programming reported that it had thoroughly examined the Secretariat's presentation on family planning, reproductive health, and population, arriving at the conclusion that the concept of reproductive health has become an important component of the overall health of the population and that the issue of abortion should be examined from a broader perspective than that employed up to the present. With respect to family planning, it was underscored that intersectoral participation should be encouraged to address the problem posed by high population growth rates. In addition, it was pointed out that men are not sufficiently involved in strategies of family planning, and the serious consequences of teenage pregnancy were emphasized. Finally, the Subcommittee commented on the usefulness of social marketing techniques in reproductive health care, family planning, and health service activities.

The Committee adopted Resolution XIX, which recommends to the Directing Council that it reaffirm that population and family planning activities are indispensable to health, and that family planning should be integrated into health programs and promoted actively under the principle of respect for the rights of individuals and couples. It also recommends that the Member Governments be urged to participate actively in the World Conference on Population, to be held in Cairo, Egypt, in 1994; review, adjust, and reformulate, as necessary, their plans of action and programs on reproductive health and family planning; and develop projects of technical and financial support in the area of family planning, reproductive health, and population to be submitted to bilateral or

multilateral cooperation agencies. In addition, it recommends that the Council request the Director to ensure that PAHO provides the necessary technical support so that the issues of population and health, reproductive health, and family planning are included in the proposed regional and global plans of action on population; collaborate with the countries in situation studies, policy design, and the development of strategies and programs to provide family planning and reproductive health services to the entire population; and continue to contribute to the search for and mobilization of national and international resources in order to make it possible to expand the Organization's activities in these areas.

Item 4.12: Violence and Health

The document presented by the Secretariat accepts the definition of violence as the imposition between human beings of a significant degree of avoidable pain and suffering, stating that violence in the Region constitutes a serious public health problem and is a factor in the deteriorating quality of life.

The Secretariat's presentation made special reference to the most vulnerable groups. The most common forms of violence perpetrated among children are physical and psychological abuse, sexual abuse, economic exploitation, and negligence on the part of their guardians. As regards violence against women, the 13th Meeting of the Special Subcommittee on Women, Health, and Development recommended that this issue be treated as a public health concern requiring a response from health agencies, in terms of prevention as well as care and rehabilitation. The third high-risk group is made up of adolescents and young people, who are frequently involved in social and work-related violence and homicides, suicides, and wars. Finally, but no less important, the elderly are a very vulnerable group because they often find themselves in a situation of physical, psychological, and economic dependency and progressive social isolation, in addition to the fact that their physical capacity is diminished.

Various speakers intervened in the discussion. One Representative suggested that the definition of violence in the document be expanded to include self-inflicted violence, specifically suicide and attempted suicide. The Director said that he recognized the limitations of the definition of violence that had been adopted, since it did not reflect all aspects of the relationship between violence and health. On the other hand, although the elderly, children, and women are indeed groups at risk, young adults are the principal victims of violence, as a result of war, social and work-related violence, and homicide. The significance of this fact lies in its repercussions on social production and in the years of potential life lost. Therefore, without minimizing the importance of the risk groups mentioned in the document, the young adults must not be forgotten.

The Committee adopted Resolution III, in which it recommends to the Directing Council that it urge the Member Governments to establish national policies and plans for the prevention and control of violence in collaboration with all the social sectors involved; give priority to the establishment of support service networks for the management of violence against women and children with the collaboration of women's organizations; identify and mobilize the necessary resources for establishing multisectoral health promotion and protection programs for the promotion of healthy behaviors, the reduction of exposure to unnecessary risks, and the adoption of legal measures that support the prevention and control of violence; and promote multidisciplinary research on the problem, establishing the necessary training programs. In addition it recommends that the Council ask the Director, within available resources, to formulate a regional plan of action on violence and health that contains a special component on violence against women; and to collaborate with the countries on the identification and mobilization of financial resources for the execution of these proposals.

Item 4.13: Health of Indigenous Peoples

In its presentation, the Secretariat recalled that the Subcommittee on Planning and Programming, during its 18th Meeting in April 1992, had recommended that a hemispheric workshop on the health of indigenous peoples be held. The workshop took place in Winnipeg, Manitoba, from 13 to 18 April 1993, and was attended by representatives from 18 countries of the Region and official delegations of governments, organizations, and indigenous peoples of the Americas.

The limited available information on the health of these peoples reveals a profile similar to that of the most socioeconomically disadvantaged groups: viral diseases, which often spread quickly and become epidemic; recrudescence of tuberculosis and malaria; high prevalence of endemic diseases in tropical and subtropical areas; high incidence and case-fatality rate from the cholera epidemic; and considerable increases in the occurrence of sexually transmitted diseases, including AIDS. In addition, mental health problems, violence, alcohol and substance abuse, and malnutrition are common.

The meeting in Winnipeg ratified five fundamental principles: the need for a holistic approach to health; the right to self-determination of the indigenous peoples; respect for and revitalization of indigenous cultures; the right to systematic participation; and reciprocity in relations.

During the discussion, the Executive Committee emphasized that, in spite of being marginalized and high-risk population groups, at the same time the indigenous peoples are groups who possess great cultural wealth and who have been obliged to develop certain alternative models of health care that warrant due consideration.

In Resolution IV, the Committee recommends to the Directing Council that it urge the Member Governments to facilitate the establishment or strengthening of mechanisms of consensus for the formulation of policies and strategies; strengthen the technical, administrative, and managerial capacity of national and local institutions that are responsible for the health of indigenous populations; implement intersectoral actions in the areas of health and the environment; promote the transformation of health systems and support the development of alternative models of care for indigenous populations within the local health system strategy; and promote the development of prevention and health promotion programs. It also recommends that the Council request the Director, within the limits of available resources, to provide support for the initiative "Health of the Indigenous Peoples of the Americas"; to coordinate the regional effort; to expand the evaluation of living conditions and the health situation to include the indigenous peoples of the Region; and to promote research at the regional level and in selected countries on high-priority health issues and health care for indigenous peoples.

Item 5.1: Report on the Collection of Quota Contributions

At the first plenary session the Secretariat informed the Executive Committee that as of 1 January 1993 total arrears of contributions for years prior to 1993 amounted to \$37,775,893. Of that amount, between 1 January and 18 June 1993 a total of \$16,831,724 were received. Subsequently, additional payments totaling \$3,448,266 were received from the Governments of Argentina and the Bahamas, bringing the total arrears down to \$17,495,903. In 1992 the figure for the same point in time was \$25,058,896. Although the decrease is not particularly dramatic, it should be pointed out that around \$14.7 million corresponds to pending assessments of four Member States.

With respect to the collection of contributions for 1993, the amount received as of 18 June 1993 was \$15,117,912. Seven members had paid the assessment in full, five had made partial payments, and 22 had not paid anything towards their 1993 assessment for the current year. Also, 14 Member States had not made any payments to reduce their arrears.

As of the date of the opening of the 111th Meeting of the Executive Committee, Antigua and Barbuda owed \$56,594 in quota assessments dating back to 1989, and the Organization had received payments totaling \$13,690. Cuba owed \$2,428,102, of which it had paid only \$80,000 as of June 1993 and had large balances outstanding for 1990 and 1991. Guatemala owed \$478,849, of which \$88,845 dated back to 1989. Although the Organization collected \$51,927 from that country in 1992, as of the date of the Meeting it had not received any payment during 1993. The Dominican Republic owed a total of \$428,540, which it is expected to pay under its deferred payment plan as amended in September 1992. As of the date of the 111th Meeting, five additional countries (Bolivia, Guyana, Haiti, Nicaragua, and Peru) were at risk of losing their voting privileges as a result of not having met their financial commitments.

Article 6.B of the Constitution of PAHO stipulates that the voting privileges of a government will be suspended if its arrears exceed the sum of its annual payments of contribution for two full years, unless the Conference or the Directing Council is satisfied that the failure to pay is due to conditions beyond the government's control. In that case, it may permit the government to vote.

The Committee adopted its Resolution I in which, among other things, it recommends to the XXXVII Meeting of the Directing Council that the voting restrictions contained in Article 6.B of the PAHO Constitution be strictly applied to those Member Governments who by the opening of that meeting have not complied with the provisions of Resolution I of the XXXVI Meeting of the Directing Council as they apply to their quota payment situations.

Item 5.2: Interim Financial Report of the Director for the Year 1992

Official Document 255 contains the report of the Director on the financial transactions of the Organization for the period 1 January to 31 December 1992, as well as its financial situation at the end of the first year of the biennium, that is, 31 December 1992. The report also includes financial statements of the Caribbean Epidemiology Center (CAREC), the Caribbean Food and Nutrition Institute (CFNI), and the Institute of Nutrition of Central America and Panama (INCAP).

The Representative of the United States of America asked that future financial reports include a subtotal at the end of the list of Member Government contributions, immediately preceding the section showing contributions from international organizations and private and public sector agencies, so that it would be clear how much money was coming in on a voluntary basis from the countries and how much from other organizations.

The Committee did not consider it necessary to adopt a resolution on the item. It was noted that the discussion would be included in the records of the Meeting.

Item 5.3: PAHO Building Fund and Maintenance and Repair of PAHO-owned Buildings

The Secretariat reported on the present status of three projects: the improvement of the safety systems in the Headquarters building, the replacement of the screen wall of the Council Chamber, and the repair of the roof of the Chamber. It also presented a request for funds for the construction of a document center in the PAHO building in Caracas.

The Committee adopted Resolution XI, in which it approves the project to convert into office space the present document center in the Venezuela building and to construct an additional area to house the document center at an estimated cost of \$85,500. It also approves the expenditure of an additional \$441,000 for the replacement of the concrete screen wall outside the Council Chamber of the Headquarters building.

Item 5.4: New PAHO Headquarters Building

The Working Party on a New Headquarters Building, composed of the representatives of Barbados, Chile, and the United States of America, and the Minister of Public Service and the Environment of Jamaica as a special advisor, reported to the Committee on this subject. The Working Party had analyzed the advantages and disadvantages of three potential sites for the new Headquarters building: one in the District of Columbia and two in the state of Maryland. It was decided that the site located in Chevy Chase, Maryland, best met the needs of the Organization and was reasonably priced.

The Director noted that the proposed site encompasses more than 19 acres (approximately eight hectares) and that the purchase price is not expected to exceed \$9 million. The total cost of constructing and equipping the building would not exceed \$55 million. Those expenses would not be covered out of program resources but with funds from the rent of the current building, proceeds from the sale of PAHO's interest in the Virginia Avenue building, and a mortgage on the new building.

The Council adopted Resolution XII, in which it, *inter alia*, adopts the proposal of the Working Party and authorizes the Director to purchase the parcel of land located at the southeast corner of the intersection of Jones Bridge Road and Connecticut Avenue, Chevy Chase, Maryland, provided there is no adverse impact on the regular budget of the Organization; and authorizes the Director, once the site has been purchased, to proceed with the contractual arrangements necessary to develop and construct a new Headquarters building.

Item 5.5: Arrearage Payments by the United States of America

The Secretariat presented the document on this subject, indicating that in late 1991, the United States informed the Organization of its intention to pay \$10,430,000 in arrearages in four equal annual installments of \$2,608,000 each, beginning in calendar year 1992, in addition to its full quota payments for each year. In view of the fact that a national law requires that such arrearage payments be directed toward special activities that are mutually agreed upon by the United States and the respective international organization, the proposal for the allocation of these funds was prepared jointly for presentation to the Executive Committee.

In response to certain reservations expressed during the discussion, the Director pointed out that the procedure adopted unquestionably implies a certain deviation from the existing standards; nevertheless, it does not set a precedent for other countries in arrears as it is the result of a requirement established by United States law.

The Committee adopted Resolution XX, in which it decides to endorse the proposed allocation by the Director of \$1,208,000 for the Cholera Fund, \$1,200,000 for the Measles Fund, \$5,622,000 for the Capital Equipment Fund, and \$2,400,000 for the Working Capital Fund, in accordance with Article VI of the Financial Regulations; to set aside a reserve from the existing Working Capital Fund to serve as the guarantee for the loans discussed in Document CE111/25, Rev. I, paragraph 4, and to allocate from the Working Capital Fund to this reserve the amount of \$4,500,000, which shall serve as an adjustable guarantee for the current and future outstanding balances of the loans; to deposit in the Working Capital Fund payments of arrearages by the United States of America, as discussed in paragraph 1 above, and by other countries, up to the authorized level of the Fund; to recommend favorably to the XXXVII Meeting of the Directing Council that the Director be authorized to increase gradually the level of the unencumbered Working Capital Fund from \$11,000,000 by an amount equal to the sums no longer needed in the reserve described in paragraph 2, the total authorized level of the Working Capital Fund not to exceed \$15,000,000; and to review periodically the level of the Working Capital Fund and to ensure its adequacy.

Item 5.6: Amendments to the Staff Rules of the Pan American Sanitary Bureau

The Secretariat explained that the modifications introduced into the Staff Rules are pursuant to decisions taken by the United Nations General Assembly at its forty-seventh session on the basis of recommendations made by the International Civil Service Commission (ICSC). In the addendum to the document presented, Resolution WHA46.38 concerning the elimination of the right to meritorious within-grade increases is examined from various angles. This resolution is the result of a quest for compromise between fairness to staff and the necessity of complying with a mandate of the United Nations General Assembly.

After listening to the explanations given by the Secretariat, the Executive Committee adopted, in succession and without a vote, the following three resolutions:

- Resolution XIII, which confirms the amendments to the Staff Rules of the Pan American Sanitary Bureau submitted by the Director in the Annex to Document CE111/24, with effect from 1 January 1990 concerning the end-of-service grant; with effect from 1 January 1993 in respect of primary and secondary dependents' allowances for professional and higher-graded staff, education grant and special education grant for disabled children; and with effect from 1 March 1993 concerning the salary scale

applicable to staff in the professional category and directors' posts and the rates of staff assessment for the professional and higher-graded staff without dependents.

- Resolution XIV, which decides, effective 1 March 1993, to establish the annual net salary of the Deputy Director at \$79,716 at dependency rate and \$72,087 at single rate; and to establish the annual net salary of the Assistant Director at \$78,716 at dependency rate and \$71,087 at single rate. In addition, it recommends to the Directing Council at its XXXVII Meeting that it establish the annual net salary of the Director at \$86,914 at dependency rate and \$78,122 a single rate, effective 1 March 1993.

- Resolution XV, which requests the Director to amend the Staff Rules of the Pan American Sanitary Bureau in order that no staff joining the Bureau on or after 1 March 1993 will be eligible for extra meritorious within-grade steps after 20, 25, 30, and 35 years of service; and also requests the Director further to amend the Staff Rules in order that all staff who were working in the Bureau before 1 March 1993 and who would have been eligible for an increase should, at the time they would have become eligible for that increase, receive one within-grade increase equivalent to the amount which would have been granted as a meritorious increase under the provisions of Staff Rules 555.1 and 555.2, and receive no more such increases thereafter.

Item 6.1: Report on the VIII Inter-American Meeting, at the Ministerial Level, on Animal Health

The Secretariat reported on the VIII Inter-American Meeting, at the Ministerial Level, on Animal Health (RIMSA VIII) which was held at the Headquarters of the Organization from 27 to 29 April 1993. The purpose of the meeting was to strengthen cooperation between the agriculture and health sectors in areas of mutual interest. In keeping with the strategic approaches of the Veterinary Public Health Program, the achievements of the regional programs that are being carried out by the countries with PAHO technical cooperation were presented: elimination of rabies, hemispheric eradication of foot-and-mouth disease, eradication of bovine tuberculosis, and food protection.

The significant advances made in the strategic approaches of rabies and foot-and-mouth disease eradication were highlighted. It was reported that by the end of the 1980s, 80% of the Latin American capitals had no cases of human rabies. It was also noted that Uruguay and Chile have succeeded in becoming free of foot-and-mouth disease. The active participation of the private sector in the attainment of these goals was stressed.

With regard to the program on food protection, 100% of the countries have the ability to carry out microbiological analysis of food and have human resources trained to identify *Vibrio cholerae* in food products. In addition, they have developed technical

guidelines and formulated policies for the sale of food products in the face of the cholera epidemic in the Region. A guide was prepared on surveillance, prevention, and control of food-borne diseases and on the role of veterinary public health in local health systems.

RIMSA VIII adopted 10 resolutions, which are included in its final report.

The Committee did not consider it necessary to adopt a resolution on this subject.

Item 6.2 Intervention of the Representative of the PAHO/WHO Staff Association

The Representative of the Staff Association said that the most important issue considered during the meeting of Representatives of the Staff Associations of the Regional Offices of WHO, held in Geneva in January 1993, was the deterioration of conditions of service for United Nations staff members in 1992.

After pointing out that staff morale at PAHO is very low, especially among general services staff, he said that a very controversial issue is the proposed new Headquarters building and the effects and problems that the move will entail for staff, especially in regard to housing, taxes, and transportation. The speaker requested that a representative of the Staff Association be included in all the stages of planning, design, and construction of the new building.

Although he recognized that relations with the Office of Personnel had improved notably, especially after the appointment of the new Chief of Personnel, who has shown a commendable spirit of collaboration, the Association still fails to understand why the Administration refuses to reinstate a staff representative in the Post Classification Committee.

Finally, although the Subcommittee of the Staff Association on the Status of Women within PAHO acknowledges the effort by the Administration to improve the balance between men and women in professional posts, it is undeniable that women are clustered in the lower professional grades (P.3 and below) and have difficulty breaking through the glass ceiling that continues to exist. There is a notable scarcity of women who have attained the P.4 and P.5 levels, where they could acquire the experience necessary to move into program coordinator or country representative posts.

The Director preferred not to comment in order not to exacerbate conflicts, but he regretted that the report presented did not correspond to the text of the document prepared by the Association for the Executive Committee. In any case, he reiterated his willingness to maintain an ongoing dialogue.

The Committee members expressed surprise at the presentation by the Staff Association, noting that conversations with individual staff members did not confirm the impression of the widespread dissatisfaction among staff that had been described.

The discussion on the item is reflected in the records of the Meeting.

Item 6.3: Resolutions and Other Actions of the Forty-sixth World Health Assembly of Interest to the PAHO Executive Committee

The Committee considered the analysis prepared by the Secretariat of some of the actions taken by the World Assembly which are of interest for the Region. The document discusses, among other matters, the reappointment of Dr. H. Nakajima as Director-General and contains an analysis of the proposed program budget for the biennium 1994-1995 and information on the assessments of Member States for that biennium.

Many of the items examined by the Assembly were also discussed during the 111th Meeting of the Executive Committee, namely: the eradication of poliomyelitis, health and the environment, maternal and child health and family planning, and the International Year of the Family. Other items dealt specifically with tuberculosis, malaria, dengue, and nutrition.

Among the most noteworthy resolutions are: Resolution WHA46.16, which underscores the significance of the report of the Working Group on the WHO Response to Global Change; Resolution WHA46.28, which requests the Director-General to accord the necessary assistance to the Republic of Cuba in order to help overcome the present crisis in the health care sector following the recent disaster caused by the "storm of the century"; and Resolution WHA46.35, which requests the Director-General to introduce a clearer, simpler, more "user-friendly" proposed program budget for the financial period 1996-1997.

Finally, the Secretariat noted that Costa Rica, representing the Americas, had been elected to designate a member of the Executive Board upon the expiration of the term of Dr. James Mason, designated by the United States of America, and that the Forty-seventh World Health Assembly will convene in Geneva on 2 May 1994.

The Committee did not consider it necessary to prepare a resolution on this item.

Item 7: Other Matters

The Director clarified that the revised version of the Report of the Working Group of the WHO Executive Board on the WHO Response to Global Change had not

been received until after the opening of the Executive Committee Meeting, and it would therefore not be possible to consider it in depth until the XXXVII Meeting of the Directing Council. Nevertheless, the Representative of the United States of America urged the other Member Governments of the Region to communicate as soon as possible to WHO the fact that they know of and support the ideas for reform advanced by the Working Group, and are anxious to see them implemented promptly.

Regarding the PAHO Award for Administration, and at the request of the Director, the Committee decided to support a recommendation to increase the amount of the Award from \$500 to \$5,000, so that, although the Award will continue to have mainly symbolic value, it will at least be sufficient to cover the expenses of award recipients, who have traditionally borne the cost of travel to and lodging in Washington, D.C., to receive the Award.

The Representatives of Chile, Cuba, and the United States of America noted that their terms on the Executive Committee will end in 1993 and expressed their hopes for the continuation and strengthening of the fruitful exchanges of experience that have always taken place within the Committee in a spirit of brotherhood.