



*executive committee of  
the directing council*

PAN AMERICAN  
HEALTH  
ORGANIZATION

*working party of  
the regional committee*

WORLD  
HEALTH  
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99th Meeting  
Washington, D.C.  
June 1987

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Provisional Agenda Item 3.2

CE99/18 (Eng.)  
7 May 1987  
ORIGINAL: SPANISH

REPORT OF THE SPECIAL SUBCOMMITTEE ON WOMEN, HEALTH AND DEVELOPMENT

At the annual meeting of the Special Subcommittee on Women, Health, and Development, to be held 17-19 June 1987, the Secretariat will present two documents: a report on the 1986-1987 activities of the regional program on women, health and development, and a proposed medium-term regional plan of action, to serve as a guide for Member Countries in the implementation of their future strategies, especially the activities planned for the next four years.

The Representatives of the five Member Countries of the Subcommittee (Argentina, Bahamas, Brazil, Honduras and Mexico) will analyze the documentation and submit their comments and recommendations to the Executive Committee.



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99th Meeting  
Washington, D.C.  
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Provisional Agenda Item 3.2

CE99/18, ADD. I (Eng.)  
22 June 1987  
ORIGINAL: SPANISH

REPORT OF THE SPECIAL SUBCOMMITTEE ON WOMEN, HEALTH AND DEVELOPMENT

In compliance with operative paragraph 2(b) of Resolution XIV of the XXXI Meeting of the Directing Council, the Special Subcommittee on Women, Health and Development met on 17, 18 and 19 June 1987 in Washington, D.C., to consider the progress of the Program on Women, Health and Development and determine the measures to be implemented in the medium-term. The Subcommittee has five members: Argentina, Bahamas, Brazil, Honduras and Mexico. By decision of the Directing Council, Brazil was named to the place vacated by Canada on expiration of its term of service on this Subcommittee.

The delegates for Honduras, Bahamas and Mexico were elected Chairwoman, Vice Chairwoman and Rapporteur, respectively. The agenda proposed by the Secretariat was then reviewed and approved, and included, among other items, a review of the Subcommittee's final report of its 1986 meeting, consideration of the Summary of the Activities Program for 1986-1987, discussion of the Medium-term Program, and an examination of the document on the "Perfil del Punto Focal Nacional" (Profile of the National Focal Point).

The delegate of Mexico, who had served as Chairwoman of the Subcommittee last year, read out the report presented to the Executive Committee that year.

I. ACTIVITIES PROGRAM ON WOMEN, HEALTH AND DEVELOPMENT DURING 1986-1987

The Subcommittee welcomed the designation of Dr. Eglá Abrahams as Regional Advisor to the Program and the upgrading of this position from P.2 to P.4, and was also glad to learn that the Internal Advisory Committee on the WHD Program had been meeting regularly and becoming more interested in the WHD Program.

The report reveals an upswing in activities under the Program in the countries of the Region, notably the holding of country workshops on the subject of women, health and development, training courses for a variety of female personnel, the design of instructional models for training health personnel in the framing and implementation of projects for adolescents, research on women's nongovernmental organizations and their potential for participation in health measures and studies to determine needs in social welfare support measures, for women and their families. Also, several countries have launched projects for responding to specific needs of rural women, including the installation of water supply systems. Measures to educate and build awareness in broad segments of the female population on the importance of caring for their own health and that of their families and communities have been multiplying in the countries of the Region.

It has been found that satisfactory operation of the Program depends directly on the capability and authority of the national focal points, and efforts to strengthen them are being made from the regional focal point. One of the steps taken in this direction is the preparation of a document under the title "Perfil del Punto Focal Nacional" (Profile of the National Focal Point) and the organization of a seminar with all the focal points of the Latin American countries, to be held in Caracas, Venezuela, from 1 to 4 September of this year, and of a similar seminar to be held for the Caribbean countries next year.

In support of activities under the WHD Program, work has begun on the compilation and sorting of publications and documents on WHD itself and their entry into the computerized information system of the PAHO Library; the first stage of this activity will be completed in July 1987.

Also, steps are in hand to expedite mobilization of the funds needed to implement the eight Strategies established for the Program and approved by the Executive Committee in 1986. The Subcommittee heard and commented on the progress made in different technical programs in the Program's area of action:

#### Plan for the prevention of maternal mortality

The focus is primarily on improving the quality of care delivery through political, technical and operational measures. A source of growing concern under the Maternal and Child Health Program, so closely related to the WHD Program, is the use of unsuited technologies during pregnancy and delivery and the increasing frequency of cesarean deliveries. While the latter do not affect maternal mortality, they do impair the relationship between the mother and her infant and rational utilization of available resources.

#### Prevention of cervico-uterine and mammary cancer

The emphasis was on the need to redirect campaigns conducted in the countries under new criteria, for those now applied have proved unsuitable. Regional and subregional workshops have been held and there have been encouraging follow-up initiatives.

#### Occupational health of women

Greater clarity and conceptual soundness are still lacking in this area, and the indicators currently used to gauge the participation of women in economic activity are open to question, for they refer only to women employed in the formal sectors of the economy and disregard those in the informal sectors, which are the very area in which women make their greatest contribution and are least protected by legislation, social security and medical care. There is need for emphasis on the occupational health of women in rural areas and in the peri-urban shantytown belts of the major cities, whose numbers are increasing as a proportion of the heads of household. The connection between mental health and occupation was reasserted, the latter including the work done in the home and the double work day.

#### Education for health

There was emphasis on the importance of encouraging greater participation by women in the promotion of their own health and that of their families, and it was noted that it was important to include women in this process from adolescence to old age. Some of the subjects of greatest interest were sexual education and abuse of drugs, alcohol and tobacco.

#### Acquired Immunodeficiency Syndrome (AIDS)

The Subcommittee considered the grave public health problem represented by this syndrome to women, couples, families and society at large. It noted the importance of informing and alerting women to this disease, ways of preventing it, and its impact. Specifically, it was considered that measures should be taken to mobilize women for the prevention of this disease.

#### The status of women in PAHO

There has been practically no change in the qualitative and quantitative representation of women in permanent positions and short-term consultancies in the Organization over the last year. Women are generally impeded by family situations from taking on responsibilities requiring residence outside their countries, and it is easier to accept short-stay consultancies; therefore, arrangements should be promoted to ensure a good turnout of applicants and, whenever their qualifications are comparable to those of male applicants, they should be given preference.

## II. RECOMMENDATIONS

In view of the foregoing, the Subcommittee decided to present the following recommendations to the Executive Committee:

- That in the report that the Governing Bodies have requested for 1988 on the maternal and child program, emphasis be placed on the regulation of health services during pregnancy, delivery and the puerperium, proper use of technology in this process, and the problem of cesarean sections.
- That research be carried out on:
  - a) Aspects of the health of women and its socioeconomic, political and cultural conditioning factors;
  - b) Risk behaviors in adolescent women;
  - c) Innovations in educational technologies for changing behaviors that are part of the lifestyle of adolescents and pose risks to their health;
  - d) Health services and their bearing on maternal mortality;
  - e) Occupational health in women employed in the formal and informal sectors of the economy;
  - f) Use of legal (sedatives and stimulants) and illegal drugs by women;
  - g) Effects of contraceptive methods on the health of women;
  - h) The place of women in the organizational structures of the various institutions making up the health sector in the countries; and
  - i) Impact of AIDS on women as individuals and members of families.
- That activities such as workshops, symposia, audiovisuals and programs through the media be conducted to build awareness of AIDS in women and mobilize them for its prevention.

The Executive Committee may wish to consider the adoption of the following proposed resolution:

Proposed Resolution

WOMEN, HEALTH AND DEVELOPMENT

THE 99th MEETING OF THE EXECUTIVE COMMITTEE,

Having seen the report of the Special Subcommittee on Women, Health and Development (Document CE99/18); and

Advised that, in compliance with Resolution XIV of the XXXI Meeting of the Directing Council, the Special Subcommittee on Women, Health and Development has met to consider and evaluate the progress made in this field in the Region, to propose solutions and continue promoting concerted action in the field of women, health and development,

RESOLVES

To recommend the following proposed resolution to the XXXII Meeting of the Directing Council for approval:

THE XXXII MEETING OF THE DIRECTING COUNCIL,

Having seen the report of the Special Subcommittee on Women, Health and Development (Document CD32/\_\_\_);

Having regard to the previous resolutions approved by the Governing Bodies of PAHO on women, health and development (WHD), particularly Resolution XII, adopted by the XXII Pan American Sanitary Conference; and

Mindful of Resolution WHA40.9 approved by the Fortieth World Health Assembly,

RESOLVES:

1. To urge the Member Countries:

- a) To complete their plans for carrying out during the biennium 1988-1989 programs and activities that will implement the Regional WHD Strategies approved in Resolution XII of the XXII Pan American Sanitary Conference.
- b) To continue strengthening the national focal points in accordance with the guidelines laid down in the document "Structure and Functions of the National Focal Point of the Program on Women, Health and Development," approved by the Subcommittee.

- c) To review and revise their health policies for both the public sector and the social security system with a view to providing real access for all women to comprehensive health services;
  - d) To study the national legislation and adjust it for attainment of the goal of equality for women in the quality and coverage of the health services available to them;
  - e) To develop for women comprehensive health services of reliable quality and utilizing appropriate technologies;
  - f) To conduct the operations research needed to identify ever better the health problems of women, their specific needs as seekers of services, and their situation as providers thereof, chiefly in the areas cited in the recommendations of the Subcommittee's Report.
2. To request that the Director:
- a) Continue his efforts to increase the representation of women in PAHO so as to attain the goal of 30% in professional and higher posts, as approved by Resolution XII of the XXII Pan American Sanitary Conference; and also to increase the representation of women as temporary consultants, coordinating with the NFPs for the identification of candidates;
  - b) To promote in all areas of the Organization and the countries increased participation by women in regional meetings, fellowships, training activities and technical and scientific meetings of any other kind;
  - c) To increase the mobilization of the resources needed to apply the approved regional strategies and to promote, execute and disseminate specific activities under the Program on Women, Health and Development in the countries and throughout the Region;
  - d) To support the conduct of research particularly in the areas recommended in the Subcommittee's report;
  - e) To lengthen the duration of the meetings of the Special Subcommittee on Women, Health and Development in 1988 and prepare basic working documents on the subjects of comprehensive health of women and occupational health.

STRUCTURE AND FUNCTIONS OF THE NATIONAL FOCAL POINT OF  
THE PROGRAM ON WOMEN, HEALTH AND DEVELOPMENT

SPECIAL SUBCOMMITTEE ON WOMEN, HEALTH AND DEVELOPMENT

Washington, D.C., 17-19 June 1987



STRUCTURE AND FUNCTIONS OF THE NATIONAL FOCAL POINT OF  
THE PROGRAM ON WOMEN, HEALTH AND DEVELOPMENT

1. Justification

In 1982 the XXI Pan American Sanitary Conference adopted Resolution XXVII on Women in Health and Development (WHD). In operative paragraph 2, this resolution recommended that the Organization's Member Governments:

"...establish, in each country, a focal point for women in health and development to coordinate related intersectoral activities."

In the same paragraph, this resolution recommended the planning, coordination and execution of country activities in the WHD field to give women a steadily increasing part to play in the development of their countries through growing participation in all national sectors so as to attain PAHO/WHO's goal of health for all by the year 2000.

In September 1986 the XXII Pan American Sanitary Conference approved the eight Regional Forward-looking Strategies: Women, Health and Development, which highlight the various activities to be carried on by the countries during the period 1987-1990 to implement the Regional WHD Program (RPWHD).

Implementing these eight Strategies in the countries requires measures that are multidisciplinary, institutional and multisectoral. The complexity of these measures demands the institutionalization of the national focal point (NFP) as an essential supporting team to perform the functions of promotion, information, coordination, support, programming, execution, monitoring, evaluation and representation for the national plans and programs in the different countries.

PAHO's responsibility to cooperate with the countries in plans that make women participants in the development process poses a challenge both to the countries and to PAHO, which compels the institutionalization of the NFP.

2. Preliminary Features of the NFP

The NFP would be an effective link between the RPWHD and the national programs through the Ministries of Health and the PAHO/WHO Country Offices. The NFP would be a multidisciplinary and multisectoral team made up of officers of decision-making rank, possessing real decision-making power and technical qualifications, so as to ensure the consolidation of the plans and their implementation in the various national sectors; the NFP would thus help strengthen and enhance measures for cooperation among the countries.

### 3. Functions of the NFP

The primary functions of the NFP under the RPWHD are:

3.1 Promotion. To disseminate the RPWHD's activities in the health sector and the related sectors of the countries. To promote the RPWHD's activities in the country and region.

3.2 Information. To feed to the RPWHD a steady stream of information on activities in the countries (seminars, congresses, workshops, symposia, etc.) taking place in areas of interest to the Program.

3.3 Coordination. The NFP would serve as a permanent link between the RPWHD and the public and private institutions of the different sectors, organizations and women's groups participating in WHD in the country.

The NFP would participate in coordination with the meetings for national governmental and nongovernmental exchanges with the RPWHD, and work closely with the various sectoral and intersectoral programs (education, employment, welfare, social security, etc.) directed at increasing the participation of women in all walks of life.

Finally, it would foster and strengthen coordination with the NFPs in other countries of the Region for drawing up programs of cooperative activities in matters of common interest.

3.4 Execution. The NFP would carry out specific programs and activities under the Program for the promotion, dissemination and implementation of the Strategies in neglected aspects in other areas and programs of the health sector.

3.5 Support. The NFP would constitute a source of support in all aspects in the countries and Region, and would become particularly important in the identification and mobilization of local human resources and of institutional and financial resources from international agencies maintaining offices in the country.

The NFP would help:

- Identify the local experts with offices in each country with a view to compiling a register of RPWHD specialists;
- Identify the sources of statistics relevant to WHD to feed into the databank;
- Locate books and publications to feed into the databank;
- Determine the local WHD research needed for planning activities.

3.5 Monitoring and Evaluation. Ongoing evaluation of WHD plans is an essential stage to determine the effectiveness of programs. The NFP would participate in the design, coordination and execution of projects and functions of key importance in the process.

3.6 Representation. The NFP would represent the country in local and international meetings on WHD in and outside the country, and would cooperate with the RPWHD by providing information on the results of these meetings.

4. Levels of Coordination and Cooperation

The NFP would carry out the following coordination and cooperation activities:

4.1 Local. It would coordinate activities in the WHD field with:

- institutions in the health sector
- related institutions
- government agencies
- universities and other teaching establishments
- research centers
- women's organizations
- community promotion, organization and development institutions.

4.2. International. It would coordinate with PAHO in the country and region.

In the Country: It would coordinate with the PAHO/WHO country office.

In the Region (headquarters): It would coordinate with the:

- WHD Regional Program
- other technical programs
- WHD Internal Advisory Committee
- Special Subcommittee on WHD.

## ANNEX

The coordination of NFPs with PAHO/WHO may be summed up as follows:

### PAHO/WHO Country Office

The PAHO/WHO Country Offices serve as PAHO/WHO focal points in the Member Countries, where they work directly with the RPWHD and the NFPs to promote coordination, planning, implementation, monitoring and evaluation of activities bearing on WHD in the country.

### Regional Program on Women, Health and Development

- a) The Program functions as the regional focal point in PAHO.
- b) It works closely with PAHO's other technical programs in planning, coordinating, executing, monitoring and evaluating the activities involved in the Program, and with other local and international agencies.
- c) It advises the NFPs in WHD matters.

### PAHO/WHO Technical Programs

Each program considers the needs and situation of women in relation to the various technical programs, and adopts components geared to the satisfaction of those needs.

### Internal Advisory Committee on WHD

This multidisciplinary committee is made up of officers of PAHO/WHO's various technical programs, and its main function is to advise the Director in the planning, execution and evaluation of the activities constituting the WHD Program, and of advising the RPWHD in the design of its program.

### Special Subcommittee on Women, Health and Development

The Subcommittee is a body of the Executive Committee which meets to determine the state of advancement of WHD programs in the countries, proposes solutions to priority problems, and promotes concerted measures in the WHD field. It consists of five member countries elected by the Executive Committee; at present, these countries are Argentina, Bahamas, Brazil, Honduras and Mexico.